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.

OMB No. 1545-0047

2023

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning 10-01-2023 , and ending 09-30-2024

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
NATIONAL FAIR HOUSING ALLIANCE

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1331 PENNSYLVANIA AVE NW 650

City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 20004

D Employer identification number
52-1676364

E Telephone number
(202) 898-1661

G Gross receipts $ 17,269,098

F Name and address of principal officer:
LISA RICE
1331 PENNSYLVANIA AVE NW 650
WASHINGTON,DC 20004

H(a) Is this a group return for subordinates? ☐ Yes ☑ No
H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions.
H(c) Group exemption number

I Tax-exempt status: ☑ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.NATIONALFAIRHOUSING.ORG

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: 1988

M State of legal domicile: VA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
TO ELIMINATE HOUSING DISCRIMINATION & TO ENSURE EQUAL HOUSING OPPORTUNITY FOR ALL PEOPLE.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	21
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	21
5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	45
6	Total number of volunteers (estimate if necessary)	6	21
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	14,499,723	6,562,456
	9	Program service revenue (Part VIII, line 2g)	1,806,596	2,539,418
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	690,344	913,492
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	24,401	22,281
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	17,021,064	10,037,647
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	3,468,936	3,145,873
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	6,024,558	6,229,691
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) 273,913		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	5,998,661	5,570,676
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	15,492,155	14,946,240
	19	Revenue less expenses. Subtract line 18 from line 12	1,528,909	-4,908,593

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	28,085,667	22,768,829
	21	Total liabilities (Part X, line 26)	4,488,432	3,218,264
	22	Net assets or fund balances. Subtract line 21 from line 20	23,597,235	19,550,565

Part II Signature Block

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 Here

Signature of officer — Date 2025-08-14
LISA RICE PRESIDENT & CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN P00397829
Firm's name GELMAN ROSENBERG & FREEDMAN			Firm's EIN 52-1392008	
Firm's address 4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 208142930			Phone no. (301) 951-9090	

May the IRS discuss this return with the preparer shown above? See Instructions. ☑ Yes ☐ No

Part 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:

FOUNDED IN 1988 AND HEADQUARTERED IN WASHINGTON, DC, THE NATIONAL FAIR HOUSING ALLIANCE (NFHA) IS THE ONLY NATIONAL ORGANIZATION DEDICATED SOLELY TO ENDING DISCRIMINATION IN HOUSING. (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 ☑ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as 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 $ 3,098,242 including grants of $ 522,407) (Revenue $ 286,400)

EDUCATION & OUTREACH: NFHA'S EDUCATION AND OUTREACH PROGRAM INFORMS CONSUMERS ABOUT THEIR RIGHTS AND HOW TO RECOGNIZE AND REPORT POSSIBLE DISCRIMINATION. IT ALSO TEACHES HOUSING PROVIDERS ABOUT THEIR OBLIGATIONS UNDER THE LAW AND THE BENEFITS OF EXPANDING FAIR HOUSING CHOICE. OUR NATIONAL FAIR HOUSING MEDIA CAMPAIGN MATERIALS INCLUDE PRINT PRODUCTS, BROCHURES, POSTERS, SOCIAL MEDIA MARKETING, AND TELEVISION AND RADIO PSAS. THESE CREATIVE ASSETS ARE MARKETED AND DISTRIBUTED TO MEDIA OUTLETS AND ORGANIZATIONS THROUGHOUT THE UNITED STATES. THROUGH OUR EDUCATION AND OUTREACH INITIATIVES, NFHA HAS:- CREATED HUNDREDS OF PUBLIC SERVICE ANNOUNCEMENTS COVERING ALL PROTECTED CLASSES UNDER THE FEDERAL LAW- DEVELOPED FAIR HOUSING MATERIALS IN NINE LANGUAGES TO BROADEN THE AUDIENCES LEARNING ABOUT FAIR HOUSING ISSUES- ACHIEVED OVER 5 BILLION IMPRESSIONS TO EDUCATE THE PUBLIC ABOUT THE BENEFITS OF FAIR HOUSING- RECEIVED OVER $170 MILLION IN DONATED MEDIA TO EDUCATE THE PUBLIC ABOUT FAIR HOUSING ISSUES

4b (Code:) (Expenses $ 2,868,533 including grants of $ 2,623,466) (Revenue $)

HOUSING & COMMUNITY DEVELOPMENT: THE HOUSING AND COMMUNITY DEVELOPMENT TEAM AT NFHA WORKS TO CREATE SUSTAINABLE HOUSING OPPORTUNITIES AND THRIVING, WELL-RESOURCED AND INCLUSIVE COMMUNITIES UTILIZING THE UNIQUE RESOURCES AND TOOLS AVAILABLE TO THE FAIR HOUSING MOVEMENT. THESE TOOLS AND RESOURCES ALLOW US TO INVEST IN HOUSING AND COMMUNITY DEVELOPMENT STRATEGIES THAT SPECIFICALLY ADDRESS THE HOUSING AND LENDING BARRIERS FACING PEOPLE OF COLOR AND PERSONS IN OTHER PROTECTED CLASSES.

4c (Code:) (Expenses $ 1,396,240 including grants of $) (Revenue $ 590,100)

