EXTENDED TO NOVEMBER 15, 2024 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. Go to www.irs.gov/Form990 for instructions and the latest information.



Depa Inter	artment o nal Reve	of the Treasury nue Service	Go to www.irs.gov/Form990 for instructions and	-	•	Open to Public Inspection
-			lar year, or tax year beginning an	d ending	_	
Β	Check if applicab	le: C Name o	forganization		D Employer identificat	ion number
	Addre		GIOUS FREEDOM COALITION			
	Name chang		usiness as		74-2124788	}
	Initial return		and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final	, 601	PENNSYLVANIA AVE NW	900	202-543-03	300
	termir ated	City or 1	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1503430.
	Amen	WADE	INGTON, DC 20004		H(a) Is this a group retur	
	Applio tion pendi		nd address of principal officer:WILLIAM J. MURRAY AS C ABOVE		for subordinates? H(b) Are all subordinates include	
Ι.	Tax-ex	empt status:) or 📃 527	If "No," attach a list	. See instructions
	Websi		RELIGIOUSFREEDOMCOALITION.ORG		H(c) Group exemption n	
			X Corporation Trust Association Other	L Year	of formation: 1982 M S	tate of legal domicile: DC
Pa	art I	Summary				
e	1	Briefly describ	be the organization's mission or most significant activities: SHAI	RING TH	IE GOSPEL; PRO	MOTING
Activities & Governance			AN IDEALS; FOSTERING RELIGIOUS FI	-		
/ern	2	Check this bo	5	osed of more	1 1	
ğ						10 10
8			dependent voting members of the governing body (Part VI, line 1b)			6
ties			of individuals employed in calendar year 2023 (Part V, line 2a)			0
ť			of volunteers (estimate if necessary)			0.
A			d business revenue from Part VIII, column (C), line 12			0.
	0	Net unrelated	business taxable income from Form 990-T, Part I, line 11		Prior Year	Current Year
	8	Contributions	and grants (Part VIII, line 1h)		1525709.	1484149.
Revenue	9		ice revenue (Part VIII, line 2g)		0.	0.
svel	10		come (Part VIII, column (A), lines 3, 4, and 7d)		-40551.	9397.
Å	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1718.	9884.
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1486876.	1503430.
			milar amounts paid (Part IX, column (A), lines 1-3)		790995.	524110.
			to or for members (Part IX, column (A), line 4)		0.	0.
s	I	Salaries othe	r compensation, employee benefits (Part IX, column (A), lines 5-10	۱ – T	394373.	423242.
Jse	16a	Professional f	undraising fees (Part IX, column (A), line 11e)	/	0.	0.
Expenses	b	Total fundrais	undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25)	257.		
ш	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)		563297.	459773.
			es. Add lines 13-17 (must equal Part IX, column (A), line 25)		1748665.	1407125.
	19		expenses. Subtract line 18 from line 12		-261789.	96305.
or	8		•		ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		631962.	711076.
dBs	21	Total liabilities	s (Part X, line 26)		58608.	16652.
Fund Balances	22		fund balances. Subtract line 21 from line 20		573354.	694424.
P	art II					
			I declare that I have examined this return, including accompanying schedu			nowledge and belief, it is
true	e, corre	ct, and complete	. Declaration of preparer (other than officer) is based on all information of	which prepare		
		Willi	am J. Murray			/18/2024
Sig	in	Signature of o	fficer /		Date	

Sign	Signature of officer		Date	
Here	WILLIAM J. MURRAY, PRESID	ENT		
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date Check	PTIN
Paid	GARY BESSON, CPA		06/13/24 self-employed	
Preparer	Firm's name GB COMPANY LLC -	VA	Firm's EIN 46	5-2591439
Use Only	Firm's address 6084 FRANCONIA RO	AD, SUITE D		
	ALEXANDRIA, VA 22	310	Phone no. 703	3-354-5557
May the I	RS discuss this return with the preparer shown abo	ove? See instructions		X Yes No
LHA For	Paperwork Reduction Act Notice, see the separ	rate instructions. 332001 12-21-23		Form 990 (2023)

· · · · · · up				, occ the ocparate motion	0020	51 12 21 20	
SEE	SCHEDULE	0	FOR	ORGANIZATION	MISSION	STATEMENT	CONTINUATION

Form	990 (2023) RELIGIOUS FREEDOM COALITION	74-2124788	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		<u> </u>
•	SHARING THE GOSPEL; PROMOTING CHRISTIAN IDEALS; FOSTERIN		
	•		
	FREEDOM; AIDING PERSECUTED CHRISTIANS WORLDWIDE; ALERTIN		
	OFFICIALS AND THE PUBLIC TO THE PLIGHT OF PERSECUTED CHR	ISTIANS.	
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	XNo
	If "Yes," describe these new services on Schedule O.		
2		Yes	XNa
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as r		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	s, the total expenses, a	nd
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 792104 • including grants of \$ 243345 •) (Revenue	\$)
	EDUCATIONAL: POSTCARDS TO CONGRESS PROGRAMS PROMOTING AI		
	PROTECTION OF PERSECUTED MIDDLE EASTERN AND AFRICAN CHRI		ES
	THE DISTRIBUTION OF EDUCATIONAL PUBLICATIONS AND VIDEOS		
		EVLOSING	
	PERSECUTION OF CHRISTIANS WORLDWIDE.		
	GENERAL CHRISTIAN REFUGEE AID: THE RELIGIOUS FREEDOM COA	LITION	
	CONTINUES TO SUPPORT INTERNALLY DISPLACED PERSONS (IDPS)	IN IRAQ ANI)
	NIGERIA. IRAQI AND SYRIAN CHRISTIAN REFUGEES ARE ALSO AI	DED IN LEBAN	ION
	AND JORDAN. AID IN THESE AREAS INCLUDES A DIAPER PROGRAM		
	SPECIAL NEEDS ADULTS. FOOD PACKAGES AND ADULT DIAPER PRO		
	IN THE WEST BANK ASSISTING THE CHRISTIAN POOR AND SPECIA		
	IN BETHLEHEM AND BEIT SAHOUR. THE RFC CONTINUES TO SUPPO		LAN
4b	(Code:) (Expenses \$200065 • including grants of \$200065 •) (Revenue)
	CHRISTMAS FOR REFUGEES: THIS PROGRAM PROVIDES CHRISTMAS	CELEBRATIONS	3
	AND GIFTS FOR THE CHILDREN OF CHRISTIAN FAMILIES WHO HAV	E BEEN DRIVE	ΞN
	FROM THEIR HOMES IN SEVERAL NATIONS IN THE MIDDLE EAST A	ND NIGERIA.	
	CHILDREN AT THESE EVENTS ENJOY SINGING CAROLS, COLORING		
	GAMES, PUPPET SHOWS AND RECEIVE A HOT MEAL AND AN AGE-AP		<u></u>
	THE PROGRAM IS IN ITS 12TH YEAR. THE GREATEST NUMBER OF		
	ARE SYRIAN REFUGEES IN LEBANON. THERE ARE ALSO PROGRAMS	HELD IN SYRI	LA
	FOR CHILDREN WHO ARE IDP'S THERE.		
40	(Code:) (Expenses \$ 80700 • including grants of \$ 80700 •) (Revenue	^	<u> </u>
40	(Code:) (Expenses \$ 80700. including grants of \$ 80700.) (Revenue DIAPERS FOR REFUGEES: THROUGH THIS PROGRAM, THE RELIGIOU)
	COALITION DISTRIBUTES MILLIONS OF DIAPERS TO DISPLACED A		
	CHRISTIAN REFUGEE FAMILIES EACH YEAR. YEARS OF WAR IN IR		7
	CAUSED A LACK OF MEDICAL CARE, LEADING TO INCREASED NEED		
	DIAPERS. THE INFANT PROGRAM HAS BEEN DECREASED BECAUSE O	F THE INCREF	\SE
	IN SPECIAL NEEDS ADULT DIAPER REQUESTS. ADULT DIAPERS AR	E CONSIDERAF	3LY
	MORE EXPENSIVE THAN INFANT DIAPERS BUT HAVE A LIFE CHANG		
	ADULTS NEEDING DIAPERS BECAUSE OF INJURIES OR ADVANCED A		<u></u>
		GE NO HONGER	<u> </u>
	HAVE TO SLEEP ON THE FLOOR.		
4d	Other program services (Describe on Schedule O.)		
-	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 1072869.		
-+0			
	SEE SCHEDULE O FOR CONTINUATION (S		90 (2023)
332002	SEE SCHEDULE O FOR CONTINUATION (S	/	

