Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



A	For th	e 2023 calendar year, or tax year beginning and	ending	_	
Β	Check if applicab	e: C Name of organization		D Employer identified	cation number
	Addre	FIRST AMENDMENT COALITION			
	Name			33-03084	83
			Room/suite	1	
	Final returr		В		0-5060
	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,332,966.
	Amer returr			H(a) Is this a group re	eturn
	Appli tion			for subordinates	?
	pend	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
1	Tax-ex	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 📃 527	If "No," attach a	list. See instructions
	Websi			H(c) Group exemption	n number
κ	⁼ orm o	f organization: 🚺 Corporation 🔄 Trust 🔄 Association 🔄 Other	L Year	of formation: 1988 N	State of legal domicile: CA
Pa	art I	Summary			
ø	1	Briefly describe the organization's mission or most significant activities: DEDI	CATED	TO ADVANCIN	G FREE
Activities & Governance		SPEECH, A FREE PRESS, GOVT. ACCOUNTABILI			
ern	2	Check this box if the organization discontinued its operations or dispo	sed of more		
Š	3				28
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	4	Number of independent voting members of the governing body (Part VI, line 1b) $% \left( 1-\frac{1}{2}\right) =0$			28
ies	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a) $\hfill \ldots$			8
ivit	6	Total number of volunteers (estimate if necessary)			0
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>		0.
		- · · · · · · · · · · · · · · · · · · ·		Prior Year	Current Year
ue	8	Contributions and grants (Part VIII, line 1h)		1,050,360.	1,310,433.
Revenue	9	Program service revenue (Part VIII, line 2g)		6,335.	21,479.
Be	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		4,649.	1,054.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,061,344.	1,332,966.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		<u> </u>	<u> </u>
	13 14	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		648,046.	1,036,439.
Expenses	160	Professional fundraising fees (Part IX, column (A), line 11e)	······	89,584.	4,500.
ben	h	Total fundraising expenses (Part IX, column (D), line 25) 193, 7	66.	0575011	1,5000
ы	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		262,891.	207,430.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,000,521.	1,248,369.
	19	Revenue less expenses. Subtract line 18 from line 12		60,823.	84,597.
or			Be	ginning of Current Year	End of Year
tets	20	Total assets (Part X, line 16)		1,418,046.	1,573,402.
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)		0.	44,613.
Net	22	Net assets or fund balances. Subtract line 21 from line 20		1,418,046.	1,528,789.
	art II				

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

				-	
Sign	Signature of officer			Date	
-	DAVID SNYDER, EXECUTIVE D	IRECTOR			
	Type or print name and title				
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN
Paid	HELEN G. BERHE	HELEN G. BERHE			P01077434
Preparer	Firm's name GILBERT CPAS			Firm's EIN 68-	0037990
Use Only	Firm's address 2880 GATEWAY OAKS	DR, STE 100			
	SACRAMENTO, CA 95	833		Phone no.916-	646-6464
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 sepa	rate instructions. 332001 12-21-23			Form <b>990</b> (2023)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2023) FIRST AMENDMENT COALITION 33-0308483 Page	2
Par	III Statement of Program Service Accomplishments	_
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission: THE FIRST AMENDMENT COALITION PROTECTS AND PROMOTES A FREE PRESS,	
	FREEDOM OF EXPRESSION AND THE PEOPLE'S RIGHT TO KNOW.	
		—
	CONTINUED ON SCHEDULE O.	_
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ? Yes X No	C
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	נ
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code: ) (Expenses \$ 911,299. including grants of \$ ) (Revenue \$ 1,054.	)
	STRATEGIC LITIGATION, EDUCATION AND ADVOCACY	
	FAC USES INTEGRATED ADVOCACY - LITIGATION, EDUCATION AND POLICY	
	ADVOCACY - TO ADVANCE OPEN GOVERNMENT, FREE-PRESS RIGHTS, AND THE PUBLIC'S RIGHT TO KNOW.	
	FOBLIC 5 KIGHI 10 KNOW.	
	SOME EXAMPLES OF IMPORTANT FAC ACHIEVEMENTS IN 2023:	
		_
	FAC'S SUBPOENA DEFENSE INITIATIVE CAME TO THE AID OF FIVE JOURNALISTS	
	IN 2023 WHO WERE SUBPOENAED FOR THEIR CONFIDENTIAL SOURCES OR NOTES,	
	PROVIDING ON-THE-SPOT EXPERT COUNSELING AND REPRESENTATION, ON A PRO	
	BONO BASIS, TO PROTECT THEIR RIGHTS UNDER THE FIRST AMENDMENT AND CALIFORNIA'S JOURNALIST SHIELD LAW.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	)
-10	SUBPOENA DEFENSE INITIATIVE	. /
		_
	FAC'S SUBPOENA DEFENSE INITIATIVE HELPS JOURNALISTS OPPOSE SUBPOENAS	
	SEEKING THEIR CONFIDENTIAL SOURCES AND NOTES PROTECTED UNDER	
	CALIFORNIA'S JOURNALIST SHIELD LAW.	
		—
		_
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$) LEGAL HOTLINE SERVICE	)
		—
	IN 2023, FAC RESPONDED TO 900 QUESTIONS ABOUT ACCESSING PUBLIC RECORDS,	_
	PARTICIPATING IN GOVERNMENT MEETINGS, AND FIRST AMENDMENT RIGHTS,	
	EMPOWERING THESE INDIVIDUALS TO EXERCISE THEIR RIGHTS.	
		_
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )       Total program service expenses     911,299.	
<u>4e</u>	Total program service expenses 911,299. Form <b>990</b> (202	201
332002	12-21-23 SEE SCHEDULE O FOR CONTINUATION(S)	J)

Form	990	(2023)

# Form 990 (2023) FIRST AMENDMENT 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)?		x	
~	If "Yes," complete Schedule A	1	л Х	
2		2	<u>л</u>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</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	3		
4	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			
Ŭ	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? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
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	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	Па		
Ň	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	101		x
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13		X
13 14a		14a		X
	Did the organization maintain an office, employees, or agents outside of the United States?	170		<u> </u>
~	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			<u>-</u> -
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</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	40		x
10	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	ļ	<u> </u>
19		19		x
20a	complete Schedule G, Part III	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		<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		X

			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	~~~										
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete											
	Schedule J	23	Х									
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											
b	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										
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d										
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit											
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	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			v								
~~	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%	00		x								
07	controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	26										
27	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,	21										
20	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								
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X								
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?If											
	"Yes," complete Schedule L, Part IV	28c		X								
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х								
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation											
	contributions? If "Yes," complete Schedule M	30		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			37								
	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			x								
25.0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X								
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	558		<u> </u>								
D	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b										
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?											
	If "Yes," complete Schedule R, Part V, line 2	36		x								
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization											
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x								
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?											
-	Note: All Form 990 filers are required to complete Schedule O	38	Х									
Pai												
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>										
			Yes	No								
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 12											
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b											
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v									
	(gambling) winnings to prize winners?	1c	Х									

Form	990 (2023) FIRST AMENDMENT COALITION 33-0308	483	Р	age <b>5</b>
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 8			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand			v
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
47	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		

If "Yes," complete Form 6069.