ENFORCEMENT: IN 1968, THE FAIR HOUSING ACT WAS PASSED INTO LAW MAKING HOUSING DISCRIMINATION UNLAWFUL THROUGHOUT THE NATION. DESPITE THIS LEGAL PROTECTION AND DECADES OF WORK BY NFHA AND ITS MEMBERS TO EDUCATE AND TRAIN PERSONS AND ORGANIZATIONS, REINVEST IN COMMUNITIES, AND ADVOCATE FOR POLICIES THAT EXTEND EQUITY AND EQUALITY IN HOUSING NATIONWIDE, HOUSING DISCRIMINATION PERSISTS. NFHA'S ENFORCEMENT EFFORTS SUPPORT ITS MISSION BY ENGAGING IN ACTIVITIES TO DOCUMENT AND ADDRESS UNLAWFUL HOUSING DISCRIMINATION THROUGHOUT THE COUNTRY: - INTAKE AND REFERRALS: NFHA RECEIVES ALLEGATIONS OF DISCRIMINATION AND CONNECTS PERSONS WITH LOCAL FAIR HOUSING ORGANIZATIONS AND OTHER RESOURCES FOR INVESTIGATION AND ADVOCACY SERVICES. NFHA MAY ALSO PROVIDE INVESTIGATION AND ADVOCACY SERVICES.- INVESTIGATIONS: WHEN NFHA HAS REASON TO BELIEVE FAIR HOUSING LAWS ARE BEING VIOLATED, IT CONDUCTS INVESTIGATIONS TO ASSESS THE SITUATION. INVESTIGATIONS ARE OFTEN CONDUCTED IN COLLABORATION WITH LOCAL FAIR HOUSING CENTERS AND MAY COVER MULTIPLE STATES. - COUNTERACTION: IN INSTANCES WHERE NFHA IDENTIFIES DISCRIMINATION, NFHA DIVERTS ITS RESOURCES TO ADDRESS DOCUMENTED DISCRIMINATION THROUGH, FOR EXAMPLE, RE-TRAINING, RE-EDUCATION CAMPAIGNS, AND OUTREACH ACTIVITIES. - ELIMINATION AND PREVENTION: NFHA LEVERAGES FAIR HOUSING LAWS TO ELIMINATE DISCRIMINATION IT HAS DOCUMENTED, PREVENT FUTURE DISCRIMINATION, AND PROVIDE RELIEF TO INDIVIDUALS AND COMMUNITIES HARMED BY DISCRIMINATION. - COMMUNITY REINVESTMENT: NFHA SEEKS TO REINVEST IN COMMUNITIES HARMED BY DISCRIMINATION, AND TO MAKE NEIGHBORHOODS AND PERSONS WHOLE.- AMICUS BRIEFS: NFHA ENGAGES IN AMICUS BRIEFS TO SUPPORT THE DEVELOPMENT OF STRONG FAIR HOUSING JURISPRUDENCE.

(Code:) (Expenses $ 1,004,392 including grants of $) (Revenue $)

RESPONSIBLE AI: THE RESPONSIBLE AI PROGRAM IS A MULTI-FACETED EFFORT DESIGNED TO ELIMINATE BIAS IN ALGORITHMIC-BASED SYSTEMS USED IN HOUSING AND FINANCIAL SERVICES, INCREASE TRANSPARENCY AND EXPLAINABILITY FOR AI TOOLS, OUTLINE ETHICAL STANDARDS FOR RESPONSIBLE TECH, ADVANCE EFFECTIVE POLICIES FOR REGULATING AI TOOLS, AND INCREASE DIVERSITY AND INCLUSION IN THE TECH FIELD. THE GOAL IS TO HAVE OUR "GOLD STANDARD" OF ALGORITHMIC FAIRNESS ADOPTED BY REGULATORS, DEVELOPERS, AND CONSUMERS OF AI-BASED SYSTEMS.THIS INITIATIVE FOCUSES ON FIVE MAIN GOALS:- DEVELOPING SOLUTIONS FOR REMOVING BIAS FROM THE TECHNOLOGIES THAT SHAPE OUR LIVES- INCREASING TRANSPARENCY AND EXPLAINABILITY FOR AI TOOLS- ADVANCING RESEARCH TO HELP REDUCE BIAS IN TECH- DEVELOPING POLICIES THAT PROMOTE MORE EFFECTIVE OVERSIGHT FOR AI TOOLS- SUPPORTING EFFORTS TO INCREASE DIVERSITY, EQUITY, AND INCLUSION IN THE TECH FIELD

(Code:) (Expenses $ 803,824 including grants of $) (Revenue $)

PUBLIC POLICY: NFHA PLAYS A PIVOTAL ROLE IN PROVIDING IMPORTANT RESEARCH AND INFORMATION TO POLICY-MAKERS AND REGULATORS. NFHA SUPPORTS POLICY INITIATIVES THAT ADVANCE OUR GOALS OF ELIMINATING DISCRIMINATION IN HOUSING AND EXPANDING EQUAL ACCESS TO HOMEOWNERSHIP OPPORTUNITIES. SOME KEY PUBLIC POLICY ACCOMPLISHMENTS INCLUDE RESTORING CRITICAL FAIR HOUSING AND LENDING RULES TO ADVANCE RACIAL JUSTICE AND FAIRNESS FOR ALL; HELPING TO GENERATE 70 PERCENT OF THE PUBLIC COMMENTS IN FAVOR OF THE DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT'S AFFIRMATIVELY FURTHERING FAIR ACTION PROPOSED RULE; AND LEADING ADVOCACY EFFORTS TO MAKE THE CASE FOR SYSTEMIC REFORMS OF THE HOME VALUATION PROCESS.

(Code:) (Expenses $ 914,268 including grants of $) (Revenue $ 1,642,668)

CONSULTING & COMPLIANCE: NFHA PROVIDES A FULL RANGE OF CONSULTING AND COMPLIANCE SERVICES TO HOUSING, REAL ESTATE, MORTGAGE LENDING, APPRAISAL, HOMEOWNERS INSURANCE, TECH, AND OTHER COMPANIES. THIS INCLUDES CUSTOMIZED TRAINING PROGRAMS AND ASSESSMENT OF ALL POLICIES AND PRACTICES FOR COMPLIANCE WITH FAIR HOUSING/FAIR LENDING LAWS. NFHA ALSO PROVIDES TRAINING AND CONSULTING FOR NON-PROFIT FAIR HOUSING, CIVIL RIGHTS, SOCIAL JUSTICE, GOVERNMENTAL AND COMMUNITY DEVELOPMENT ORGANIZATIONS ON FAIR HOUSING ENFORCEMENT, EDUCATION, AND OUTREACH, AFFIRMATIVELY FURTHERING FAIR HOUSING, AND OTHER SUBJECTS DESIGNED TO PROMOTE FAIR HOUSING THROUGHOUT THE NATION.

(Code:) (Expenses $ 693,676 including grants of $) (Revenue $)

KEYS UNLOCK DREAMS: THE KEYS UNLOCK DREAMS INITIATIVE (KUDI) IS A NATIONWIDE INITIATIVE LED BY THE NATIONAL FAIR HOUSING ALLIANCE (NFHA) DESIGNED TO ACHIEVE FIVE MAJOR GOALS: 1. REMOVE STRUCTURAL BARRIERS THAT PERPETUATE RACIAL INEQUALITY;2. EXPAND AFFORDABLE AND FAIR HOUSING OPTIONS;3. PREVENT AN UNBALANCED RECOVERY FROM THE COVID-19 PANDEMIC;4. EMPOWER CONSUMERS AND STAKEHOLDERS WITH CRITICAL INFORMATION AND RESOURCES; AND5. HELP CLOSE THE RACIAL WEALTH AND HOMEOWNERSHIP GAPS. KEYS UNLOCK DREAMS PROMOTES PROGRAMS AND PRODUCTS SUPPORTING SUSTAINABLE MORTGAGES FOR AFFORDABLE HOUSING. IT ALSO ADVANCES PROGRAMS THAT CREATE SUSTAINABLE INCLUSIVE COMMUNITIES. THE KEYS UNLOCK DREAMS INITIATIVE CONNECTS CONSUMERS AND OTHER STAKEHOLDERS WITH IMPORTANT RESOURCES AND EVENTS TO EDUCATE PEOPLE ABOUT FAIR HOUSING AND FAIR CREDIT OPPORTUNITIES TO CREATE VIBRANT, INCLUSIVE COMMUNITIES.