Form	990	(2023)

Form 990 (2023) RELIGIOUS FREEDOM COALITION
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	•		v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</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		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	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			
	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," complete Schedule D,			
a	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 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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	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	4.41-	х	
15	or more? If "Yes," complete Schedule F, Parts I and IV	14b	<u></u>	
15	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? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		х
20-	complete Schedule G, Part III	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
-	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х

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Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? 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?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?If			37
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			37
	contributions? If "Yes," complete Schedule M	30		X X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X.
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		х	
0 -	Part V, line 1	34	~	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	051		
20	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	26		x
27	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		- 23
37		37		x
20	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	31		- 23
38	Notes All Four 000 films are resulted by complete Oak adds O	38	х	
Pa	tt V Statements Regarding Other IRS Filings and Tax Compliance	30		
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 6		100	110
b				
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
v	(gambling) winnings to prize winners?	1c	х	
				<u> </u>

Form 990	
Part V	Sta

023) RELIGIOUS FREEDOM COALITION Statements Regarding Other IRS Filings and Tax Compliance (continued)

2a Inter the number of employees reported on form W3, Transmital of Wage and Tax Statements. 2a 6 b If a teat one is reported on line 2a, dd the organization filia al required federal employment tax returns? 2b X a Dat the organization have unrelated busines groups income of 31,000 or more during the year? 2b X b If Yes, " has a field a form 900 Tice this year? // Yor to line 3b, provide an exploration or Schedule O 3a X a At any time during the calendar year, did the organization thar an interest in, or a signature or other authority over, a financial account is a torsign country (such as a bank account, securities account, or other financial Accounts (FBAR). 5a X b D dat sy tasaing country (such as a bank account, securities account, or other financial Accounts (FBAR). 5a X c D dat sy tasaing country (such as a bank account, securities account, or other financial Accounts (FBAR). 5a X d D dat sy tasaing constraints have annual gross receipts that are normally greater than \$100,000, and did the organization solution any contributions or gifts 5a X d H **s, "indicate the number of Form 8282 field during the year 7a X 7b 1* *s, "indicate the number of Form 8282 field during the year 7a 7a </th <th></th> <th></th> <th></th> <th></th> <th>Yes</th> <th>No</th>					Yes	No
b If a least one is reported on line 2a, ddl the organization file al required fearl employment tax returns? 2b X 3a Ddl the organization have unrelated business gross income of \$1,000 or more during the year? 3b X 3b If "Yes," has it filed a Form 80c-T for this year? 3b X 4a An at mixed uning 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 accounts (FBAR). 5a Was the organization have an interest in, or a signature or other authority over, a financial Accounts (FBAR). 5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solution and gross receipts that are normally greater than \$100,000, and did the organization solution and gross receipts that are normally greater than \$100,000, and did the organization solution and gross receipts that are normally greater than \$100,000, and did the organization solution and gross receipts that are normally greater than \$100,000, and did the organization solution and greas receipts be period of 7th are solution and greas receipts be period of 7th are solution and are solution an express statement that such contributions or gifts were not tax deductable? 6b 70 Granization sele, excluss dispece of tangit period period period period period pe	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
3a Diff the organization have uncellated biasiness gross income of \$1,000 or more during the search 3a X b If Yes, 'has it field a Form 980 T for this year? If 'Wn' to line 3b, provide an explanation on Schedule O 3b X b If Yes, 'has it field a Form 980 T for this year? If 'Wn' to line 3b, provide an explanation on Schedule O 3b X b If Yes, 'and thing requirements for FinCEN Form 114, Report of Foreign Eark, and Financial Accounts (FBAR). 5a X b If Yes, 'and the organization in the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b If Yes, 'and the organization include with every solicitation an express statement that such contributions solits any contributions that ware not tax deductible as charitable contributions? 5a X b If Yes, 'indicate the organization include with every solicitation an express statement that such contributions orgits were not tax deductible? 5b X b If Yes, 'indicate the number of forms 8282? Hed during the year 7d 7a X b If Yes, 'indicate the number of forms 8282? Hed during the year 7d 7a 7a b If Yes, 'indicate the number of forms 8282? Hed during the year 7d <th></th> <th>filed for the calendar year ending with or within the year covered by this return</th> <th>2a 6</th> <th></th> <th></th> <th></th>		filed for the calendar year ending with or within the year covered by this return	2a 6			
b If "Yes," has it filed a Form 980-T for this year? If "No" to line 30, provide an explanation on Schedule O 30 4 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account? 4 X b If "Yes," tent the name of the foreign country (such as a bank account securities account; or other financial accounts (FBAF). 5 X 50 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 X 50 Dota by taxabite party notify the organization that was or is a party to a prohibited tax shelter transaction? 56 X 60 Dotes the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solid any contributions that were not tax deductible a chartable contributions? 56 X 70 Organization shat may receive deductible contributions an express statement that such contributions or gifts were not tax deductible ac duritable activation an express statement that such contributions or gifts 66 71 Organization shat may receive deductible contribution an express statement that such contributions or gifts 72 72 Did the organization notide way not party for goods and services provided to the party? 74 74 74 Tys, 'dd the organization notide agany premiums. Girecity or indirecity, on a	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returned	ns?	2b	Х	
4 A Aray time during the calendar year, did the organization have an interest in, or a signature or other authority over, a bas back account, securities account, or other financial accounts? 4a X b If "Yes," enter the name of the foreign country Bee instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a X b Od any taxable party notify the organization in the time sheet ransaction at any time during the tax year? 5b X b Od any taxable party notify the organization in the time so is a party to a prohibit dat xe sheet transaction? 5c X c If "ves" to ite as or 5b, did the organization iter form 886-71 Const the organization iter on 886-71 Sc X b If "ves," idd the organization include with every solicitation an express statement that such contributions or gifts were not tax doductible as charatable contributions? 7a X b If "ves," idd the organization include with every solicitation and early for goods and services provided to the payor? 7a X b If "ves," iddite organization include with every solicitation are personal benefit contract? 7c X d If "ves," iddite organization include with every solicitation and party for goods and services provided to the payor? 7a X d If "ves," iddite organization network as pay premiums. fore solici conord as dearchite contributions? 7a	3a	Did the organization have unrelated business gross income of $1,000$ or more during the year?		3a		Х
If manufal account in a foreign country (such as a bark account, securities account, or other financial account)? 4a X If Manual Programment is for FinGEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a X 5a Was the organization a party to a prohibited tax shelfer transaction? 5a X 5b Did any taxable party notify the organization flat it was or is a party to a prohibited tax shelfer transaction? 5c X 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelfer transaction? 5c X 6b Did any taxable party notify the organization nate it was or is a party to a prohibited tax shelfer transaction? 5c X 6b Tyes," did the organization neither organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c). 7a X 7 Organization selle aparty or a prohibited tax shelfer transaction? 7b 7a X 9 If Yes," did the organization notify the donor of the value of the goods or services provided? 7b 7b 10 If the organization neeve aparty or a prohibite property for which it was required? 7c X 11 Yes," indicate the number of Forms 2822 lied during the year? 7d 7d 7d 12 Old the organization neeve aparty or aprohibite property for which it was required? 7c X 11 He organization neceve a contribution of cars,	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b		
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If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	15			46		x
16 X If "Yes," complete Form 4720, Schedule O. 16				15		27
If "Yes," complete Form 4720, Schedule O.	16		t income?	16		x
	10			10		
	17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities			
that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	••			17		
If "Yes," complete Form 6069.						