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	Section A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 28							
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.							
b	Enter the number of voting members included on line 1a, above, who are independent 1b 28							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other							
	officer, director, trustee, or key employee?	2		Х				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision							
	of officers, directors, trustees, or key employees to a management company or other person?	3		х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х				
6	Did the organization have members or stockholders?	6		Х				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or							
	more members of the governing body?	7a		х				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or							
	persons other than the governing body?	7b		х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
а	The governing body?	8a	Х					
b	Each committee with authority to act on behalf of the governing body?	8b	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the							
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)							
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,							
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х				
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х					
b	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			37				
	taxable entity during the year?	16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's							
	exempt status with respect to such arrangements?	16b						
	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed CA			- 1- 1				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3	s only	) availa	able				
	for public inspection. Indicate how you made these available. Check all that apply.							
40	Own website Another's website X Upon request Other (explain on Schedule O)	al Eu						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	a finar	ICIAI					
00	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 GILBERT CPAS - (916)646-6464							
	2880 GATEWAY OAKS DR. STE 100, SACRAMENTO, CA 95833							

#### 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

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.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do		Pos	ition	than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot r/trus	h an	compensation	compensation	amount of
	week					// // // // // // // // // // // // //		from	from related	other
	(list any hours for	directo				-		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	ee or	stee			ensate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	l trust	nal tru		oyee	ompe		1099-NEC)		and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	line)	hd	lns	Offi	Key	Hig em	For			
(1) DAVID SNYDER	40.00			37				170 000	0	22 100
EXECUTIVE DIRECTOR	40.00			X				178,803.	0.	32,100.
(2) DAVID LOY	40.00					37		145 000	0	0 1 4 0
LEGAL DIRECTOR	40.00					X		145,000.	0.	8,149.
(3) KATHLEEN MORGAN	40.00					37		110 110	0	19 490
PHILANTHROPY DIRECTOR	40.00					X		110,416.	0.	17,472.
(4) SUZANNE ITO	40.00					37		105 000	0	C 150
COMMUNICATIONS DIRECTOR	40.00					X		105,000.	0.	6,150.
(5) VIRGINA LAROE	40.00					v		105 000	0	F 600
ADVOCACY DIRECTOR	0.00					X		105,000.	0.	5,608.
(6) KATHERINE ROWLANDS	0.00							0	0	0
PRESIDENT	0.00	X		X				0.	0.	0.
(7) PETER SCHEER	0.00							0	0	0
PAST PRESIDENT	0.00	X		X				0.	0.	0.
(8) JULIET WILLIAMS	0.00							0.	0	0
VICE PRESIDENT	0.00	X		X				0.	0.	0.
(9) SCOTT LINDLAW	0.00	x		x				0.	0.	0.
SECRETARY	0.00	^		^				0.	0.	0.
(10) ED CHAPUIS	0.00	x		x				0.	0.	0.
TREASURER	0.00	^		^				0.	0.	0.
(11) ALICA DEL VALLE	0.00	x						0.	0.	0.
BOARD MEMBER	0.00	^						0.	0.	0.
(12) MARCOS BRETON	0.00	x						0.	0.	0.
BOARD MEMBER (13) CHERYL BROWN	0.00	^						0.	0.	0.
BOARD MEMBER	0.00	x						0.	0.	0.
(14) BRUCE B. BRUGMANN	0.00	<u>^</u>						0.	0.	0.
BOARD MEMBER	0.00	x						0.	0.	0.
(15) THOMAS BURKE	0.00								•	<b>0</b> •
BOARD MEMBER	0.00	x						0.	0.	0.
(16) HAL FUSON	0.00							0.	•	<b>.</b>
BOARD MEMBER		x						0.	0.	0.
(17) ERWIN CHEMERINSKY	0.00	<u> </u>							0.	<u>.</u>
BOARD MEMBER		x						0.	0.	0.
	I		L	I			I		••	Eorm <b>990</b> (2022)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do		Pos		ו than	one	Reportable	Reportable	Estimated
	hours per	box	, unles	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		cer an	dad	recto	or/trus	stee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for related	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	organizations	ustee	trust		e.	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	ual tr	tional		ploye	st con yee		1099-NEC)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(18) ABENICIO CISNEROS	0.00		_							
BOARD MEMBER		X						0.	0.	0.
(19) CARL DOUGLAS	0.00									
BOARD MEMBER		X						0.	0.	0.
(20) RICHARD GINGRAS	0.00									
BOARD MEMBER		X						0.	0.	0.
(21) JAY HARRIS	0.00									
BOARD MEMBER		X						0.	0.	0.
(22) JEAN-PAUL JASSY	0.00									
BOARD MEMBER		Х						0.	0.	0.
(23) LINDA JUE	0.00								_	
BOARD MEMBER		х						0.	0.	0.
(24) QUENTIN KOPP	0.00								0	
BOARD MEMBER	0.00	X						0.	0.	0.
(25) JIM NEWTON	0.00	x						0.	0.	0.
BOARD MEMBER (26) KARL OLSON	0.00	^				<u> </u>		0.	0.	0.
BOARD MEMBER	0.00	x						0.	0.	0.
1b Subtotal								644,219.	0.	69,479.
c Total from continuation sheets to Part VI								011/2190	0.	0.
								644,219.	0.	-
<ul> <li>d Total (add lines 1b and 1c)</li> <li>2 Total number of individuals (including but n</li> </ul>								-		0371730
compensation from the organization		1030	11310	u a	000		101		,000 of reportable	5
compensation non the organization										Yes No
<b>3</b> Did the organization list any <b>former</b> officer,	director, trust	ee, ł	kev e	emp	love	e, o	r hic	hest compensated emp	oloyee on	
line 1a? If "Yes," complete Schedule J for s								· · · ·		3 X
4 For any individual listed on line 1a, is the su	im of reportab									
and related organizations greater than \$150									-	4 X
5 Did any person listed on line 1a receive or a	accrue comper	nsat	ion f	rom	any	/ unr	relat	ted organization or indivi	idual for services	
rendered to the organization? If "Yes," com	plete Schedul	e J f	or sı	ıch	pers	son .				5 X
Section B. Independent Contractors										
1 Complete this table for your five highest co	-								· · · ·	sation from
the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	rithir I		year.	(0)
(A) Name and business	address	NC	ONE	2				( <b>B)</b> Description of s	ervices	<b>(C)</b> Compensation
		110	,,,,,	-						

 2
 Total number of independent contractors (including but not limited to those listed above) who received more than

 \$100,000 of compensation from the organization
 0

 SEE
 PART
 VII,
 SECTION
 A
 CONTINUATION
 SHEETS

Form 990 FIRST AM	ENDMENT	CC	DAI	LI.	ΓIC	ON			33-030	8483
Part VII Section A. Officers, Directors, Tru	ustees, Key Er	mplo	oyee	es, a	nd I	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)		-		C)			(D)	(E)	(F)
Name and title	Average				ition	n		Reportable	Reportable	Estimated
	hours	(cl	heck	all	that	app	ly)	compensation	compensation	amount of
	per	,						from	from related	other
	week					yee		the	organizations	compensation
	(list any	ector				nplo		organization	(W-2/1099-MISC)	from the
	hours for	or dire				ted e		(W-2/1099-MISC)		organization
	related	stee c	ustee			en sa				and related
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				organizations
	below	ividu	titutio	Officer	emp	hest	Former			
	line)	Ind	Inst	0ff	Key	Hig	For			
(27) MEL OPOTOWSKY	0.00									
BOARD MEMBER		X						0.	0.	0.
(28) ROWLAND REBELE	0.00									
BOARD MEMBER		X						0.	Ο.	0.
(29) EDWARD WASSERMAN	0.00									
BOARD MEMBER		x						0.	0.	Ο.
(30) CAROL MELAMED	0.00									
EXECUTIVE COMMITTEE AT LAR		x						0.	0.	0.
(31) DUFFY CAROLAN	0.00									
EXECUTIVE COMMITTEE AT LAR		x						0.	0.	Ο.
(32) DICK ROGERS	0.00									
EXECUTIVE COMMITTEE AT LAR		x						0.	0.	Ο.
(33) RICARDO SANDOVAL-PALOS	0.00									
EXECUTIVE COMMITTEE AT LAR		x						0.	0.	Ο.
		-								
Total to Part VII, Section A, line 1c										