(Code:) (Expenses $ 150,960 including grants of $) (Revenue $ 20,250)

MEMBER SERVICES: NFHA PROVIDES TECHNICAL ASSISTANCE TO MEMBER ORGANIZATIONS; ADVOCATES ON BEHALF OF MEMBERS ON A RANGE OF ISSUES; CONDUCTS EXTENSIVE TRAINING PROGRAMS IN THE FORM OF WEBINARS, IN-SERVICE EVENTS, CONFERENCES AND ITS FAIR HOUSING SCHOOL (R) TRAINING PROGRAM; AND COLLABORATES WITH MEMBERS ON REGIONAL AND NATIONAL SYSTEMIC INVESTIGATIONS. THESE EFFORTS ARE DESIGNED TO BUILD CAPACITY FOR PROVIDING ASSISTANCE TO VICTIMS OF DISCRIMINATION AND TO IMPROVE PROFICIENCY OF EDUCATION AND ENFORCEMENT EFFORTS AT THE LOCAL LEVEL.

4d Other program services (Describe in Schedule O.)
(Expenses $ 3,567,120 including grants of $) (Revenue $ 1,662,918)

4e **Total program service expenses** 10,930,135

Part IV Checklist of Required Schedules

#	Question	Line	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*? See instructions.	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D,* Part III	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? *If "Yes," complete Schedule D, Part V*	10		No
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.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D,* Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
c	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		No
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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
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		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I.* See instructions.	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	

Part IV **Checklist of Required Schedules** *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L,* Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L,* Part I	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L,* Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		No
c	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		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
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		No
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	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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

				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	44		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	45			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in 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		No
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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	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		No
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).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
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.**					
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter:					
a	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	10b				
11	**Section 501(c)(12) organizations.** Enter:					
a	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.)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O.			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in 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 excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.			15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			16		No
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? If "Yes," complete Form 6069.			17		

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

Check if Schedule O contains a response or note to any line in this Part VI . . . . ☑

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. 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 in Schedule O.	**1a** 21			
b	Enter the number of voting members included in line 1a, above, who are independent	**1b** 21			
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**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		**5**		No
6	Did the organization have members or stockholders?		**6**	Yes	
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**	Yes	
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**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?		**8b**		No
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 in Schedule O*		**9**		No

Section 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**		No
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**	Yes	
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**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	**12c**	Yes	
13	Did the organization have a written whistleblower policy?	**13**	Yes	
14	Did the organization have a written document retention and destruction policy?	**14**	Yes	
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?			
a	The organization's CEO, Executive Director, or top management official	**15a**	Yes	
b	Other officers or key employees of the organization	**15b**	Yes	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	**16a**		No
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**		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed

18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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:
SYLVESTER MCINTOSH 1331 PENNSYLVANIA AVE NW 650 WASHINGTON, DC 20004 (202) 898-1661

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) VINCE CURRY CHAIR	2.00	X		X				0	0	0
(2) NANCY HAYNES 1ST VICE CHAIR	2.00	X		X				0	0	0
(3) JOHN PETRUSZAK 2ND VICE CHAIR	2.00	X		X				0	0	0
(4) CAROLINE PEATTIE SECRETARY	2.00	X		X				0	0	0
(5) KENNETH SCOTT TREASURER	2.00	X		X				0	0	0
(6) KEENYA ROBERTSON IMMEDIATE PAST CHAIR	2.00	X		X				0	0	0
(7) CHANCELA AL-MANSOUR AT-LARGE MEMBER	2.00	X						0	0	0
(8) DANIEL BUSTAMANTE AT-LARGE MEMBER	2.00	X						0	0	0
(9) DENISE Y CATO BOARD MEMBER	2.00	X						0	0	0
(10) DAVID WAYNE DAWSON JR BOARD MEMBER	2.00	X						0	0	0
(11) LILA HACKETT BOARD MEMBER	2.00	X						0	0	0
(12) MEGAN HAMMOND BOARD MEMBER	2.00	X						0	0	0
(13) A J JONES BOARD MEMBER	2.00	X						0	0	0
(14) VINCE LARKINS BOARD MEMBER	2.00	X						0	0	0
(15) JIM MCCARTHY BOARD MEMBER	2.00	X						0	0	0
(16) ANGELA MCIVER BOARD MEMBER	2.00	X						0	0	0
(17) MICHELLE RYDZ BOARD MEMBER	2.00	X						0	0	0

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) SALLY SANTANGELO BOARD MEMBER	2.00	X						0	0	0
(19) SANDRA TAMEZ BOARD MEMBER	2.00	X						0	0	0
(20) GAIL WILLIAMS BOARD MEMBER	2.00	X						0	0	0
(21) JAY YOUNG BOARD MEMBER	2.00	X						0	0	0
(22) LISA RICE PRESIDENT & CEO	40.00			X				324,315	0	35,762
(23) CATHERINE CLOUD SENIOR ADVISOR TO CEO	40.00			X				266,946	0	19,230
(24) TIM GUINAN COO (FROM JUNE 2024)	40.00			X				0	0	0
(25) KATHLEEN FLYNN COO (UNTIL MARCH 2024)	40.00			X				146,691	0	22,721
(26) MICHAEL AKINWUMI CHIEF TECH EQUITY OFFICER	40.00				X			264,826	0	41,090
(27) NIKITRA BAILEY EXECUTIVE VICE PRESIDENT	40.00				X			216,613	0	34,477
(28) MORGAN WILLIAMS GENERAL COUNSEL	40.00					X		161,108	0	34,068
(29) SHERRILL FROST-BROWN VP MEMBER SERVICES	40.00					X		161,108	0	42,100
(30) ONESHIA HERRING SVP CONSULTING & COMPLIANCE	40.00					X		118,499	0	16,643
(31) MAUREEN YAP VP PUB. POL./SR COUN. FAIR LENDING	40.00					X		136,203	0	9,571
(32) SHANTI ABEDIN VP OF HOUSING AND COMMUNITY DEV'L	40.00					X		156,073	0	32,172