Form 990 (2023)

RELIGIOUS FREEDOM COALITION

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 10			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a	G , , , , , , , , , , , , , , , , , , ,	_		v
	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			v
~	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	0-	x	
a L	The governing body?	8a 0h	X	
	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9		
000			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	ieu		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		Х
	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			Х
	taxable entity during the year?	16a		
a	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	165		
Sec	exempt status with respect to such arrangements?	16b		
17	List the states with which a copy of this Form 990 is required to be filedAL, AK, AR, CA, CO, CT, DC, FL, GA	.HT	, II,	.KS
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)			
.5	for public inspection. Indicate how you made these available. Check all that apply.	c only	availe	
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	THE ORGANIZATION - 202-543-0300			

601 PENNSYLVANIA AVE NW, 900, WASHINGTON, DC 20004

SEE SCHEDULE O FOR FULL LIST OF STATES

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

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

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

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

hours for related organizations below line)hours for related organization below line)hours for related organization related below line)hours for related below line)hours for related line)hours for re	(A)	(B)			(0	C)			(D)	(E)	(F)
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Form 990 (2023) RELIGIOU	S FREEDO	MC	CC	DAI	JI?	FIC	ON		74-2	124	788	Page 8			
Part VII Section A. Officers, Directors, Trus		ploy	ees			ighe	st C	Compensated Employe	es (continued)						
(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			Average Pos (do not check box, unless p			Position (do not check more than one box, unless person is both an			(D) Reportable compensation from	(E) Reportable compensatio from related	on	(F) Estima amour othe	ited it of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization (W-2/1099-MI 1099-NEC)	SC/	compens from f organiz and rel organiza	the ation ated			
					-										
1b Subtotal								302397.		0.		0.			
c Total from continuation sheets to Part V _d Total (add lines 1b and 1c)	II, Section A							0. 302397.		0.		0.			
2 Total number of individuals (including but r compensation from the organization								eceived more than \$100),000 of reportab	le		1			
3 Did the organization list any former officer	, director, truste	ee, k	key e	empl	loye	e, or	[.] hig	phest compensated emp	oloyee on		Yes				
line 1a? <i>If</i> "Yes," <i>complete Schedule J for s</i>For any individual listed on line 1a, is the s	um of reportab	le co	omp	ensa	atior	n and	d otl				3	X			
and related organizations greater than \$15 5 Did any person listed on line 1a receive or	accrue comper	nsati	ion f	rom	any	/ unr	elat	ed organization or indiv		1	4	X			
rendered to the organization? If "Yes," con Section B. Independent Contractors	nplete Schedule	e J f	or si	ich	pers	son .					5	X			
Complete this table for your five highest co the organization. Report compensation for		-								npens	ation from				
(A) Name and business			ONE		VILLI			(B) Description of s		С	(C) ompensat	ion			
2 Total number of independent contractors (\$100,000 of compensation from the organ	•	ot lir	mite	d to		se lis N	stec	above) who received r	nore than						

Form						'RE	EDOM COA	LITION		74-2124	788 p	age 9
га	rt v	V 111						a ia thia Davt V/III				
			Check if Schedule O	conta	ains a respo	nse	or note to any lin	<u>e in this Part VIII</u>	(B)	(C)	(D)	
								Total revenue	Related or exempt function revenue	Unrelated	Révenue exc	
									lanetion revenue		sections 512	
Contributions, Gifts, Grants and Other Similar Amounts	1		Federated campaigns									
Gra			Membership dues									
fts,			Fundraising events									
ilar İlar			Related organizations									
Sir			Government grants (contr									
er ti		t	All other contributions, gifts,				1484149.					
₫ġ		~	similar amounts not included				1404149.					
no Dia		-	Noncash contributions included in Total. Add lines 1a-1f					1484149.				
<u> </u>			Total. Add lines 12-11				Business Code	11011191				
e	2	а					Ducinicae ocuc					
, <u>z</u>	~	b										
Sei		c				_						
eve		d										
Program Service Revenue		е				_						
ב		f	All other program service	reve	nue							
			Total. Add lines 2a-2f									
	3		Investment income (inclue	ding	dividends, ir	ntere	est, and					
								9397.			93	97.
	4		Income from investment of									
	5		Royalties									
					(i) Real		(ii) Personal					
	6		Gross rents	6a								
			Less: rental expenses	6b								
			Rental income or (loss)	6c								
	-		Net rental income or (loss)	(i) Securiti		(ii) Other					
	1	а	Gross amount from sales of assets other than inventory	7-		63						
		h	Less: cost or other basis	7a								
e		U	and sales expenses	7b								
'enue		c	Gain or (loss)	7c								
Rev			Net gain or (loss)									
Other	8		Gross income from fundraisi									
₹	-		including \$	-	•							
			contributions reported on									
			Part IV, line 18			8a						
		b	Less: direct expenses			8b						
		с	Net income or (loss) from	fund	Iraising ever	its						
	9	а	Gross income from gamin									
			Part IV, line 19			9a						
			Less: direct expenses			9b						
			Net income or (loss) from	-	-	s						
	10	а	Gross sales of inventory,									
			and allowances			10a						
			Less: cost of goods sold			10b						
		с	Net income or (loss) from	sale	s of inventor	у						
sno		~	PPP REFUND				Business Code 900099	8177.	8177.			
nec	11	a b	LIST RENTAL			_	900099	1707.	01//•		17	07.
Miscellaneous Revenue		D C				_	500055	1,01.			<u> </u>	57.
Be			All other revenue			_						
Σ			Total. Add lines 11a-11d					9884.				
	12		Total revenue. See instruction					1503430.	8177.	0.	111	04.

Form 990 (2023)	RELIGIOUS	FREEDOM	COALITION	74-
Part IX Statement o	f Functional Expe	enses		
Section 501(c)(3) and 501(c)	(4) organizations must o	complete all colu	mns. All other organizations	must complete column (A).