Pa	rτv	Ш									
			Check if Schedule O	conta	ains a respo	onse	or note to any lin	ie in this Part VIII (A)	(B)	(C)	[]
								Total revenue	Related or exempt		Revenuè excluded
									function revenue	business revenue	from tax under sections 512 - 514
sσ											30010113 312 314
ant			Federated campaigns				4,521.				
Ω Ē			Membership dues				4,341.				
r Ar			Fundraising events								
oja Jia			Related organizations								
Sin			Government grants (contr								
utic Ter		т	All other contributions, gifts, similar amounts not included	-		1	305,912.				
ē∄		-					505,512.				
Contributions, Gifts, Grants and Other Similar Amounts		-	Noncash contributions included in					1,310,433.			
0 %		n	Total. Add lines 1a-1f				Business Code	1,510,455.			
đ		_					Busiliess Code				
vice	2										
Ser		b									
E S		с С									
gra Re		d									
Program Service Revenue		e f	All other program service	rovo	2110						
			Total. Add lines 2a-2f								
	3		Investment income (includ								
			· ·	Ũ				21,479.			21,479.
	4		other similar amounts) Income from investment of tax-exempt bond proceed								
	5		Royalties								
	ľ				(i) Rea		(ii) Personal				
	6	а	Gross rents	6a	()	-	(				
			Less: rental expenses	6b							
			Rental income or (loss)	6c							
			Net rental income or (loss)								
			Gross amount from sales of	" <u></u>	(i) Securi		(ii) Other				
	<b>'</b>	u	assets other than inventory	7a	()		(				
		h	Less: cost or other basis	14							
e		5	and sales expenses	7b							
Revenue		c	Gain or (loss)	7c							
Re			Net gain or (loss)								
er			Gross income from fundraisi								
Gth	ľ	-	including \$								
			contributions reported on								
			Part IV, line 18			8a					
		b	Less: direct expenses			8b					
			Net income or (loss) from			nts					
			Gross income from gamin								
			Part IV, line 19			9a					
		b	Less: direct expenses								
			Net income or (loss) from								
			Gross sales of inventory,								
			and allowances			10a					
		b	Less: cost of goods sold								
			Net income or (loss) from								
s							Business Code				
Miscellaneous Revenue	11	а	OTHER				900009	1,054.	1,054.		
an€		b									
		с									
Misc		d	All other revenue								
_			Total. Add lines 11a-11d					1,054.			
	12		Total revenue See instruction	200				1,332,966.	1,054.	0.	21.479.

Form 990 (2023)

33-0308483

Page 9

Pa	1990 (2023) FIRST AMENDM rt IX Statement of Functional Expense			33-030	08483 Page <b>1</b>
Secti	ion 501(c)(3) and 501(c)(4) organizations must comp	plete all columns. All oth	er organizations must co	omplete column (A).	
	Check if Schedule O contains a respons				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations		·		·
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	210,903.	158,177.	18,981.	33,745
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	696,453.	522,340.	62,681.	111,432
8	Pension plan accruals and contributions (include				_,_•
-	section 401(k) and 403(b) employer contributions)	31,856.	23,892.	2,867	5.097
9	Other employee benefits	31,351.	23,513.	2,867. 2,822.	5,097 5,016
0	Payroll taxes	65,876.	49,407.	5,929.	10,540
1	Fees for services (nonemployees):	0070700	15,10,1	375251	10,510
a ⊾	Management	10,888.	6,245.	4,643.	
b		22,287.	0,243.	22,287.	
C	Accounting	22,207•		22,207•	
d	Lobbying	4,500.			4,500
e	Professional fundraising services. See Part IV, line 17	4,500.			4,500
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	74,639.	55,979.	6,717.	11 0/2
	column (A), amount, list line 11g expenses on Sch 0.)	74,039.	55,519.	0,717.	11,943
12	Advertising and promotion	22,687.	8,804.	11,101.	2 7 2 2
3	Office expenses				2,782 2,815
14	Information technology	13,238.	8,345.	2,078.	2,010
15	Royalties		12 071	1 502	0 0 0 1
16	Occupancy	17,695.	13,271.	1,593.	2,831
7	Travel	5,404.	4,053.	486.	865
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	3,643.	2,732.	328.	583
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	931.	699.	83.	149
3	Insurance	9,058.	6,882.	708.	1,468
4	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	LEGAL HOTLINE	18,000.	18,000.		
b	PROGRAM MARKETING AND M	8,960.	8,960.		
с					
d					
е	All other expenses				
5	Total functional expenses. Add lines 1 through 24e	1,248,369.	911,299.	143,304.	193,766
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

if following SOP 98-2 (ASC 958-720)

### FTROW AMENDMENT COALTTON

33-0308483 Page 11

Form 990 (2023)	FIRST	AMENDMENT	COALITION	
Part X Balance Sheet				

Pa	πχ	Balance Sneet					
		Check if Schedule O contains a response or	note to a	ny line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			414,876.	1	277,453.
	2	Savings and temporary cash investments	923,130.	2	284,756.		
	3	Pledges and grants receivable, net				3	200,000.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su	Ibstantia	l contributor, or 35%			
		controlled entity or family member of any of t	hese pe	sons		5	
	6	Loans and other receivables from other disqu	ualified p	ersons (as defined			
		under section 4958(f)(1)), and persons descri	ibed in s	ection 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				9	13,334.
	10a	Land, buildings, and equipment: cost or othe		Ι Γ			
		basis. Complete Part VI of Schedule D	10a	7,001.			
	b	Less: accumulated depreciation		3,422.	1,697. 78,343.	10c	3,579. 182,106.
	11	Investments - publicly traded securities			78,343.	11	
	12	Investments - other securities. See Part IV, lir				12	612,174.
	13	Investments - program-related. See Part IV, li				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must e	1,418,046.	16	1,573,402		
	17	Accounts payable and accrued expenses			17	9,126,	
	18	Grants payable			18		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple	te Part l'	/ of Schedule D		21	
es	22	Loans and other payables to any current or f	ormer of	ficer, director,			
Ē		trustee, key employee, creator or founder, su					
Liabilities		controlled entity or family member of any of t	hese pe	sons		22	
-	23	Secured mortgages and notes payable to un	related t	hird parties		23	
	24	Unsecured notes and loans payable to unrela	ated thir	d parties		24	
	25	Other liabilities (including federal income tax,	payable	s to related third			
		parties, and other liabilities not included on li	nes 17-2	4). Complete Part X			
		of Schedule D			0.	25	35,487.
	26	Total liabilities. Add lines 17 through 25			0.	26	44,613.
s		Organizations that follow FASB ASC 958, o	check h	ere X			
ЭС		and complete lines 27, 28, 32, and 33.					
alar	27	Net assets without donor restrictions		1,418,046.	27	1,328,789.	
d Ba	28	Net assets with donor restrictions		28	200,000.		
ŭ		Organizations that do not follow FASB AS	C 958, c	heck here			
ř		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fun				29	
sse	30	Paid-in or capital surplus, or land, building, or				30	
ťĂ	31	Retained earnings, endowment, accumulated				31	
Ne	32	Total net assets or fund balances			1,418,046.	32	1,528,789.
	33	Total liabilities and net assets/fund balances			1,418,046.	33	1,573,402.