	(D)	(E)	(F)
1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	1,952,382	0	287,834

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 22

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization?*If "Yes," complete Schedule J for such person*	5		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
THE CAUSEWAY AGENCY LLC 21 CHARLES STREET STE 201 WESTPORT, CT 06880	NATIONAL MEDIA SERVICES	1,156,954
MARRIOTT INTERNATIONAL PO BOX 402642 ATLANTA, GA 303842642	EVENT HOSTING	290,532
THE URBAN INSTITUTE 500 LENFANT PLAZA SW WASHINGTON, DC 20024	KUDI CONSULTING	282,625
YOUR PART-TIME CONTROLLER 1500 WALNUT STE 1200 PHILADELPHIA, PA 19102	ACCOUNTING SERVICES	245,373
RELMAN COLFAX PLLC 1225 19TH ST NW STE 600 WASHINGTON, DC 20036	LEGAL SERVICES	227,968

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 11

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . ☐

Contributions, Gifts, Grants, and OtherAmt Similar Amounts

Line	Description	Ref	Amount	(A) Total revenue
1a	Federated campaigns	1a		
b	Membership dues	1b	2,839	
c	Fundraising events	1c		
d	Related organizations	1d		
e	Government grants (contributions)	1e	2,386,956	
f	All other contributions, gifts, grants, and similar amounts not included above	1f	4,172,661	
g	Noncash contributions included in lines 1a - 1f:$	1g		
h	**Total.** Add lines 1a-1f			6,562,456

Program Service Revenue

Line	Description	Business Code	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
2a	CONSULTING FEES	900099	1,642,668	1,642,668		
b	LITIGATION/SETTLEMENT	900099	590,100	590,100		
c	CONFERENCE	900099	286,400	286,400		
d	MEMBERSHIP DUES	900099	20,250	20,250		
e						
f	All other program service revenue.					
g	**Total.** Add lines 2a–2f.		2,539,418			

Other Revenue

Line	Description	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
3	Investment income (including dividends, interest, and other similar amounts)	891,544			891,544
4	Income from investment of tax-exempt bond proceeds				
5	Royalties				

Line	Description	Ref	(i) Real	(ii) Personal
6a	Gross rents	6a		
b	Less: rental expenses	6b		
c	Rental income or (loss)	6c		

Line	Description	(A)	(B)	(C)	(D)
d	Net rental income or (loss)				

Line	Description	Ref	(i) Securities	(ii) Other
7a	Gross amount from sales of assets other than inventory	7a	7,253,399	
b	Less: cost or other basis and sales expenses	7b	7,231,451	
c	Gain or (loss)	7c	21,948	

Line	Description	(A)	(B)	(C)	(D)
d	Net gain or (loss)	21,948			21,948

Line	Description	Ref	Amount
8a	Gross income from fundraising events (not including $ ____ of contributions reported on line 1c). See Part IV, line 18	8a	
b	Less: direct expenses	8b	
c	Net income or (loss) from fundraising events		
9a	Gross income from gaming activities. See Part IV, line 19	9a	
b	Less: direct expenses	9b	
c	Net income or (loss) from gaming activities		
10a	Gross sales of inventory, less returns and allowances	10a	
b	Less: cost of goods sold	10b	
c	Net income or (loss) from sales of inventory		

OtherRevenueMiscAmt

Line	Description	Business Code	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
11a	MISCELLANEOUS	900099	22,281			22,281
b						
c						
d	All other revenue					
e	**Total.** Add lines 11a–11d		22,281			
12	**Total revenue.** See instructions		10,037,647	2,539,418	0	935,773

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX . . . . ☑

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,145,873	3,145,873		
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	1,450,247	694,408	699,193	56,646
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	3,743,493	2,792,845	804,996	145,652
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	171,144	117,348	47,180	6,616
9 Other employee benefits	489,702	354,324	116,527	18,851
10 Payroll taxes	375,105	257,198	103,407	14,500
11 Fees for services (non-employees):				
a Management				
b Legal	340,838	302,427	38,411	
c Accounting	118,290	5,427	112,863	
d Lobbying	180,000	180,000		
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	29,353		29,353	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,726,553	2,022,705	698,792	5,056
12 Advertising and promotion				
13 Office expenses	132,836	42,294	90,409	133
14 Information technology	365,850	102,338	259,126	4,386
15 Royalties . .				
16 Occupancy	359,865	14,804	345,061	
17 Travel	366,898	323,613	38,680	4,605
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	565,507	495,229	70,278	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization . .	87,487		87,487	
23 Insurance . . .	29,926	2,868	27,058	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a STAFF RECRUITMENT	141,143	9,906	129,138	2,099
b LICENSE RENEWAL FEE	63,264	44,747	10,648	7,869
c DUES & SUBSCRIPTIONS	38,157	20,519	10,138	7,500
d EQUIPMENT RENTAL/MAINT.	24,709	1,262	23,447	
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	14,946,240	10,930,135	3,742,192	273,913
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX . . . . ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing	39,793	1	39,793
	2	Savings and temporary cash investments	18,939,708	2	12,430,966
	3	Pledges and grants receivable, net	3,286,286	3	2,668,424
	4	Accounts receivable, net	181,383	4	137,971
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	149,256	9	51,908
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 776,734			
	b	Less: accumulated depreciation — 10b: 500,884	358,755	10c	275,850
	11	Investments—publicly traded securities	3,635,171	11	5,909,095
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,495,315	15	1,254,822
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	28,085,667	16	22,768,829
Liabilities	17	Accounts payable and accrued expenses	2,243,602	17	1,400,659
	18	Grants payable		18	
	19	Deferred revenue	40,000	19	70,000
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	2,204,830	25	1,747,605
	26	**Total liabilities.** Add lines 17 through 25	4,488,432	26	3,218,264
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here** ☑ **and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	14,346,511	27	12,196,701
	28	Net assets with donor restrictions	9,250,724	28	7,353,864
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ **and complete lines 29 through 33.**			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	23,597,235	32	19,550,565
	33	Total liabilities and net assets/fund balances	28,085,667	33	22,768,829

Part XI Reconcilliation 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	10,037,647
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,946,240
3	Revenue less expenses. Subtract line 2 from line 1	3	-4,908,593
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	23,597,235
5	Net unrealized gains (losses) on investments	5	861,923
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in 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	10	19,550,565

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other ____________ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	Yes	

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

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
NATIONAL FAIR HOUSING ALLIANCE

Employer identification number
52-1676364

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)

9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:

10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . .

g Provide the following information about the supported organization(s).