	Check if Schedule O contains a respons not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	524110.	524110.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	302397.	183206.	108905.	10286
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	46457.	20047.	2331.	24079
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	46929.	25912.	15435.	5582
10	Payroll taxes	27459.	16475.	8238.	2746
11	Fees for services (nonemployees):				
а	Management				
b	Legal	2844.		2844.	
с	Accounting	12840.		12840.	
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion				
13	Office expenses	6139.	4052.	1473.	614
14	Information technology	6548.	5234.	660.	654
15	Royalties				
16	Occupancy	29969.	19781.	7192.	2996
17	Travel	17808.	16590.	1218.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	1377.		1377.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1627.	1074.	390.	163
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 0.)				
а	PRINTING AND PUBLICATIO	143009.	105784.	2011.	35214
b	POSTAGE AND SHIPPING	137057.	93922.	15128.	28007
c	CONSULTING	24000.	18000.		6000
d	BANK AND MERCHANT FEES	11829.		11829.	
		64726.	38682.	21128.	4916
25	Total functional expenses. Add lines 1 through 24e	1407125.	1072869.	212999.	121257
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)	268508.	200183.	4492.	63833

RELIGIOUS FREEDOM COALITION

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		Check if Schedule O contains a response or no	te to any lir	ne in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			404349.	1	468595.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			794.	4	
	5	Loans and other receivables from any current o					
		trustee, key employee, creator or founder, subs	tantial con	tributor, or 35%			
		controlled entity or family member of any of the	se persons			5	
	6	Loans and other receivables from other disqual	fied persor	ns (as defined			
		under section 4958(f)(1)), and persons describe	d in sectio	n 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			2061.	9	2061.
	10a	Land, buildings, and equipment: cost or other		Γ			
		basis. Complete Part VI of Schedule D	10a	39793.			
	b	Less: accumulated depreciation		30624.	11697.	10c	9169.
	11	Investments - publicly traded securities	<u> </u>		176460.	11	216023.
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			36601.	15	15228.
	16	Total assets. Add lines 1 through 15 (must equ			631962.	16	711076.
	17	Accounts payable and accrued expenses			26140.	17	5558.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
Se	22	Loans and other payables to any current or forr	ner officer,	director,			
Liabilities		trustee, key employee, creator or founder, subs	tantial con	tributor, or 35%			
iabi		controlled entity or family member of any of the	se persons			22	
	23	Secured mortgages and notes payable to unrel	ated third p	parties		23	
	24	Unsecured notes and loans payable to unrelate	d third par	ties		24	
	25	Other liabilities (including federal income tax, pa	yables to r	elated third			
		parties, and other liabilities not included on line	s 17-24). Co	omplete Part X			
		of Schedule D			32468.	25	11094.
	26				58608.	26	16652.
s		Organizations that follow FASB ASC 958, che	ck here	X			
ice:		and complete lines 27, 28, 32, and 33.					
alar	27	Net assets without donor restrictions			573354.	27	694424.
ä	28	Net assets with donor restrictions				28	
ŭ		Organizations that do not follow FASB ASC 9	58, check	here			
г		and complete lines 29 through 33.					
ts c	29	Capital stock or trust principal, or current funds				29	
sse	30	Paid-in or capital surplus, or land, building, or ea	quipment fu	und		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in				31	
Ne	32	Total net assets or fund balances			573354.	32	694424.
	33	Total liabilities and net assets/fund balances .	<u></u>		631962.	33	711076. Form 990 (2023)

Form **990** (2023)

Part X | Balance Sheet

Form	aan	(2023)
FOUL	990	(2023)

Form	1990 (2023) RELIGIOUS FREEDOM COALITION	74-2124	788	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1)34	
2	Total expenses (must equal Part IX, column (A), line 25)	2)71	-
3	Revenue less expenses. Subtract line 2 from line 1	3	-	963	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		733.	
5	Net unrealized gains (losses) on investments	5		247	65.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	69	944	24.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			Yes	No
20	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
Zđ	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		Za		
	separate basis, consolidated basis, or both:	JUITA			
	Separate basis Consolidated basis Both consolidated and separate basis				х
b	Were the organization's financial statements audited by an independent accountant?		2b		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e dasis,			
	consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	3b		
			Form	9 90 (2023)

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Department of the Treasury

Internal Revenue Service

(Form 990)

Total

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2023
Open to Public Inspection

Name of the	organization
-------------	--------------

Nam	ie of i	the organization ਸੁਦਾਰ ਰ			N				・identification numbe
Da	rt I			EDOM COALITIO		hia wawt \ C			4-2124788
		Reason for Public						IS.	
	organ	nization is not a private found		· · ·					
1	\square	 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 							
2	\square						,		
3	\square	A hospital or a cooperative							Ale - 1
4		A medical research organiz	zation operated in co	onjunction with a nospita	I described	a in sectio	A)(1)(a)071 nc)(III). Enter	the hospital's name,
-		city, and state: An organization operated f	ior the banefit of a a		d ar anara	tad by a a	averamental	unit dooorik	and in
5				ollege or university owner	u or opera	ted by a g	overnmental	unit descrit	bed in
~		section 170(b)(1)(A)(iv). (M- A		
6	X	A federal, state, or local go	-						transfer Die seiter ein die seit die
1	Δ	An organization that norma		antial part of its support	rom a gov	rnmenta	i unit or from t	ne general	public described in
•		section 170(b)(1)(A)(vi). (C			• 11 \				
8	\square	A community trust describ						11	
9		An agricultural research or							
		or university or a non-land-	grant college of agric	culture (see instructions)	. Enter the	name, cit	y, and state o	r the colleg	je or
10		university:							
10		An organization that norma							
		activities related to its exer							
		income and unrelated busi		e (less section 511 tax) if		esses acqu	lired by the of	gamzation	alter June 30, 1975.
11		See section 509(a)(2). (Co		sively to test for public of	foty Soo	contion El	00(a)(4)		
12		An organization organized An organization organized	-	•	-			orn out th	nurnesse of one or
12		more publicly supported of							
		lines 12a through 12d that							
а		Type I. A supporting org							<i>i</i> aivina
u	L	the supported organizati							
		organization. You must			amajonty				supporting
b		Type II. A supporting org			tion with it	ts sunnort	ed organizatio	on(s) by ha	avina
~		control or management of							
		organization(s). You mus						.gee ear	
с		Type III functionally inte			in connec	tion with	and functiona	llv integrat	ed with.
-	-	its supported organizatio							
d		Type III non-functional						rted organi	ization(s)
		that is not functionally in							
		requirement (see instruct	• •	• •	•		•		
е		_ ` `	,	written determination fro				II. Type III	
		functionally integrated, o					JI / JI	<i>,</i> ,	
f	Ente	er the number of supported		, , , , , , , , , , , , , , , , , , , ,					
g	Prov	vide the following informatio							·
	((i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount of	-	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions

Schedule A (Form 990) 2023 Part II Support Sch

RELIGIOUS FREEDOM COALITION

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Suppor	nedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complet	r 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	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	1418271.	1442440.	1689091.	1525709.	1484149.	7559660.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
2	The value of services or facilities								
3	furnished by a governmental unit to								
	the organization without charge	1418271.	1442440.	1689091.	1525709.	1484149.	7559660.		
	Total. Add lines 1 through 3	14102/1.	1442440.	1009091.	1525709.	1404149.	7559000.		
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)								
6	Public support. Subtract line 5 from line 4.						7559660.		
Sec	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total		
7	Amounts from line 4	1418271.	1442440.	1689091.	1525709.	1484149.	7559660.		
	Gross income from interest.								
	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources	33698.	26016.	56066.	16385.	9397.	141562.		
٥	Net income from unrelated business					50570			
9									
	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)						8801000		
11	Total support. Add lines 7 through 10						7701222.		
12	Gross receipts from related activities,	, etc. (see instruction	ons)			12			
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section &	501(c)(3)			
	organization, check this box and stop						L		
	ction C. Computation of Publ								
	Public support percentage for 2023 (14	98.16 %		
						15	98.16 %		
16a	33 1/3% support test - 2023. If the o								
	stop here. The organization qualifies								
b	33 1/3% support test - 2022. If the o	organization did no	t check a box on l	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	nis box		
	and stop here. The organization qual	lifies as a publicly s	supported organization	ation					
17a	10% -facts-and-circumstances tes	t - 2023. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,		
	and if the organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the organization								
	meets the facts and circumstances test. The organization qualifies as a publicly supported organization								
b	10% -facts-and-circumstances tes	t - 2022. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or ⁻	17a, and line 15 is	10% or		
	more, and if the organization meets th	he facts-and-circur	nstances test, che	ck this box and st	op here. Explain i	n Part VI how the			
	organization meets the facts-and-circ								
18	Private foundation. If the organization								

Schedule A (Form 990) 2023

RELIGIOUS FREEDOM COALITION

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)
Section A Public Support

Sei	Stion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization'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						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the emount or line 12 for the upper						
	amount on line 13 for the year						
	Add lines 7a and 7b						
Ser	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	(a) 2013	(6) 2020		(0) 2022	(e) 2020	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organ	ization,
	check this box and stop here						
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2023 (line 8, column (f), c	divided by line 13,	column (f))		15	%
16	Public support percentage from 2022	2 Schedule A, Part	III, line 15			16	%
See	ction D. Computation of Inve	stment Incom	e Percentage				
17	Investment income percentage for 20	023 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from					18	%
	33 1/3% support tests - 2023. If the						
-	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2022. If the						%, and
~	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
-	<u></u>			, ,			

RELIGIOUS FREEDOM COALITION

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.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *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

Schedule A (Form 990) 2023 RELIGIOUS FREEDOM COALITION

1

2

Pa	rt IV	Supporting Organizations (continued)			_
				Yes	No
11	Has t	the organization accepted a gift or contribution from any of the following persons?			
а	A pe	rson who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c k	below, the governing body of a supported organization?	11a		
b	A fan	nily member of a person described on line 11a above?	11b		
с	A 359	% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detai	il in Part VI.	11c		
Sec	tion	B. Type I Supporting Organizations			
			_	Yes	No
	D ¹ I I I				

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

organization(s) that operated, supervised, or controlled the supporting organization? 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).	1		

Section D. All Type III Supporting Organizations

		_	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			l
	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? If "No," explain in Part VI how			
	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? If "Yes," describe in Part VI the role the organization'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 yea(see instructions).
- a 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.*
- c _____ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? 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.*

Section	A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Ne	et short-term capital gain	1		
2 Re	ecoveries of prior-year distributions	2		
3 Ot	ther gross income (see instructions)	3		
4 Ac	dd lines 1 through 3.	4		
5 De	epreciation and depletion	5		
6 Pc	ortion of operating expenses paid or incurred for production or			
cc	llection of gross income or for management, conservation, or			
m	aintenance of property held for production of income (see instructions)	6		
7 Ot	ther expenses (see instructions)	7		
8 Ac	djusted 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 Ag	ggregate fair market value of all non-exempt-use assets (see			
ins	structions for short tax year or assets held for part of year):			
a Av	verage monthly value of securities	1a		
b Av	verage monthly cash balances	1b		
c Fa	ir market value of other non-exempt-use assets	1c		
d To	otal (add lines 1a, 1b, and 1c)	1d		
e Di	scount claimed for blockage or other factors			
(e)	xplain in detail in Part VI):			
2 Ac	cquisition indebtedness applicable to non-exempt-use assets	2		
3 Su	ubtract line 2 from line 1d.	3		
4 Ca	ash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
se	e instructions).	4		
5 Ne	et value of non-exempt-use assets (subtract line 4 from line 3)	5		
	ultiply line 5 by 0.035.	6		
7 Re	ecoveries of prior-year distributions	7		
8 M	inimum Asset Amount (add line 7 to line 6)	8		
Section	C - Distributable Amount			Current Year
1 Ac	djusted net income for prior year (from Section A, line 8, column A)	1		
2 Er	nter 0.85 of line 1.	2		
3 M	inimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Er	nter greater of line 2 or line 3.	4		
5 In	come tax imposed in prior year	5		
	stributable Amount. Subtract line 5 from line 4, unless subject to			
en	nergency temporary reduction (see instructions).	6		

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

332027 12-21-23

Schedule A	(Form 990)	2023
	0000000	2020

RELIGIOUS FREEDOM COALITION

Pa	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations _{(continu}	led)	
Sect	ion D - Distributions		•		Current Year
1	Amounts paid to supported organizations to accomplish exe		1		
2	Amounts paid to perform activity that directly furthers exemption				
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	3	
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required - pro		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	ne organization is responsive	е		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2023	าร	Distributable Amount for 2023
_1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
C	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
с	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, <i>explain in Part VI.</i> 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				
•	and 4c.				
8					
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	Excess from 2023				

Schedule A (Form 990) 2023

Schedule A	(Form 990) 2023	RELIGIOUS	FREEDOM	COALITION		74-2124788	Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D, Section D, lines 5, 6, and	, 2, 3b, 3c, 4b, 4c, 5a lines 2 and 3; Part IV,	, 6, 9a, 9b, 9c, 1 Section E, lines	1a, 11b, and 11c; F 1c, 2a, 2b, 3a, and	Part IV, Section B, lines 1 I 3b; Part V, line 1; Part V	and 2; Part IV, Section , Section B, line 1e; Par	C, t V,
	(See instructions.)		1 L, 11163 Z, J, ai	id 0. Also complete	this part for any addition		

SCHEDULE D)
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(Form	990)
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332051 09-28-23

Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.



Employer identification number

74-2124788

Department of the Treasury Internal Revenue Service Name of the organization

RELIGIOUS FREEDOM COALITION

Pa	art I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.Complete if the							
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.						
		(a) Donor advised funds	(b) Funds and other accounts					
1	Total number at end of year							
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor advisors in	-						
	are the organization's property, subject to the organization's							
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be used	only					
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose confe	rring					
Pa		•	, line 7.					
1	Purpose(s) of conservation easements held by the organizat	· · · · · · · · · · · · · · · · · · ·						
	Preservation of land for public use (for example, recrea		orically important land area					
	Protection of natural habitat	Preservation of a cert	ified historic structure					
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form of a co	onservation easement on the last Held at the End of the Tax Year					
	day of the tax year.							
	Total number of conservation easements		2a					
b			2b					
с	Number of conservation easements on a certified historic str		2c					
d	Number of conservation easements included on line 2c acqu							
~	on a historic structure listed in the National Register		2d					
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the organ	nization during the tax					
4	year	promont in logated						
4 5	Number of states where property subject to conservation ea Does the organization have a written policy regarding the pe							
5	violations, and enforcement of the conservation easements		Yes No					
6	Staff and volunteer hours devoted to monitoring, inspecting,							
•								
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation ea	asements during the year					
	······································							
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170(h)(4)(B))(i)					
	and section 170(h)(4)(B)(ii)?							
9	In Part XIII, describe how the organization reports conservat							
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial statements th	hat describes the					
	organization's accounting for conservation easements.							
Pai	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or Other	Similar Assets.					
	Complete if the organization answered "Yes" on Forn	n 990, Part IV, line 8.						
1a	If the organization elected, as permitted under FASB ASC 98	58, not to report in its revenue statement and ba	lance sheet works					
	of art, historical treasures, or other similar assets held for pu	blic exhibition, education, or research in furthera	ance of public					
	service, provide in Part XIII the text of the footnote to its fina	incial statements that describes these items.						
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and balanc	ce sheet works of					
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furtheranc	e of public service,					
	provide the following amounts relating to these items.							
	(i) Revenue included on Form 990, Part VIII, line 1							
	(ii) Assets included in Form 990, Part X							
2	If the organization received or held works of art, historical tre		provide					
	the following amounts required to be reported under FASB A							
	Revenue included on Form 990, Part VIII, line 1							
	Assets included in Form 990, Part X							
LHA	For Paperwork Reduction Act Notice, see the Instruction	is for Form 990.	Schedule D (Form 990) 2023					