Form **990** (2023)

Form	990 (2023) FIRST AMENDMENT COALITION	33-0	0308483	Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,332		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,248	3,3	69.
3	Revenue less expenses. Subtract line 2 from line 1	3			97.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,418		
5	Net unrealized gains (losses) on investments	5	28	3,4	22.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	-2	2,2	76.
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	1,528	3,7	89.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X 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 the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sc	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				1
	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	iired audi	t		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2023)

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Department of the Treasury

Internal Revenue Service

(Form 990)

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

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

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	e of l	the organization							identification number	
		FIRS	T AMENDMEN	T COALITION				3	3-0308483	
Pa	rt I	Reason for Public	Charity Status.	(All organizations must o	complete t	his part.) S	See instruction	าร.		
The o	organ	ization is not a private found	lation because it is: (	For lines 1 through 12, o	check only	one box.)				
1		A church, convention of ch	urches, or associatio	on of churches describe	d in <b>sectic</b>	on 170(b)( [.]	1)(A)(i).			
2		A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E (Form 990).)								
3		A hospital or a cooperative	hospital service orga	anization described in <b>s</b>	ection 170	)(b)(1)(A)(i	ii).			
4		A medical research organiz	ation operated in co	njunction with a hospita	l describe	d in <b>sectio</b>	n 170(b)(1)(A	)(iii). Enter	the hospital's name,	
		city, and state:								
5		An organization operated for	or the benefit of a co	llege or university owne	d or opera	ted by a g	overnmental	unit descrit	oed in	
		section 170(b)(1)(A)(iv). (C	Complete Part II.)							
6		A federal, state, or local go	vernment or governn	nental unit described in	section 17	70(b)(1)(A)	(v).			
7	X	An organization that norma	Ily receives a substa	ntial part of its support	from a gov	rernmental	unit or from t	he general	public described in	
		section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)					
9		An agricultural research org	ganization described	in section 170(b)(1)(A)	( <b>ix)</b> operate	ed in conju	unction with a	land-grant	college	
		or university or a non-land-g	grant college of agric	ulture (see instructions)	. Enter the	name, cit	y, and state o	f the colleg	le or	
		university:								
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its sup	port from	contributio	ons, members	hip fees, a	nd gross receipts from	
		activities related to its exen	npt functions, subjec	ct to certain exceptions;	and (2) no	more that	n 33 1/3% of	its support	from gross investment	
		income and unrelated busin		(less section 511 tax) fr	om busine	esses acqu	ired by the o	rganization	after June 30, 1975.	
		See section 509(a)(2). (Con	,							
11		An organization organized a	-	•	•					
12		An organization organized a	-	•				-		
		more publicly supported or							Check the box on	
_		lines 12a through 12d that				-		-		
а		<b>Type I.</b> A supporting orga		-	•	-				
		the supported organization			a majority	of the aire	ctors or truste	ees of the s	supporting	
ь		organization. You must o	-					na (a) hu i ha		
b	L	<b>Type II.</b> A supporting org	-				•		-	
		control or management o			ame perso			age the sup	poned	
~		organization(s). You mus	-		in connoc	tion with	and functions	lly intograt	od with	
U	L	its supported organizatio						iny integrat	ed with,	
d		Type III non-functionally						rted organ	ization(s)	
ŭ	L	that is not functionally int						-		
		requirement (see instruct		• •	•		-	a an attorn		
е		Check this box if the orga						II Type III		
•		functionally integrated, or					, po ., . , po	, , , , po		
f	Ente	er the number of supported of			0 0					
g		vide the following information	•						•	
	(	i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount o	f monetary	(vi) Amount of other	
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see in	nstructions)	support (see instructions)	
Tota										

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support									
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")	618,413.	952,313.	1,027,669.	1,050,360.	1,310,433.	4,959,188.			
2	Tax revenues levied for the organ-									
	ization's benefit and either paid to									
	or expended on its behalf									
3	The value of services or facilities									
	furnished by a governmental unit to									
	the organization without charge									
4	Total. Add lines 1 through 3	618,413.	952,313.	1,027,669.	1,050,360.	1,310,433.	4,959,188.			
	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)						1 761 132			
~							1,764,432. 3,194,756.			
	Public support. Subtract line 5 from line 4.						5,194,750.			
		(-) 0010	(1-) 0000	(-) 0001	(-1) 0000	(-) 0000	(6) T - + -			
	ndar year (or fiscal year beginning in)	(a)2019 618,413.	(b) 2020 952,313.	(c)2021 1,027,669.	(d) 2022 1,050,360.	(e) 2023	(f) Total 4,959,188.			
	Amounts from line 4	010,413.	JJZ, JIJ.	1,027,009.	1,050,580.	1,310,433.	4,959,100.			
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties,	c 222	2 2 2 2	1 7 7	C 225	21 470				
	and income from similar sources $\dots$	6,232.	2,363.	177.	6,335.	21,479.	36,586.			
9	Net income from unrelated business									
	activities, whether or not the									
	business is regularly carried on									
10	Other income. Do not include gain									
	or loss from the sale of capital			_						
	assets (Explain in Part VI.)	2,088.		5.	4,649.	1,054.	7,796.			
11	Total support. Add lines 7 through 10						5,003,570.			
12	Gross receipts from related activities,	etc. (see instruction	ons)			12				
13	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third, f	ourth, or fifth tax y	ear as a section 5	501(c)(3)				
	organization, check this box and stop	here								
Sec	ction C. Computation of Publ	ic Support Pe	rcentage							
14	Public support percentage for 2023 (	line 6, column (f), c	livided by line 11, c	olumn (f))		14	63.85 %			
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	54.96 %			
	33 1/3% support test - 2023. If the o					nore, check this bo	x and			
	stop here. The organization qualifies									
b	33 1/3% support test - 2022. If the o									
	and <b>stop here.</b> The organization qual									
17a	10% -facts-and-circumstances tes									
	and if the organization meets the fact									
	meets the facts-and-circumstances te			-	-	withow the organize				
h	10% -facts-and-circumstances tes	-								
N.	more, and if the organization meets the	-								
	organization meets the facts-and-circ									
10							、 、			
10	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions									

Schedule A (Form 990) 2023

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

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

Section A. Fublic Support						
Calendar 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						
<b>3</b> 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						
<b>7a</b> Amounts included on lines 1, 2, and						
3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support	_	•				
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> 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.)						
<b>13</b> Total support. (Add lines 9, 10c, 11, and 12.)						
<b>14 First 5 years.</b> If the Form 990 is for t	he organization's fi	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organi:	zation,
check this box and stop here		-				
Section C. Computation of Pub						
<b>15</b> Public support percentage for 2023	(line 8, column (f), d	divided by line 13,	column (f))		15	%
16 Public support percentage from 202					16	%
Section D. Computation of Inve	stment Incom	e Percentage				
17 Investment income percentage for 2	023 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
18 Investment income percentage from	2022 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2023. If the					33 1/3%, and lir	ne 17 is not
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2022. If the	e organization did r	not check a box or	line 14 or line 19	a, and line 16 is m	ore than 33 1/39	%, and _
line 18 is not more than 33 1/3%, ch	eck this box and <b>st</b>	<b>op here.</b> The orga	nization qualifies	as a publicly supp	orted organizatio	on
20 Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	

(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.)

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

Yes No

10b

FIRST AMENDMENT COALITION

#### FIRST AMENDMENT COALITION Schedule A (Form 990) 2023

1

2

**—** ...

1.4

Yes

No

Pa	rt IV	Supporting Organizations (continued)			
				Yes	No
11	Has 1	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

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

sec	ction D. All Type III Supporting Organizations	
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> 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

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions). 1
- а The organization satisfied the Activities Test. Complete line 2 below.
- The organization is the parent of each of its supported organizations. Complete line 3 below. b
- The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions) С
- 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.

Yes

Sched	ule A	(Form 990) 2023	FIR
Part V		Type III Non-Fi	unctionally
1		Check here if the org	anization sat

tisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. 