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 10 above (see instructions))	**(iv)** Is the organization listed in your governing document?		**(v)** Amount of monetary support (see instructions)	**(vi)** Amount of other support (see instructions)
			Yes	**No**		
Total						

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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . .	4,666,509	6,027,009	7,880,557	14,499,723	6,562,456	39,636,254
2 Tax revenues levied for the organization'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	4,666,509	6,027,009	7,880,557	14,499,723	6,562,456	39,636,254
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . .						9,006,127
6 **Public support.** Subtract line 5 from line 4.						30,630,127

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4. .	4,666,509	6,027,009	7,880,557	14,499,723	6,562,456	39,636,254
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .	67,929	107,514	223,655	684,946	891,544	1,975,588
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.). .	70,227	10,160	21,890	24,401	22,281	148,959
11 **Total support.** Add lines 7 through 10						41,760,801

12 Gross receipts from related activities, etc. (see instructions) . . . . | 12 | 23,968,932

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f)) . . . . | 14 | 73.350 %

15 Public support percentage for 2022 Schedule A, Part II, line 14 . . . . | 15 | 71.970 %

16a **33 1/3% support test—2023.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶ ☑

b **33 1/3% support test—2022.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2023.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . ▶ ☐

b **10%-facts-and-circumstances test—2022.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . ▶ ☐

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

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 performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b. .						
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. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .						
13 **Total support.** (Add lines 9, 10c, 11, and 12.). .						

14 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**. . . . . ▶☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2023** (line 10c, column (f) divided by line 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 organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶☐

b **33 1/3% support tests—2022.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
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.*	1		
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).*	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.*	3a		
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.*	3b		
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.*	3c		
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.*	4a		
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.*	4b		
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.*	4c		
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).*	5a		
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?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
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.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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) .*	7		
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).*	8		
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.***	9a		
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.***	9b		
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.***	9c		
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.*	10a		
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).*	10b		

Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on 11a above?	11b		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to 11a, 11b, or 11c, provide detail in **Part VI**.*	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in **Part VI** 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**:

- a ☐ The organization satisfied the Activities Test. Complete **line 2** below.
- b ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.
- c ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

2 Activities Test. **Answer lines 2a and 2b below.**

			Yes	No
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.*	2a		
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.*	2b		
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.***	3a		
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.*	3b		

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1 ☐ Check here if the organization satisfied 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.

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	**Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**Discount** claimed for blockage or other factors (*explain in detail in **Part VI***):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
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		

	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 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-functionally-integrated Type III supporting organization (see instructions)

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

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 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (*prior IRS approval required - provide details in* ***Part VI***)	5	
6 Other distributions (*describe in* ***Part VI***). See instructions	6	
7 **Total annual distributions.** Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (*provide details in* ***Part VI***). See instructions	8	
9 Distributable amount for 2023 from Section C, line 6	9	
10 Line 8 amount divided by Line 9 amount	10	

Section E - Distribution Allocations (see instructions)	**(i)** **Excess Distributions**	**(ii)** **Underdistributions Pre-2023**	**(iii)** **Distributable Amount for 2023**
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required-- *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 e			
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. If the amount is greater than zero, *explain in* ***Part VI***. See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, *explain in* ***Part VI***. See instructions.			
7 **Excess distributions carryover to 2024.** Add lines 3j 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.			

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).

Facts And Circumstances Test

Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version:

Schedule B
(Form 990)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization	**Employer identification number**
NATIONAL FAIR HOUSING ALLIANCE	52-1676364

Organization type (check one):

Filers of: **Section:**

Form 990 or 990-EZ
☐ 501(c)( ) (enter number) organization
☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
☐ 527 political organization

Form 990-PF
☐ 501(c)(3) exempt private foundation
☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
☐ 501(c)(3) taxable private foundation

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

General Rule

☐ 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 other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the $33\frac{1}{3}$% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), 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, II, and III.

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

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
NATIONAL FAIR HOUSING ALLIANCE

Employer identification number
52-1676364

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED	,	$ RESTRICTED	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
NATIONAL FAIR HOUSING ALLIANCE	52-1676364

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		$	

(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
-		$	

Name of organization
NATIONAL FAIR HOUSING ALLIANCE

Employer identification number
52-1676364

Part III ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once. See instructions.) ▶ $**

Use duplicate copies of Part III if additional space is needed.

(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, and ZIP 4	Relationship of transferor to transferee
-	

(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, and ZIP 4	Relationship of transferor to transferee
-	

(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, and ZIP 4	Relationship of transferor to transferee
-	

(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, and ZIP 4	Relationship of transferor to transferee
-	

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE C (Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

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

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

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

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

Name of the organization	Employer identification number
NATIONAL FAIR HOUSING ALLIANCE	52-1676364

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."

2 Political campaign activity expenditures. See instructions ▶ $

3 Volunteer hours for political campaign activities. See instructions

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds. If none, enter -0-.	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1				
2				
3				
4				
5				
6				

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	0	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	241,608	
c Total lobbying expenditures (add lines 1a and 1b)	241,608	
d Other exempt purpose expenditures	14,675,279	
e Total exempt purpose expenditures (add lines 1c and 1d)	14,916,887	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	895,844	

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.

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)	223,961	
h Subtract line 1g from line 1a. If zero or less, enter -0-.	0	
i Subtract line 1f from line 1c. If zero or less, enter -0-.	0	

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

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)	**(a)** 2019	**(b)** 2020	**(c)** 2021	**(d)** 2022	**(e)** Total
2a Lobbying nontaxable amount	476,954	575,144	924,608	895,844	2,872,550
b Lobbying ceiling amount (150% of line 2a, column(e))					4,308,825
c Total lobbying expenditures	90,765	211,683	242,113	241,608	786,169
d Grassroots nontaxable amount	119,239	143,786	231,152	223,961	718,138
e Grassroots ceiling amount (150% of line 2d, column (e))					1,077,207
f Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

			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 expenditures from the prior year?	3		

Part III-B **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 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 expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure 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 list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the organization
NATIONAL FAIR HOUSING ALLIANCE

Employer identification number
52-1676364

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? . . . . ☐ Yes ☐ No

Part II Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (e.g., recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register . . .	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ______

4 Number of states where property subject to conservation easement is located ▶ ______

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ ______

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ $ ______

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? . . . . ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 . . . . ▶ $ ______

(ii) Assets included in Form 990, Part X . . . . ▶ $ ______

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 . . . . ▶ $ ______

b Assets included in Form 990, Part X . . . . ▶ $ ______

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- **a** ☐ Public exhibition
- **b** ☐ Scholarly research
- **c** ☐ Preservation for future generations
- **d** ☐ Loan or exchange programs
- **e** ☐ Other ....