Sche	dule D (Form 990) 2023 RELIGIO	US FREEDOM	COALITI	ON		74	-2124	788	Page 2
Par	t III Organizations Maintaining C	ollections of A	rt, Historical	Treasures, o	or Othe	er Similar /	Assets(co	ontinue	d)
3	Using the organization's acquisition, accessi	on, and other record	ds, check any of	the following tha	at make s	ignificant use	e of its		
	collection items (check all that apply).								
а	Public exhibition	c	I 🛄 Loan or	exchange progra	am				
b	Scholarly research	e	• 🛄 Other_						
с	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	in how they furth	er the organizati	on's exer	mpt purpose	in Part XIII.		
5	During the year, did the organization solicit o	r receive donations	of art, historical	treasures, or oth	er similar	assets		_	
	to be sold to raise funds rather than to be ma						Ye		No
Par	t IV Escrow and Custodial Arran		te if the organiza	ation answered "	Yes" on I	Form 990, Pa	rt IV, line 9	, or	
	reported an amount on Form 990, Par	t X, line 21.							
1a	Is the organization an agent, trustee, custodi	an, or other interme	diary for contrib	utions or other a	ssets not	included		-	
	on Form 990, Part X?						🗀 Ye	s L	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table:						
							Ame	ount	
	Beginning balance								
	Additions during the year								
е	Distributions during the year								
f	Ending balance								1
	Did the organization include an amount on Fe					ity?	📖 Ye	S L	
	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds Complete if					•		L	
Par		(a) Current year	(b) Prior yea			d. (d) Three years	back (a)	Four yea	re hack
4		(a) Ourrent year	(b) Horyea					i our you	
	Beginning of year balance								
	Net investment earnings, gains, and losses								
	Grants or scholarships								
e	Other expenditures for facilities								
	and programs								
	Administrative expenses End of year balance								
g 2	Provide the estimated percentage of the curr	cont year and balance	l so (lino 1 a colun	n (a)) hold as:					
	Board designated or quasi-endowment		%	in (a)) neid as.					
	Permanent endowment	%							
		/0 %							
Ũ	The percentages on lines 2a, 2b, and 2c sho	-							
3a	Are there endowment funds not in the posse		ation that are he	ld and administe	ered for th	ne			
	organization by:	eelen er une erganne						Ye	s No
	(i) Unrelated organizations?						34	a(i)	+
	(ii) Related organizations?							(ii)	
b	If "Yes" on line 3a(ii), are the related organiza							b	
4	Describe in Part XIII the intended uses of the						·····		
Par	t VI Land, Buildings, and Equipm	ient							
	Complete if the organization answered	d "Yes" on Form 990	0, Part IV, line 1 ⁻	a. See Form 990), Part X,	line 10.			
	Description of property	(a) Cost or c basis (investr	• • •	Cost or other Isis (other)	• •	ccumulated	(d) I	3ook va	lue
1a	Land								
	Buildings								
	Leasehold improvements		1						
	Equipment			39793.		30624	•	9	169.
	Other								
	. Add lines 1a through 1e. (Column (d) must e		X, line 10c, col	umn (B))				9	169.

Schedule D (Form 990) 2023

Part VII	Investments -	- Other Securities		
Schedule D	(Form 990) 2023	RELIGIOUS	FREEDOM	COALITION

Complete if the organization answered "Yes" c (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	of-vear market value
	(2) 20011 2000		
2) Closely held equity interests			
3) Other			
(A)			
(F) (B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Fotal. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	n Form 990. Part IV. line	11c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	of-year market value
(1)	()		,
(1)		1	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" of	n Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
	escription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col.	<i>(B)</i>)		
Part X Other Liabilities	· // ·····		
Complete if the organization answered "Yes" of	n Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) LEASE LIABILITIES			11094
(3)			
(4)			
(5)			
(6)			
_/			
(7)			
(7)			
(8)			
	<i>(B</i>))		11094

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... X

Sche	hedule D (Form 990) 2023 RELIGIOUS FREEDOM COALITION 7				74-2124788 _{Pag}		
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	ents With					
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.					
1	Total revenue, gains, and other support per audited financial statements			1	1528	3195.	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains (losses) on investments	. 2a	24765.				
b	Donated services and use of facilities	. 2b					
с	Recoveries of prior year grants	. 2c					
d	Other (Describe in Part XIII.)	2d					
е	Add lines 2a through 2d			2e		1765.	
3	Subtract line 2e from line 1			3	1503	3430.	
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					
b	Other (Describe in Part XIII.)	4b				_	
С	Add lines 4a and 4b			4c		0.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5		3430.	
Pa	t XII Reconciliation of Expenses per Audited Financial Stater		Expenses per	Returi	n		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12				1 4 0 1	7105	
1	Total expenses and losses per audited financial statements			1	140	7125.	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities						
b	Prior year adjustments						
С	Other losses						
d	Other (Describe in Part XIII.)					•	
е	Add lines 2a through 2d			2e	4 4 6 6	0.	
3	Subtract line 2e from line 1			3	140	7125.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a					
b	Other (Describe in Part XIII.)	. 4 b				•	
С	Add lines 4a and 4b			4c	4 4 4 4	0.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	140	/125.	
Pa	rt XIII Supplemental Information						

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

PART X, LINE 2:

EXPLANATION: ORGANIZATION HAS ADOPTED THE GUIDANCE IN THE INCOME TAX
STANDARD REGARDING THE RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX
POSITIONS. ORGANIZATION BELIEVES THAT IT HAS NO UNRELATED TAXABLE INCOME
NOR IS AWARE OF ANY ACTIVITIES THAT WOULD JEOPARDIZE ITS TAX-EXEMPT
STATUS. SHOULD THAT STATUS BE CHALLENGED IN THE FUTURE, ORGANIZATION'S
2020, 2021 AND 2022 TAX YEARS ARE OPEN FOR EXAMINATION BY THE IRS.