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

7 L 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

and 4c. 8 Breakdown of line 7: a Excess from 2019 b Excess from 2020 c Excess from 2021 d Excess from 2022 e Excess from 2023

Schedule A	(Form 990	))2023 FII	XOI AMENDM	ENI COALII	TON	
Part V	Type II	I Non-Functional	y Integrated 50	9(a)(3) Supporti	ing Organizations (	(continued)

#### FIRST AMENDMENT COALITION

Section D - Distributions Current Year 1 Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets 4 4 5 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) Other distributions (describe in Part VI). See instructions. 6 6 Total annual distributions. Add lines 1 through 6. 7 7 Distributions to attentive supported organizations to which the organization is responsive 8 8 (provide details in Part VI). See instructions. 9 Distributable amount for 2023 from Section C, line 6 9 10 10 Line 8 amount divided by line 9 amount (i) (ii) (iii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 1 2 Underdistributions, if any, for years prior to 2023 (reasonable 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 e 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: \$ a Applied to underdistributions of prior years b Applied to 2023 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2024. Add lines 3j

Schedule A (Form 990) 2023

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER	
2019 AMOUNT: \$	2,088.
2021 AMOUNT: \$	5.
2022 AMOUNT: \$	4,649.
2023 AMOUNT: \$	1,054.

** PUBLIC DISCLOSURE COPY **

### **Schedule of Contributors**

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

2023

Employer identification number

nternal

(Form 990)

Name of the organization

Organization type (check one):

F

Schedule B

Department of the Treasury

IRST AMENDMENT CO	ALITION
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3:	3 – 1	03	80	48	83

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

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

#### **General Rule**

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

#### **Special Rules**

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

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

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is the set is the set in the set is the set is the set in the set is the set is the set is the set in the set is the set is the set is the set is the set in the set is the set

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

FIRST	AMENDMENT COALITION		33-0308483
Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
1		\$280,0	00.       Person       X         Payroll       Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
2		\$200,0	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
3		\$100,0	00. (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
4		\$100,0	00.       Person       X         Payroll       Payroll       Payroll         Noncash       (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
5		\$100,0	00. (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
<u>6</u>		\$27,7	Person X Payroll

Name of organization

Employer identification number

noncash contributions.)

		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
[			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
323453 12-26-23			Schedule B (Form 990) (2023

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(b)

Description of noncash property given

### Schedule B (Form 990) (2023)

FIRST AMENDMENT COALITION

Name of organization

Part II

(a)

No.

from

Part I

Employer identification number

(d)

Date received

33-0308483

(c)

FMV (or estimate)

(See instructions.)

Page 4

Name of o	rganization			Employer identification number
FIRST	AMENDMENT COALITION			33-0308483
Part III	Exclusively religious, charitable, etc., contributi from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, c Use duplicate copies of Part III if additional	through (e) and the following line that the following line the following line that the following line that the following line that the following line the following	entry For organizations	(10) that total more than \$1,000 for the yea
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) [	Description of how gift is held
-		(e) Transfer of	 gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of	f transferor to transferee
(a) No. from	(h) Durness of sift	(a) Lios of gift	(d) [	Description of how sift is hold
Part I	(b) Purpose of gift	(c) Use of gift	(a) L	Description of how gift is held
		(e) Transfer of	 gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of	f transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) [	Description of how gift is held
Ī		(e) Transfer of	gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of	f transferor to transferee
(a) No. from				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) [	Description of how gift is held
		(e) Transfer of		
-	Transferee's name, address, a			f transferor to transferee

Internal Revenue	Service Go	o to www.irs.gov/Form990 for in	structions and the la	atest information.	Inspection		
If the organi	zation answered "Yes" on	Form 990, Part IV, line 3, or For	m 990-EZ, Part V, lin	ne 46 (Political Campaign	Activities), then:		
<ul> <li>Section 5</li> </ul>	01(c)(3) organizations: Con	nplete Parts I-A and B. Do not com	plete Part I-C.				
<ul> <li>Section 5</li> </ul>	01(c) (other than section 5	01(c)(3)) organizations: Complete I	Parts I-A and C below	. Do not complete Part I-B	8.		
<ul> <li>Section 5</li> </ul>	<ul> <li>Section 527 organizations: Complete Part I-A only.</li> </ul>						
If the organi	f the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:						
	• Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.						
	• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.						
		Form 990, Part IV, line 5 (Proxy					
-	parate instructions), then:			,			
<ul> <li>Section 5</li> </ul>	601(c)(4), (5), or (6) organiza	tions: Complete Part III.					
Name of orga	anization			Emp	ployer identification number		
	FIRST A	MENDMENT COALITIC	N		33-0308483		
Part I-A	Complete if the org	ganization is exempt unde	r section 501(c)	or is a section 527	organization.		
1 Provide	a description of the organiz	zation's direct and indirect politica	l campaign activities i	in Part IV.			
		tures			\$		
	er hours for political campa						
		•					
Part I-B	Complete if the org	ganization is exempt unde	r section 501(c)	(3).			
1 Enter th	e amount of any excise tax	incurred by the organization unde	r section 4955		\$		
		incurred by organization manager					
		on 4955 tax, did it file Form 4720 fo					
		, 					
	describe in Part IV.						
Part I-C	Complete if the org	ganization is exempt unde	r section 501(c)	, except section 501	l(c)(3).		
1 Enter th	e amount directly expended	d by the filing organization for sect	ion 527 exempt func	tion activities	\$		
		nization's funds contributed to othe					
exempt	function activities		-		\$		
3 Total ex		s. Add lines 1 and 2. Enter here an					
line 17b					\$		
		1120-POL for this year?					
		mployer identification number (EIN					
		ation listed, enter the amount paid		-			
contribu	tions received that were pr	omptly and directly delivered to a	separate political org	anization, such as a sepai	rate segregated fund or a		
political	action committee (PAC). If	additional space is needed, provid	le information in Part	IV.			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political		
	.,			filing organization's			
				funds. If none, enter -0-	promptly and directly delivered to a separate		
					political organization.		
					If none, enter -0		
		i de la companya de la					

## Political Campaign and Lobbying Activities

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

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

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

Schedule C (Form 990) 2023

SCHEDULE C

Department of the Treasury

(Form 990)

OMB No. 1545-0047

Open to Public Inspection

Schedule C (Form 990) 2023		90) 2023 FIRST AMENDMENT COALITION	33-0	308483 Page 2	
Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).					
<ul><li>A Check</li><li>B Check</li></ul>	expenses, and share of excess lobbying expenditures).				
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)			<b>(a)</b> Filing organization's totals	<b>(b)</b> Affiliated group totals	
-			205		

1a	Total lobbying expenditures to influence pub	lic opinion (grassroots lobbying)	285.	
b	Total lobbying expenditures to influence a leg	18,644.		
с	Total lobbying expenditures (add lines 1a and	d 1b)	18,929.	
d	Other exempt purpose expenditures		1,229,440.	
е	Total exempt purpose expenditures (add line	s 1c and 1d)	1,248,369.	
f	Lobbying nontaxable amount. Enter the amo	unt from the following table in both columns.	199,837.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	not over \$500,000,	20% of the amount on line 1e.		
	over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.		
	over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.		
	over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.		
	over \$17,000,000,	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25% o	f line 1f)	49,959.	
h	Subtract line 1g from line 1a. If zero or less, e	0.		
i	Subtract line 1f from line 1c. If zero or less, e	nter -0-	0.	
j	If there is an amount other than zero on eithe	r line 1h or line 1i, did the organization file Form 4720		

reporting section 4911 tax for this year?

#### 4-Year Averaging Period Under Section 501(h)

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

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

Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2020	<b>(b)</b> 2021	<b>(c)</b> 2022	<b>(d)</b> 2023	<b>(e)</b> Total		
2a Lobbying nontaxable amount			175,052.	199,837.	374,889.		
<ul> <li>b Lobbying ceiling amount (150% of line 2a, column(e))</li> </ul>					562,334.		
c Total lobbying expenditures			7,277.	18,929.	26,206.		
d Grassroots nontaxable amount			43,763.	49,959.	93,722.		
e Grassroots ceiling amount (150% of line 2d, column (e))					140,583.		
f Grassroots lobbying expenditures			193.	285.	478.		