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?. . . ☐ **Yes** ☐ **No**

Part IV **Escrow and Custodial Arrangements.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table:

			Amount
c	Beginning balance	**1c**	
d	Additions during the year	**1d**	
e	Distributions during the year	**1e**	
f	Ending balance	**1f**	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . . . ☐

Part V **Endowment Funds.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	**(b)** Prior year	**(c)** Two years back	**(d)** Three years back	**(e)** Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ ....

b Permanent endowment ▶ ....

c Term endowment ▶ ....

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

			Yes	**No**
	(i) Unrelated organizations	**3a(i)**		
	(ii) Related organizations	**3a(ii)**		
b	If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	**3b**		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI **Land, Buildings, and Equipment.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	**(a)** Cost or other basis (investment)	**(b)** Cost or other basis (other)	**(c)** Accumulated depreciation	**(d)** Book value
1a Land				
b Buildings				
c Leasehold improvements		605,170	357,383	247,787
d Equipment		171,564	143,501	28,063
e Other				

Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . ▶ 275,850

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

(a) Description of security or category (including name of security)	**(b)** Book value	**(c)** Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶		

Part VIII Investments - Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	**(b)** Book value
(1)DEPOSITS	33,819
(2)RIGHT-OF-USE ASSET	1,221,003
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* ▶	1,254,822

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

1. **(a)** Description of liability	**(b)** Book value
(1) Federal income taxes	
OPERATING LEASE LIABILITY	1,747,605
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	1,747,605

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	11,157,847
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	861,923		
b	Donated services and use of facilities	2b	287,630		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	1,149,553
3	Subtract line **2e** from line **1**			3	10,008,294
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	29,353		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	29,353
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	10,037,647

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	15,204,517
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	287,630		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	287,630
3	Subtract line **2e** from line **1**			3	14,916,887
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	29,353		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	29,353
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	14,946,240

Part XIII Supplemental Information

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

Return Reference	Explanation

Additional Data

Return to Form

Software ID:

Software Version:

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047
2023
Open to Public Inspection

Name of the organization
NATIONAL FAIR HOUSING ALLIANCE

Employer identification number
52-1676364

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ATLANTA NEIGHBORHOOD DEVELOPMENT PARTNERSHIP INC 229 PEACHTREE STREET NE STE 705 ATLANTA,GA 303031605	58-1946632	501(C)(3)	89,250	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(2) CENTER FOR TRANSFORMING COMMUNITIES 258 N MERTON ST MEMPHIS,TN 38112	62-1769933	501(C)(3)	10,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(3) CHARLESTON AREA URBAN LEAGUE 2133 N HILLSIDE DR CHARLESTON,SC 29407	57-0961628	501(C)(3)	74,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(4) CHARLESTON REDEVELOPMENT CORP 75 CALHOUN ST CHARLESTON,SC 29401	27-3715681	501(C)(3)	74,667	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(5) CHICANOS POR LA CAUSA INC 1112 E BUCKEYE RD PHOENIX,AZ 85034	86-0227210	501(C)(3)	60,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(6) COLUMBUS HOUSING PARTNERSHIP DBA HOMEPORT 3443 AGLER ROAD STE 200 COLUMBUS,OH 43219	31-1208260	501(C)(3)	160,650	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(7) CSA SAN DIEGO COUNTY 327 VAN HOUTEN EL CAJON,CA 92020	27-3317344	501(C)(3)	80,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(8) FAIR HOUSING NAPA VALLEY 611 CABOT WAY NAPA,CA 94559	52-3462515	501(C)(3)	13,500	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(9) HABITAT FOR HUMANITY OF GREATER KANSAS CITY 1423 LINWOOD BLVD KANSAS CITY,MO 64109	43-1175749	501(C)(3)	110,304	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(10) HABITAT FOR HUMANITY OF GREATER MEMPHIS 7136 WINCHESTER ROAD MEMPHIS,TN 38125	62-1157233	501(C)(3)	78,624	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(11) HABITAT FOR HUMANITY OF THE CHESAPEAKE INC 3741 COMMERCE DRIVE STE 309 BALTIMORE,MD 21227	52-1226188	501(C)(3)	37,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(12) HOME BUILDERS FOUNDATION OF METRO DENVER 88 INVERNESS CIR E UNIT E105 ENGLEWOOD,CO 801125511	84-1263718	501(C)(3)	18,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(13) HOMEFREE-USA 8401 CORPORATE DR N LANDOVER,MD 20785	13-4148824	501(C)(3)	37,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(14) HOMEOWNERSHIP COUNCIL AMERICA 712 H ST NE STE 725 WASHINGTON,DC 20002	87-0798977	501(C)(3)	461,600	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(15) HOMEWISE INC 1301 SILER RD BLDG D SANTE FE,NM 87507	85-0346325	501(C)(3)	60,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(16) HOUSING PARTNERSHIP MORRIS CO 2 EAST BLACKWELL ST DOVER,NJ 07801	22-3194848	501(C)(3)	9,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(17) INVEST NEWARK 111 MULBERRY ST NEWARK,NJ 07102	26-0829057	501(C)(3)	61,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(18) JUSTINE PETERSEN HOUSING & REDEVELOPMENT CORP 1023 N GRAND BLVD ST LOUIS,MO 63106	43-1769074	501(C)(3)	40,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(19) MANNA INC 6856 EASTERN AVE NW STE 100 WASHINGTON,DC 20012	52-1260698	501(C)(3)	14,385	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(20) MOUNT VERNON MANOR INC 611 N 39TH ST PHILADELPHIA,PA 19104	23-2037301	501(C)(3)	111,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(21) NEIGHBORHOOD DEVELOPMENT ALLIANCE INC 481 WABASHA ST SOUTH SAINT PAUL,MN 55107	41-1658636	501(C)(3)	72,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(22) NEIGHBORHOOD HOUSING SERVICES OF BALTIMORE 25 E 20TH STREET 170 BALTIMORE,MD 21218	52-1007666	501(C)(3)	160,650	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(23) NEW DIRECTIONS HOUSING CORP 1617 MAPLE ST LOUISVILLE,KY 40210	36-3958717	501(C)(3)	36,400	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(24) NEW JERSEY COMMUNITY CAPITAL 100 ALBANY STREET STE 250 NEW BRUNSWICK,NJ 08901	22-2872262	501(C)(3)	43,880	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(25) ONE NEIGHBORHOOD BUILDERS 66 CHAFFEE ST PROVIDENCE,RI 02909	22-3010422	501(C)(3)	60,295	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(26) ORIGIN SC 8084 RIVERS AVE NORTH CHARLESTON,SC 29406	57-0324920	501(C)(3)	20,025	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(27) PIMA COUNTY COMMUNITY LAND TRUST 17 N LINDA AVE TUCSON,AZ 85745	27-2635994	501(C)(3)	20,734	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(28) PRIMAVERA FOUNDATION 151 W 40TH ST TUCSON,AZ 85713	86-0733182	501(C)(3)	30,176	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(29) PROVIDENCE REVOLVING FUND 372 W FOUNTAIN ST PROVIDENCE,RI 02903	13-4148824	501(C)(3)	74,847	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(30) RETAIL ARTS INNOVATION AND LIVABILITY CDC 237 W MAIN ST MESA,AZ 85201	81-1750552	501(C)(3)	45,900	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(31) SDHC BUILDING OPPORTUNITIES INC 1122 BROADWAY STE 300 SAN DIEGO,CA 92101	82-1946283	501(C)(3)	26,784	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(32) SONORA ENVIRONMENTAL RESEARCH INSTITUTE INC 3202 E GRANT RD TUCSON,AZ 85716	86-0767843	501(C)(3)	35,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(33) SOUTHEAST COMMUNITY DEVELOPMNT 3323 EASTERN AVE BALTIMORE,MD 21224	52-1034466	501(C)(3)	70,800	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(34) SOUTHWEST FAIR HOUSING COUNCIL 5425 E BROAHWAY BLVD 297 TUCSON,AZ 857113704	86-0530355	501(C)(3)	14,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(35) THE CAUSEWAY AGENCY LLC 16 PATTEN PARKWAY CHATTANOOGA,TN 37402	80-0589392	501(C)(3)	88,768	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(36) THE HOUSING PARTNERSHIP INC 1512 CRUMS LN STE 401 LOUISVILLE,KY 40216	61-1154315	501(C)(3)	15,200	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(37) THE WORKS INC 1471 GENESIS CIRCLE MEMPHIS,TN 38106	62-1751430	501(C)(3)	92,500	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(38) TRELLIS 1405 EAST MCDOWELL RD PHOENIX,AZ 85006	51-0152395	501(C)(3)	37,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(39) URBAN LEAGUE OF SAN DIEGO COUNTY 4305 UNIVERSITY AVE STE 360 SAN DIEGO,CA 92105	95-1772854	501(C)(3)	36,295	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(40) WESTSIDE HOUSING ORGANIZATION 919 W 24TH ST KANSAS CITY,MO 64108	43-1122742	501(C)(3)	76,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(41) YACHAD INC 8720 GEORGIA AVE STE 705 SILVERSPRING,MD 20910	52-1698588	501(C)(3)	55,000	0			FUND COMMUNITY ACCESSIBILITY PROJECTS
(42) FAIR HOUSING COUNCIL OF METROPOLITAN MEMPHIS 3355 POPLAR AVE STE 112 MEMPHIS,TN 381114685	93-4007602	501(C)(3)	433,639	0			FUND COMMUNITY ACCESSIBILITY PROJECTS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . ▶ 42