	or the grants or a		the selection criteria used to award the g		Yes X No
2 For grantmakers. Desc	cribe in Part V the	e organization's	procedures for monitoring the use of its	grants and other assistance ou	tside the
United States.					
			an be duplicated if additional space is ne		(0
(a) Region	(b) Number of	employees,	(d) Activities conducted in the region	(e) If activity listed in (d)	(f) Total expenditures
	offices in the region	agents, and	(by type) (such as, fundraising, pro- gram services, investments, grants to	is a program service, describe specific type	for and
	in the region	independent contractors in the region	recipients located in the region)	of service(s) in the region	investments in the region
MIDDLE EAST AND					
NORTH AFRICA -					
ALGERIA, BAHRAIN,			GRANT		
DJIBOUTI, EGYPT,			;LISTTOTAL 223343		344615
SUB-SAHARAN AFRICA -					
ANGOLA, BENIN,					
, , , BURKINA					
FASO,			GRANT		129495
EAST ASIA AND THE					
PACIFIC - AUSTRALIA,					
BRUNEI, BURMA,					
CAMBODIA			GRANT		50000
CAMDODIA,			GIANI		50000
	1				
3 a Subtotal	C				524110
b Total from continuation					
sheets to Part I	0				C
c Totals (add lines 3a					-
and 3b)	0	, c			524110

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

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

RELIGIOUS FREEDOM COALITION

For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance

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

LHA 332071 11-29-23

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Employer identification number

74-2124788

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

WIRE TRANSFER			
WIRE TRANSFER			
WIRE TRANSFER			
WIRE TRANSFER			
	٥.		N/A
WIRE TRANSFER	Ο.		N/A
WIRE TRANSFER	Ο.		N/A
WIRE TRANSFER	Ο.		N/A
WIRE TRANSFER	Ο.		N/A
~	VIRE TRANSFER	WIRE TRANSFER 0. WIRE TRANSFER 0.	VIRE TRANSFER 0.

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax

exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Schedule F (Form 990) 2023

74-2124788

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

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

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023 RELIGIOUS FREEDOM COALITION Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)</i>	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)</i>	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2023

 Part V
 Supplemental Information

 Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART II, COLUMN (D):

(A) REGION:

Schedule F (Form 990) 2023

MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,

RELIGIOUS FREEDOM COALITION

(D) PURPOSE OF GRANT: CHRISTMAS FOR REFUGEES: THIS PROGRAM PROVIDES

CHRISTMAS CELEBRATIONS AND GIFTS FOR THE CHILDREN OF CHRISTIAN FAMILIES

WHO HAVE BEEN DRIVEN FROM THEIR HOMES IN SEVERAL NATIONS IN THE MIDDLE

EAST AND NIGERIA. CHILDREN AT THESE EVENTS ENJOY SINGING CAROLS, COLORING

CONTESTS, GAMES, PUPPET SHOWS AND RECEIVE A HOT MEAL AND AN

AGE-APPROPRIATE GIFT. THE PROGRAM IS IN ITS 12TH YEAR. THE GREATEST

NUMBER OF CHILDREN SERVED ARE SYRIAN REFUGEES IN LEBANON. THERE ARE ALSO

PROGRAMS HELD IN SYRIA FOR CHILDREN WHO ARE IDP'S THERE.

(A) REGION:

MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,

(D) PURPOSE OF GRANT: DIAPERS FOR REFUGEES: THROUGH THIS PROGRAM, THE RELIGIOUS FREEDOM COALITION DISTRIBUTES MILLIONS OF DIAPERS TO DISPLACED

AND PERSECUTED CHRISTIAN REFUGEE FAMILIES EACH YEAR. YEARS OF WAR IN IRAQ

AND SYRIA CAUSED A LACK OF MEDICAL CARE, LEADING TO INCREASED NEED FOR

ADULT DIAPERS. THE INFANT PROGRAM HAS BEEN DECREASED BECAUSE OF THE

INCREASE IN SPECIAL NEEDS ADULT DIAPER REQUESTS. ADULT DIAPERS ARE

CONSIDERABLY MORE EXPENSIVE THAN INFANT DIAPERS BUT HAVE A LIFE CHANGING

EFFECT. ADULTS NEEDING DIAPERS BECAUSE OF INJURIES OR ADVANCED AGE NO

LONGER HAVE TO SLEEP ON THE FLOOR.

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: NIGERIA OUTREACH: A MASSACRE BY MUSLIM FULANI

HERDSMEN JUST SOUTH OF JOS CITY DURING CHRISTMAS, 2023 KILLED HUNDREDS OF 332075 11-29-23 Schedule F (Form 990) 2023

Schedule F (Form 990) 2023 RELIGIOUS FREEDOM COALITION	74-2124788	Page 5
Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method) (estimated number of recipients), as applicable. Also complete this part to provide any additional information	d); and Part III, column (c)
CHRISTIAN FAMERS. MORE THAN 1,000 CHRISTIAN CHILDREN BECAM	IE ORPHANS	
BECAUSE OF THE ATTACKS. THE RFC HAS SUPPLIED FOOD, MEDICAL	AID AND	
CLOTHING TO THE ORPHANS AND IS CURRENTLY WORKING TO PLACE	THEM IN HOME	S
OF RELATIVES. RFC IS PROVIDING FINANCIAL AID TO FAMILIES A	CCEPTING	
ORPHANS. A CHRISTIAN ORPHANAGE SUPPORTED BY THE RFC IN PLA	TEAU STATE,	
NIGERIA WAS BURNED TO THE GROUND BY SUNNI MUSLIM FULANI HE	RDSMEN IN 20	21.
EVEN THE CHILDREN'S CLOTHING WAS LOST. THE RFC HAS NOW PUR	CHASED LAND	AND
CONSTRUCTED BUILDINGS TO HOUSE 147 ORPHANS WHO HAVE LOST P	ARENTS TO	
JIHAD. THE ORPHANAGE WAS MOVED INSIDE THE CITY OF JOS FOR	SAFETY. THE	RFC
SUPPLIES ALL FOOD AND MEDICAL NEEDS FOR THE NEW FACILITY.	THE FARM THA	т
HELPED THE CHILDREN LEARN TO PROVIDE FOR THEMSELVES WAS AL	SO DESTROYED	IN
2021, BUT HAS NOW BEEN REESTABLISHED AT A NEW, SAFER LOCAT	ION. IN BENU	E
STATE, THE RFC PROVIDED HYGI		

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

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



74-2124788

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

RELIGIOUS FREEDOM COALITION

CHRISTIANS WORLDWIDE; ALERTING ELECTED OFFICIALS AND THE PUBLIC TO THE

PLIGHT OF PERSECUTED CHRISTIANS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

SUMMER CAMP FOR CHILDREN IN JORDAN. OVER SEVERAL YEARS THE RFC HAS

REPLACED THE WATER SYSTEM, AS WELL AS ALL MATTRESSES, AND ROOFS. THE

KITCHEN HAS ALSO BEEN REMODELED TO STANDARDS. A STATE-OF-THE-ART

SECURITY SYSTEM WITH CAMERAS COVERING THE ENTIRE CAMP WAS ALSO

INSTALLED. A NEW RUBBER MAT OUTDOOR PLAY AREA WITH SUNSCREEN WAS ALSO

RECENTLY ADDED. IN LEBANON, A DEVASTATING EXPLOSION OCCURRED AT A PORT

WAREHOUSE IN BEIRUT CAUSING DAMAGE AND LOSS OF LIVES IN A PREDOMINANTLY

CHRISTIAN AREA. HELP WAS GIVEN TO REPLACE DOZENS OF BROKEN WINDOWS AT A

CHURCH SCHOOL. FOOD PACKAGES WERE ALSO SUPPLIED TO CHRISTIAN FAMILIES

PUT OUT OF WORK BY THE EXPLOSION.