Schedule C (Form 990) 2023

No

___ Yes

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
of the lobbying activity.	Yes	No	Amo	ount
<ol> <li>During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:</li> <li>a Volunteers?</li> </ol>				
<ul> <li>b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</li> </ul>				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912				
f c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	)(5), or se	ction	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Part III-B Complete if the organization is exempt under section 501(c)(4), section				
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No" OF	R (b) Part	III-A, lin	e 3, is
answered "Yes."				
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	cal			
expenses for which the section 527(f) tax was paid).				
a Current year				
<b>b</b> Carryover from last year				
c Total				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	oolitical			
expenditures next year?		4		
5 Taxable amount of lobbying and political expenditures. See instructions		5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	o list); Part I	I-A, lines 1 a	and 2 (see	
instructions); and Part II-B, line 1. Also, complete this part for any additional information. PART II-A LINE 1C				
FAC TOOK PUBLIC POSITIONS ON 16 BILLS BEFORE THE CALI	FODNT		פד א הדיד	
FAC TOOK PUBLIC POSITIONS ON TO BILLS BEFORE THE CALL	FURNIZ	A DEGI	SLAIU	
2023 THAT RELATED TO THE ORGANIZATION'S MISSION OF PR	OMOTI	NG OPE	N	
GOVERNMENT, A FREE PRESS AND FREE SPEECH. FAC'S ACTIV	ITY CO	ONSIST	ED OF	
DRAFTING AND/OR EDITING LETTERS TO RELEVANT LEGISLATI	VE CO	MMITTE	ES,	
SENDING COMMUMICAITONS TO MEMBERS AND FOLLOWERS, AND	COMMUI	NICATI	NG WIT	ГН

Part IV Supplemental Information (continued)

#### LEGISLATORS AND THEIR STAFF. THE ONLY EXPENDITURES RELATED TO THESE

ACTIVITIES WERE FOR STAFF TIME, AS SET FORTH ABOVE.

SCHEDULE [	)
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Department of the Treasury Internal Revenue Service

(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

33-0308483

Name of the organization

#### FIRST AMENDMENT COALITION

Pa	t I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		Similar Funds or A	Accounts. Complete if the
	- 5	(a) Donor advise	d funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets he	eld in donor advised fur	nds
	are the organization's property, subject to the organization's	-		
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor of			
	impermissible private benefit?		-	Yes No
Pa	t II Conservation Easements. Complete if the org	ganization answered "Ye	s" on Form 990, Part IV	/, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).	_	
	Preservation of land for public use (for example, recrea	ation or education)	Preservation of a hist	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 quality	fied conservation contrib	ution in the form of a c	onservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic str	ucture included on line 2	a	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	leased, extinguished, or	terminated by the organ	nization during the tax
	year			
4	Number of states where property subject to conservation ea	sement is located		
5	Does the organization have a written policy regarding the per	riodic monitoring, inspec	tion, handling of	
	violations, and enforcement of the conservation easements i			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, a	nd enforcing conservat	ion easements during the year
_			<b>,</b> , , , , , , , , , , , , , , , , , ,	
7	Amount of expenses incurred in monitoring, inspecting, hand	aling of violations, and er	forcing conservation ea	asements during the year
•				\/;\
8	Does each conservation easement reported on line 2d above			)(!) Yes No
0	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservati			······································
9	balance sheet, and include, if applicable, the text of the foot			
	organization's accounting for conservation easements.	Tote to the organization s		hat describes the
Pa	t III Organizations Maintaining Collections o	f Art. Historical Tre	easures. or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form		·····, ·····	
	If the organization elected, as permitted under FASB ASC 95		enue statement and ba	alance sheet works
	of art, historical treasures, or other similar assets held for pul	· ·		
	service, provide in Part XIII the text of the footnote to its final			
b	If the organization elected, as permitted under FASB ASC 95			ce sheet works of
	art, historical treasures, or other similar assets held for public			
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	If the organization received or held works of art, historical tre			
_	the following amounts required to be reported under FASB A			•
а	Revenue included on Form 990, Part VIII, line 1			\$
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instruction			Schedule D (Form 990) 2023

Sche	dule D (Form 990) 2023 FIRST A	MENDMENT CO	DALITION			33-03	0848	3 _{Pa}	age <b>2</b>
Par	t III Organizations Maintaining C	Collections of Ar	t, Historical Tr	easures, or Oth	er Simila	ar Asse	<b>ts</b> (contir	nued)	
3	Using the organization's acquisition, accessi	ion, and other record	s, check any of the	following that make	significant	use of its			
	collection items (check all that apply).								
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е	Other						
с	Preservation for future generations								
4	Provide a description of the organization's c	ollections and explair	n how they further t	he organization's ex	empt purpo	ose in Par	t XIII.		
5	During the year, did the organization solicit of	or receive donations of	of art, historical trea	sures, or other simila	ar assets		-		-
	to be sold to raise funds rather than to be m						Yes		No
Par	t IV Escrow and Custodial Arran		e if the organization	answered "Yes" on	Form 990	, Part IV, I	ine 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.							
1a	Is the organization an agent, trustee, custod		•				-		-
	on Form 990, Part X?					L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:		·				
							Amoun	t	
	Beginning balance								
	Additions during the year								
е	Distributions during the year								
f	Ending balance								1
	Did the organization include an amount on F				• • • • • • • • • • • • • • • • • • • •	∟	Yes		No
Par	If "Yes," explain the arrangement in Part XIII. <b>t V</b> Endowment Funds Complete if								
Fai		(a) Current year	(b) Prior year		(d) Three y	ears hack	(e) Four	Vears	hack
10	Designing of year balance	1,301.	282,009.			21,105.	(e) i oui	-	
	Beginning of year balance	1,301.	202,009.	230,373.	2	. 199,484.		404.	
	Contributions	2.	1,701.	31,630.		32,139.		25	065.
	Net investment earnings, gains, and losses	<u> </u>	1,701.	51,050.		52,155.		² ,	005.
	Grants or scholarships								
е	Other expenditures for facilities	1,000.	282,409.						
	and programs	1,000.	202,405.			2,865.		3	444.
	Administrative expenses	303.	1,301.	282,009.	2	50,379.		,	105.
-	End of year balance Provide the estimated percentage of the cur		,	,		50,575.		<u> </u>	105.
2	Board designated or quasi-endowment		%						
	Permanent endowment	%							
		%							
U	The percentages on lines 2a, 2b, and 2c sho	<u>-</u>							
3a	Are there endowment funds not in the posse		ation that are held a	nd administered for	the				
ou	organization by:						Ī	Yes	No
	(i) Unrelated organizations?						3a(i)		Х
	(ii) Related organizations?								Х
b	If "Yes" on line 3a(ii), are the related organiza								
4	Describe in Part XIII the intended uses of the						·	•	
Par	t VI Land, Buildings, and Equipm	nent							
	Complete if the organization answere	d "Yes" on Form 990	, Part IV, line 11a. S	See Form 990, Part X	(, line 10.				
	Description of property	(a) Cost or of	ther (b) Cost	or other (c) A	Accumulate	ed	(d) Boo	k value	e
	· · · ·	basis (investr			epreciation				
1a	Land								
	Buildings								
	Leasehold improvements								
	Equipment								
	Other			7,001.	3,4	22.		3,5	
	. Add lines 1a through 1e. (Column (d) must e		X, line 10c, column	(B))				3,5	79.