3 Enter total number of other organizations listed in the line 1 table . . . ▶ 0

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	NATIONAL FAIR HOUSING ALLIANCE MONITORS THESE GRANTS FUNDS BY REQUIRING INVOICES OF SERVICES PERFORMED, ALONG WITH A WRITTEN REPORT WHICH SUMMARIZES THE NEED OF THE RECIPIENT, BEFORE AND AFTER PICTURES OF THE HOME REHABBED, AND, IF AVAILABLE, TESTIMONIALS FROM THE RECIPIENT. IN ADDITION, ON OCCASION, NFHA WILL DO AN ON-SITE VISIT OF THE GRANTEE'S OFFICES, PLUS VISIT THE RECIPIENT'S HOME.

Additional Data

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Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization
NATIONAL FAIR HOUSING ALLIANCE

Employer identification number
52-1676364

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☑ Compensation committee ☐ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	**4c**		No
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	**5a**		No
b	Any related organization? . . . . If "Yes," on line 5a or 5b, describe in Part III.	**5b**		No
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	**6a**		No
b	Any related organization? . . . . If "Yes," on line 6a or 6b, describe in Part III.	**6b**		No
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**	Yes	
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

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 are not 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.

(A) Name and Title		**(B)** Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
1 LISA RICE PRESIDENT & CEO	**(i)**	319,315	5,000	0	19,459	16,303	360,077	0
	(ii)	0	0	0	0	0	0	0
2 MICHAEL AKINWUMI CHIEF TECH EQUITY OFFICER	**(i)**	249,826	15,000	0	15,890	25,200	305,916	0
	(ii)	0	0	0	0	0	0	0
3 CATHERINE CLOUD SENIOR ADVISOR TO CEO	**(i)**	261,946	5,000	0	16,017	3,213	286,176	0
	(ii)	0	0	0	0	0	0	0
4 NIKITRA BAILEY EXECUTIVE VICE PRESIDENT	**(i)**	209,929	6,684	0	12,997	21,480	251,090	0
	(ii)	0	0	0	0	0	0	0
5 SHERRILL FROST-BROWN VP MEMBER SERVICES	**(i)**	153,765	7,343	0	9,666	32,434	203,208	0
	(ii)	0	0	0	0	0	0	0
6 MORGAN WILLIAMS GENERAL COUNSEL	**(i)**	155,563	5,545	0	9,666	24,402	195,176	0
	(ii)	0	0	0	0	0	0	0
7 SHANTI ABEDIN VP OF HOUSING AND COMMUNITY DEV'L	**(i)**	151,073	5,000	0	9,364	22,808	188,245	0
	(ii)	0	0	0	0	0	0	0
8 KATHLEEN FLYNN COO (UNTIL MARCH 2024)	**(i)**	146,691	0	0	8,801	13,920	169,412	0
	(ii)	0	0	0	0	0	0	0

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.