NIGERIA OUTREACH: A MASSACRE BY MUSLIM FULANI HERDSMEN JUST SOUTH OF JOS CITY DURING CHRISTMAS, 2023 KILLED HUNDREDS OF CHRISTIAN FAMERS. MORE THAN 1,000 CHRISTIAN CHILDREN BECAME ORPHANS BECAUSE OF THE ATTACKS. THE RFC HAS SUPPLIED FOOD, MEDICAL AID AND CLOTHING TO THE ORPHANS AND IS CURRENTLY WORKING TO PLACE THEM IN HOMES OF RELATIVES. RFC IS PROVIDING FINANCIAL AID TO FAMILIES ACCEPTING ORPHANS. A CHRISTIAN ORPHANAGE SUPPORTED BY THE RFC IN PLATEAU STATE, NIGERIA WAS BURNED TO THE GROUND BY SUNNI MUSLIM FULANI HERDSMEN IN 2021. EVEN THE CHILDREN'S CLOTHING WAS LOST. THE RFC HAS NOW PURCHASED LAND AND CONSTRUCTED BUILDINGS TO HOUSE 147 ORPHANS WHO HAVE LOST PARENTS TO For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2023	Page 2
Name of the organization RELIGIOUS FREEDOM COALITION	Employer identification number $74 - 2124788$
JIHAD. THE ORPHANAGE WAS MOVED INSIDE THE CITY OF JOS FOR	SAFETY. THE
RFC SUPPLIES ALL FOOD AND MEDICAL NEEDS FOR THE NEW FACIL	ITY. THE FARM
THAT HELPED THE CHILDREN LEARN TO PROVIDE FOR THEMSELVES	WAS ALSO
DESTROYED IN 2021, BUT HAS NOW BEEN REESTABLISHED AT A NE	W, SAFER
LOCATION. IN BENUE STATE, THE RFC PROVIDED HYGIENE PACKAG	ES FOR IDP
CAMPS FULL OF DISPLACED CHRISTIANS. CONSTRUCTION OF A SCH	OOL BUILDING
WAS COMPLETED AT AN IDP CAMP NEAR MAKURDI IN BENUE STATE.	ADDITIONAL
AID WAS PROVIDED TO VILLAGES THAT HAD BEEN ATTACKED BY SU	NNI MUSLIM
FULANI HERDSMEN.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
OTHER: SPREADING OF THE GOSPEL TO THE MASSES AND PROMOTIN	G CHRISTIAN
IDEALS AND FOSTERING RELIGIOUS FREEDOM THROUGH PUBLICATIO	NS AND
LECTURE.	
FORM 990, PART VI, SECTION A, LINE 2:	
THE PRESIDENT AND TREASURER ARE MARRIED.	
FORM 990, PART VI, SECTION B, LINE 11B:	
EACH MEMBER OF THE BOARD OF DIRECTORS IS PROVIDED A COPY	OF THE FORM 990
AND ALLOWED TO COMMENT. ADDITIONALLY, THE PRESIDENT AND A	CCOUNTANT REVIEW
THE FORM 990 IN DETAIL AND ISSUE AN APPROVAL PRIOR TO ITS	SUBMISSION.
FORM 990, PART VI, SECTION B, LINE 12C:	
THE ORGANIZATION HAS AN ESTABLISHED CONFLICT OF INTEREST	POLICY THAT ALL

OFFICERS ARE REQUIRED TO READ AND ACKNOWLEDGE THROUGH SIGNATURE. COPIES OF

THE CONFLICT POLICY ACKNOWLEDGEMENTS ARE MAINTAINED BY THE ORGANIZATION.

RELIGIOUS FREEDOM COALITION

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

THE POLICY REQUIRES THAT ALL CHANGES IN COMPENSATION FOR THE OFFICERS ARE

MADE AFTER REVIEWING COMPARABILITY DATA.

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

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

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY

AND FINANCIAL STATEMENTS AVAILABLE FOR INSPECTION UPON REQUEST.

SCH	EDULE R

(Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

2023 Open to Public Inspection

Name of the organization

RELIGIOUS FREEDOM COALITION

Employer identification number 74 - 2124788

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, 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

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No
RELIGIOUS FREEDOM ACTION COALITION -							
31-1802364, PO BOX 7066, FREDERICKSBURG, VA							
22407	POLITICAL ACTIVISM	VIRGINIA	501(C)(4)				X
	-						
	-						
	-						

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

Schedule R (Form 990) 2023

Schedule R (Form 990) 2023 RELIGIOUS FREEDOM COALITION

74-2124788 Page 2

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

(a)	(b)	(c)	(d)		(e)		(f)	((g)	(I	h)	(i)		(j)	(k						
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	(state or entity								nant income unrelated, rom tax under s 512-514)	Share inc	e of total come	end-	are of of-year sets	alloca	ortionate tions?	Code V-U amount in 20 of Sche	box ⁿ dule ¹	nanaging partner?	
		country)		sections	512-514)					Yes	No	K-1 (Form 1	065) Y	′es No							
	-																				
	-																				
	-																				
	4																				
t IV Identification of Related O organizations treated as a c	I rganizations Taxable orporation or trust duri	as a Corpo	Diration or Trust. C year.	Complete if	the organizat	tion ans	wered "Ye	s" on Fo	orm 990, F	I Part IV,	, line 3	4, because it	had or	ne or r	nore re						
(a)			(b)	(c)	(d)		(e)		(f)			(g)		h)	(i Sect 512(b						
Name, address, and of related organizati	EIN on	Primary activity Le		Legal domicile (state or	Direct controlling entity		Type of (C corp, s	S corp,	Share c inco			Share of end-of-year	Perce	entage ership	5 12(b contro enti						
				foreign country)			or tru	ist)				assets			Yes						

Schedule R (Form 990) 2023 RELIGIOUS FREEDOM COALITION

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.											
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?				x						
а	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity										
	o Gift, grant, or capital contribution to related organization(s)		1b		Х						
с	Gift, grant, or capital contribution from related organization(s)		1c		X X						
d	d Loans or loan guarantees to or for related organization(s)										
e Loans or loan guarantees by related organization(s)											
f	f Dividends from related organization(s)										
g	g Sale of assets to related organization(s)		1g		Х						
	n Purchase of assets from related organization(s)		1h		Х						
i	i Exchange of assets with related organization(s)										
j Lease of facilities, equipment, or other assets to related organization(s)											
k	Lease of facilities, equipment, or other assets from related organization(s)	· · · ·	1k		Х						
I.	Performance of services or membership or fundraising solicitations for related organization(s)		11		Х						
m	n Performance of services or membership or fundraising solicitations by related organization(s)		1m		Х						
	h Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		1n		Х						
	Sharing of paid employees with related organization(s)		10		Х						
р	Reimbursement paid to related organization(s) for expenses	-	1p		Х						
	 q Reimbursement paid by related organization(s) for expenses 										
			_								
r	· Other transfer of cash or property to related organization(s)		1r		Х						
s	Conter transfer of cash or property from related organization(s)		1s		Х						
2											

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Schedule R (Form 990) 2023 RELIGIOUS FREEDOM COALITION

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are a partners 501(c) orgs Yes) s sec.)(3) .? No	(f) Share of total income	(g) Share of end-of-year assets	Dispr tior	n) opor- nate tions? No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera manag partne Yes I	al or F ging er?	(k) Percentage ownership

Schedule R (Form 990) 2023

RELIGIOUS FREEDOM COALITION

Part VII | Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.