Schedule D (Form 990) 2023

Part	VII Investments - Other Securities	5 000 5 11/1		
	Complete if the organization answered "Yes" scription of security or category (including name of security)	on Form 990, Part IV, line (b) Book value	11b. See Form 990, Part X, line 12. (c) Method of valuation: Cost or end	d of yoar market value
			(c) Method of Valdation. Cost of en	
	sely held equity interests			
(3) Oth				
	FIXED INCOME SECURITIES	612,174.	END-OF-YEAR MARKET	VALUE
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H) Total (C	ol. (b) must equal Form 990, Part X, line 12, col. (B))	612,174.		
	VIII Investments - Program Related.	012,1740		
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
<u>(8)</u> (9)				
	ol. (b) must equal Form 990, Part X, line 13, col. (B))			
Part				
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
	(a)	Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
<u>(7)</u> (8)				
(9)				
	Column (b) must equal Form 990, Part X, line 15, co	I. (B))		
Part	X Other Liabilities			
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	5.
1.	(a) Description of liability			(b) Book value
	Federal income taxes			
	VACATION ACCRUAL			35,487.
(3)				
(4)				
(5)				
(6) (7)				
(8)				<u> </u>
(9)				
`,	Column (b) must equal Form 990, Part X, line 25, co	I. (B))		35,487.
	ility for uncertain tax positions. In Part XIII, provide	( ))		
orga	anization's liability for uncertain tax positions under	FASB ASC 740. Check he	ere if the text of the footnote has been p	rovided in Part XIII

Schedule D (Form 990) 2023

33-0308483 Page 3

Sche	edule D (Form 990) 2023 FIRST AMENDMENT COALITIO	N		33-	0308483 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial State	ements With			
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.			
1	Total revenue, gains, and other support per audited financial statements			1	1,848,544.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	28,422.		
b	Donated services and use of facilities		487,156.		
с	Recoveries of prior year grants				
d					
е	Add lines 2a through 2d			2e	515,578.
3	Subtract line <b>2e</b> from line <b>1</b>			3	1,332,966.
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				4c	0.
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 12.</i> )			5	1,332,966.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stat	ements Wit	h Expenses per	Retu	Irn
Pa	rt XII Reconciliation of Expenses per Audited Financial Stat Complete if the organization answered "Yes" on Form 990, Part IV, line		h Expenses per	Retu	
Pa 1		12a.		Retu 1	1,735,525.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.			
1	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements	12a.			
1 2	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	12a. <b>2a</b>			
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	12a. <b>2a</b> <b>2b</b>			
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	12a. 			1,735,525.
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	12a. 2a 2b 2c 2d	487,156.		1,735,525.
1 2 b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b>	12a. 2a 2b 2c 2d	487,156.	1	1,735,525.
1 2 b c d e	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	12a. 2a 2b 2c 2d	487,156.	1 2e	1,735,525.
1 2 b c d e	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b>	12a. 2a 2b 2c 2d	487,156.	1 2e	1,735,525.
1 2 b c d 8 3 4	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1:	12a. 2a 2b 2c 2d 2d	487,156.	1 2e	1,735,525.
1 2 a b c d e 3 4 a	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	12a. 2a 2b 2c 2d 4a 4b	487,156.	1 2e	1,735,525. 487,156. 1,248,369. 0.
1 2 d e 3 4 b c 5	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines <b>4a</b> and <b>4b</b> Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 18.</i> )	12a. 2a 2b 2c 2d 4a 4b	487,156.	1 2e 3	1,735,525. 487,156. 1,248,369.
1 2 d e 3 4 b c 5	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines <b>4a</b> and <b>4b</b>	12a. 2a 2b 2c 2d 4a 4b	487,156.	1 2e 3 4c	1,735,525. 487,156. 1,248,369. 0.

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 V, LINE 4:

### PERMANENTLY RESTRICTED NET ASSETS GENERATE INCOME TO SUPPORT GENERAL

OPERATIONS.

SC	HEDULE J	Compensation Information	01	//B No. 1	1545-004	47
(Fo	rm 990)			2023		
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		LU	LU	
Depa	tment of the Treasury	Attach to Form 990.	0	pen to		ic
Intern	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.	-	Inspe		
Nan	e of the organization		Employer ident			mber
De	rt I Quastiana	FIRST AMENDMENT COALITION	33-030	848	3	
Pa	rt I Questions	Regarding Compensation			×	
10	Charle the energy ist	to bey(se) if the experimentian provided any of the following to av far a person listed on Ferm	000		Yes	No
la		te box(es) if the organization provided any of the following to or for a person listed on Form ne 1a. Complete Part III to provide any relevant information regarding these items.	990,			
	First-class or ch		معباده			
	Travel for compa					
	·	tion and gross-up payments Health or social club dues or initiation fees				
		pending account				
			.,,			
b	If any of the boxes or	n line 1a are checked, did the organization follow a written policy regarding payment or				
		ovision of all of the expenses described above? If "No," complete Part III to explain		1b		
2	Did the organization	require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and officers	s, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
3	Indicate which, if any	$\prime$ , of the following the organization used to establish the compensation of the organization's	6			
		tor. Check all that apply. Do not check any boxes for methods used by a related organizati	on to			
	·	tion of the CEO/Executive Director, but explain in Part III.				
	Compensation of					
		Impensation consultant     Impensation survey or study				
	X Form 990 of oth	her organizations	ommittee			
4	During the year did a	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
4	organization or a rela					
а		payment or change-of-control payment?		4a		Х
b		ive payment from a supplemental nonqualified retirement plan?		4b		Х
С		ive payment from an equity-based compensation arrangement?		4c		Х
		es 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501(c)(	(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed on	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	on			
	contingent on the rev					
а	The organization?			5a		X
b		tion?		5b		Х
		5b, describe in Part III.				
6	-	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n			
_	contingent on the net			6-		х
				6a		X
a		tion?		6b		
7		6b, describe in Part III. n Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
'		es 5 and 6? If "Yes," describe in Part III		7		Х
8		eported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		,		
5		tion described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		х
9		I the organization also follow the rebuttable presumption procedure described in		-		-
-		53.4958-6(c)?		9		
E		n Act Nation and the Instructions for Form 000	Cohodulo	_	- 0001	0000

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

Schedule J (Form 990) 2023

#### 33-0308483

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

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

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

		( <b>B)</b> Breakdown of W	-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) DAVID SNYDER	(i)	178,803.	0.	0.	8,656.	23,444.	210,903.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DAVID LOY	(i)	145,000.	0.	0.	7,249.	900.	153,149.	0.
LEGAL DIRECTOR	(ii)	0.	0.	0.	0.	0.		
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

#### Part III Supplemental Information

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

Schedule J (Form 990) 2023

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.



33-0308483

FIRST AMENDMENT COALITION

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

CIVIC AFFAIRS

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

-PREVAILED IN OPEN-RECORDS LAWSUIT AGAINST CITY OF SAN JOSE, FORCING

THE DISCLOSURE OF PREVIOUSLY SECRET MESSAGES FROM MAYOR SAM LICCARDO'S

PERSONAL EMAIL/TEXT ACCOUNTS.

-LED COALITION WHOSE ADVOCACY RESULTED IN THE REPEAL OF ORDINANCES IN THREE CALIFORNIA COUNTIES -- MENDOCINO, SHASTA AND SISKIYOU -- USED TO IMPROPERLY CHARGE MEMBERS OF THE PUBLIC THOUSANDS OF DOLLARS TO OBTAIN PUBLIC RECORDS.

-JOINED COALITIONS TO CHALLENGE EFFORTS BY LOCAL GOVERNMENTS IN HUNTINGTON BEACH AND FRESNO COUNTY TO BAN CERTAIN BOOKS IN PUBLIC LIBRARIES.

-VINDICATED LOCAL JOURNALIST'S RIGHT TO ATTEND OPEN-TO-THE-PUBLIC PRESS CONFERENCE AFTER SHE WAS IMPROPERLY EXCLUDED BY LOCAL DISTRICT ATTORNEY.

-FAC'S WORK ON AMICUS BRIEFS THROUGHOUT 2023, AT BOTH THE TRIAL COURT AND APPELLATE LEVEL, HELPED ADVANCE ARGUMENTS IN FAVOR OF FREE EXPRESSION, PRESS FREEDOMS AND OPEN GOVERNMENT.