Return Reference	Explanation
PART I, LINE 7	THE FOLLOWING EMPLOYEES RECEIVED MERIT-BASED BONUSES DURING THE YEAR: LISA RICE $5,000 MICHAEL AKINWUMI $15,000 MORGAN WILLIAMS $5,545 NIKITRA BAILEY $6,684 SHERRILL FROST-BROWN $7,343 ONESHIA HERRING $2,083 SHANTI ABEDIN $5,000 CATHERINE CLOUD $5,000 MAUREEN YAP $5,000

Additional Data

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SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization
NATIONAL FAIR HOUSING ALLIANCE

Employer identification number
52-1676364

Return Reference	Explanation
FORM 990, PART III, LINE 1	NFHA WORKS TO ENSURE EQUITABLE HOUSING OPPORTUNITIES FOR ALL PEOPLE AND COMMUNITIES THROUGH ITS EDUCATION AND OUTREACH, MEMBER SERVICES, PUBLIC POLICY, ADVOCACY, HOUSING AND COMMUNITY DEVELOPMENT, RESPONSIBLE AI, ENFORCEMENT AND CONSULTING AND COMPLIANCE PROGRAMS. NFHA'S OVERARCHING FOCUS IS TO MAKE FAIR HOUSING A CORNERSTONE CIVIL RIGHTS AND SOCIAL JUSTICE ISSUE AND REMOVE BARRIERS AND CREATE FAIR ACCESS TO EQUITABLE HOUSING AND ECONOMIC OPPORTUNITIES FOR UNDERSERVED PEOPLE AND COMMUNITIES. NFHA'S PRIMARY MEMBERSHIP IS COMPRISED OF PRIVATE, NONPROFIT FAIR HOUSING ORGANIZATIONS FROM RURAL STATES TO LARGE METROPOLITAN AREAS. NFHA HAS 35 FULL-TIME STAFF RESPONSIBLE FOR PROGRAMS ACROSS A BROAD SPECTRUM OF AREAS.
FORM 990, PART VI, SECTION A, LINE 6	NFHA HAS THREE MEMBERSHIP CATEGORIES: OPERATING MEMBERS - ARE NON-PROFIT CORPORATIONS OR ORGANIZATIONS PRIMARILY ENGAGED IN THE ACHIEVEMENT OF FAIR HOUSING, AND WHICH (1) INVESTIGATE ALLEGED VIOLATIONS OF FAIR HOUSING LAW AND ASSIST OR FILE MERITORIOUS COMPLAINTS ON BEHALF OF OR IN CONJUNCTION WITH VICTIMS OF HOUSING DISCRIMINATION BEFORE ADMINISTRATIVE AGENCIES OR COURTS; (2) MAINTAIN FULL TIME STAFF DEDICATED TO COMPLAINT INTAKE, INVESTIGATION AND TESTING OF FAIR HOUSING ALLEGATIONS; (3) SUBSCRIBE TO THE PURPOSE OF NFHA AS STATED ABOVE; (4) MAKE APPLICATION FOR OPERATING MEMBERSHIP; AND (5) PAY ALL ANNUAL DUES AS SET BY THE BOARD OF DIRECTORS. APPLICATIONS FOR OPERATING MEMBERSHIP MUST BE APPROVED BY THE BOARD OF DIRECTORS. SUPPORTING MEMBERS - ARE THOSE ORGANIZATIONS, ASSOCIATIONS, ENTITIES OR GOVERNMENT AGENCIES THAT DO NOT QUALIFY AS OPERATING MEMBERS, BUT DO (1) SUBSCRIBE IN WRITING TO THE PURPOSE OF NFHA AS STATED ABOVE AND; (2) PAY THE ANNUAL DUES AS SET BY THE BOARD OF DIRECTORS. SUPPORTING MEMBERS ARE NON-VOTING MEMBERS. INDIVIDUAL MEMBERS - ARE PERSONS THAT DO NOT QUALIFY AS OPERATING MEMBERS OR SUPPORTING MEMBERS BUT DO; (1) SUBSCRIBE IN WRITING TO THE PURPOSE OF NFHA AS STATED ABOVE AND; (2) PAY THE ANNUAL DUES AS SET BY THE BOARD OF DIRECTORS. INDIVIDUAL MEMBERS ARE NON-VOTING MEMBERS.
FORM 990, PART VI, SECTION A, LINE 7A	THE BOARD OF DIRECTORS IS COMPOSED OF OPERATING MEMBERS, SUPPORTING MEMBERS AND INDIVIDUAL MEMBERS. APPLICATIONS FOR OPERATING MEMBERSHIP MUST BE APPROVED BY THE CURRENT BOARD.
FORM 990, PART VI, SECTION A, LINE 8B	THE COMMITTEES OF THE BOARD OF DIRECTORS DO NOT HAVE THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY. THEREFORE, DOCUMENTATION OF COMMITTEE ACTIVITY IS HANDLED THROUGH THE MINUTES OF BOARD MEETINGS.
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 WAS PREPARED BY OUTSIDE ACCOUNTANTS. IT WAS REVIEWED IN DETAIL BY THE PRESIDENT AND CEO AS WELL AS THE CHIEF OPERATING OFFICER. IT WAS THEN APPROVED BY VOTE AT A MEETING OF THE AUDIT COMMITTEE. A COPY OF THE RETURN WAS PROVIDED TO THE FULL BOARD PRIOR TO FILING WITH THE IRS.
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY HAS BEEN APPROVED BY THE BOARD. ANNUALLY, BOARD MEMBERS AND STAFF SIGN AN ATTESTATION STATEMENT. IF THE ORGANIZATION BECOMES AWARE OF A CONFLICT OF INTEREST, IT ASKS THE INDIVIDUAL(S) TO RECUSE THEMSELVES FROM DISCUSSION OF THE MATTER.
FORM 990, PART VI, SECTION B, LINE 15	THE PROCESS FOR DETERMINING COMPENSATION OF TOP MANAGEMENT AND FOR OTHER OFFICERS OR KEY EMPLOYEES INCLUDES STUDIES OF SURVEYS, PURCHASING COMPENSATION STUDIES, AND APPROVAL BY THE BOARD. THE LAST COMPENSATION REVIEW TOOK PLACE IN SEPTEMBER 2024.
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE GENERALLY NOT PROVIDED TO THE PUBLIC. THE ORGANIZATION'S FORM 990 IS AVAILABLE UPON REQUEST.
FORM 990, PART IX, LINE 11G	SUBCONTRACTORS: PROGRAM SERVICE EXPENSES 789,939. MANAGEMENT AND GENERAL EXPENSES 272,903. FUNDRAISING EXPENSES 1,975. TOTAL EXPENSES 1,064,817. TESTERS FEES: PROGRAM SERVICE EXPENSES 27,288. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 27,288. CONSULTANTS: PROGRAM SERVICE EXPENSES 1,205,478. MANAGEMENT AND GENERAL EXPENSES 425,889. FUNDRAISING EXPENSES 3,081. TOTAL EXPENSES 1,634,448.

Additional Data

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