-FAC WORKED IN THE CALIFORNIA LEGISLATURE AND AT LOCAL GOVERNMENTS

ACROSS THE STATE TO ADVANCE LAWS AND POLICIES THAT STRENGTHEN FIRST

AMENDMENT AND OPEN-GOVERNMENT RIGHTS, AND TO FIGHT LAWS THAT WOULD

WEAKEN THOSE RIGHTS.

-SOME EXAMPLES OF ACHIEVEMENTS IN EDUCATING AND EMPOWERING THE PUBLIC TO USE THEIR RIGHTS:

-FAC CONTINUED ITS KNOW YOUR RIGHTS SERIES OF WEBINARS, EDUCATING PEOPLE ACROSS THE STATE ON HOW TO USE PUBLIC RECORDS TO EXPOSE INJUSTICE, THE FIRST AMENDMENT TO PROTEST INJUSTICES, AND THE BROWN ACT (CALIFORNIA'S OPEN MEETINGS LAW) TO PREVENT INJUSTICES.

-TRAINED INAUGURAL COHORT OF CALIFORNIA LOCAL NEWS FELLOWS ON COVERING OPEN MEETINGS AND USING PUBLIC RECORDS FOR ACCOUNTABILITY JOURNALISM.

-MENTORED EARLY CAREER JOURNALISTS AS PART OF NATIONAL FREEDOM OF INFORMATION COALITION'S FOI BOOT CAMP FOR JOURNALISTS OF COLOR.

-FAC RESPONDED TO 900 QUERIES ON ITS FREE LEGAL HOTLINE, EDUCATING AND EMPOWERING JOURNALISTS, ACTIVISTS AND OTHERS TO USE THEIR RIGHTS TO SPEAK AND PUBLISH FREELY, AND TO PROMOTE GOVERNMENT TRANSPARENCY.

-FAC HOSTED AND/OR ORGANIZED NUMEROUS WORKSHOPS ON PRESS FREEDOMS AND GOVERNMENT TRANSPARENCY LAWS.

-UPDATED AND EXPANDED OUR EXTENSIVE LIBRARY OF PUBLISHED RESOURCES,

INCLUDING OUR GUIDE TO THE BROWN ACT, CALIFORNIA'S OPEN-MEETINGS LAW.

Name of the organization

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

LEGISLATIVE OVERSIGHT

FAC WORKS WITH ALLIES TO ADVOCATE FOR BILLS IN THE CALIFORNIA

LEGISLATURE THAT WOULD EXPAND THE RIGHT OF PUBLIC ACCESS OR FIRST

AMENDMENT RIGHTS, AND TO OPPOSE BILLS THAT WOULD LIMIT THESE RIGHTS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: NONPARTISAN AND NONPROFIT, FAC BELIEVES THAT THE BROADEST RANGE OF ENGAGED AND INFORMED COMMUNITIES IS ESSENTIAL TO THE HEALTH OF OUR DEMOCRACY - THAT THE VALUES EXPRESSED BY THE FIRST AMENDMENT PROVIDE A BLUEPRINT FOR AN INCLUSIVE, EQUITABLE SOCIETY AND A RESPONSIVE, ACCOUNTABLE GOVERNMENT. TO THAT END, FAC EDUCATES, ADVOCATES AND LITIGATES TO ADVANCE GOVERNMENT TRANSPARENCY AND FIRST AMENDMENT PROTECTIONS FOR ALL.

OUR COMMITMENT TO DIVERSITY, EQUITY, AND INCLUSION FAC RECOGNIZES THAT OUR MISSION CAN ONLY BE ACHIEVED BY ACTIVELY CULTIVATING DIVERSITY, EQUITY AND INCLUSION, BOTH INSIDE AND OUTSIDE THE ORGANIZATION. WE BELIEVE THAT IN ORDER TO REALIZE THE PROMISE OF THE VALUES UNDERLYING THE FIRST AMENDMENT, WE MUST REACH AND INCLUDE AS BROAD A RANGE OF VOICES AS POSSIBLE TO INFORM OUR POLICIES, PRIORITIES AND PROGRAMS. WE RECOGNIZE THAT SYSTEMIC INEQUITIES ROOTED IN, AMONG OTHER THINGS, RACE AND GENDER REQUIRE FAC TO TAKE THE INITIATIVE IN SEEKING OUT AND EMBRACING A DIVERSITY OF PERSPECTIVES, BACKGROUNDS, AND LIFE EXPERIENCES. TO THAT END, WE COMMIT TO ACTIVELY EXPANDING AND DIVERSIFYING OUR NETWORKS.

Employer identification number 33 - 0308483

WE RECOGNIZE IT IS OUR RESPONSIBILITY TO ALLOCATE OUR RESOURCES IN SUPPORT OF AND COLLABORATION WITH INSTITUTIONS, INDIVIDUALS, ORGANIZATIONS, AND COALITIONS THAT REFLECT THE DIVERSITY OF CALIFORNIA AND THE NATION, ESPECIALLY THOSE TRADITIONALLY EXCLUDED FROM POWER AND RESOURCES. FOSTERING A DIVERSE, EQUITABLE AND INCLUSIVE COMMUNITY IS BOTH A GOAL IN ITSELF AND AN INTEGRAL PART OF CARRYING OUT OUR ORGANIZATIONAL MISSION.

FORM 990, PART VI, SECTION A, LINE 4:

THE GOVERNING BOARD HAS REVISED THE BYLAWS TO (1) ELIMINATE A PROVISION ALLOWING SEVERAL NONPROFIT JOURNALISM/MEDIA GROUPS TO APPOINT MEMBERS TO THE BOARD, AND (2) TO ALLOW INDIVIDUALS WHO ARE NOT MEMBERS OF THE BOARD TO SERVE IN ADVISORY CAPACITY, AND AT THE BOARD'S PLEASURE, ON COMMITTEES ESTABLISHED BY THE BOARD. SUCH ADVISORY MEMBERS OF COMMITTEES DO NOT HAVE VOTING AUTHORITY.

FORM 990, PART VI, SECTION B, LINE 11B: THE 990 WILL BE REVIEWED BY THE EXECUTIVE COMMITTEE OF THE BOARD PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION'S ACTIVITIES ARE NOT OF A KIND THAT ARE LIKELY TO GIVE RISE TO CONFLICTS OF INTEREST. HOWEVER, OFFICERS, DIRECTORS AND THE KEY EMPLOYEE ARE EXPECTED TO DISCLOSE CONFLICTS OF INTEREST WHENEVER THEY ARISE.

Schedule O (Form 990) 2023	Page
Name of the organization FIRST AMENDMENT COALITION	Employer identification number 33-0308483
FORM 990, PART VI, SECTION B, LINE 15:	
COMPENSATION FOR THE EXECUTIVE DIRECTOR IS DETERMINED ANI	APPROVED BY THE
ENTIRE BOARD OF DIRECTORS. THE DATA CONSIDERED COMPARABLE	E COMPENSATION FOR
SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS AT SI	MILARLY SITUATED
ORGANIZATIONS TO A LIMITED EXTENT. COMPENSATION FOR OTHER	R EMPLOYEES IS
DETERMINED AND APPROVED BY THE EXECUTIVE COMMITTEE OF THE	E BOARD OF
DIRECTORS. THIS PROCESS WAS LAST DONE IN 2023.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT	OF INTEREST POLICY
AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REC	QUEST.
FORM 990, PART XII, LINE 2C:	
THIS IS THE INITIAL YEAR THAT THE ORGANIZATION OBTAINED A	AN AUDIT. THE
ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY	FOR OVERSIGHT
OF THE FINANCIAL STATEMENT AUDIT AND SELECTION OF INDEPEN	IDENT
ACCOUNTANT.	