

WEGNER CPAS LLP
230 PARK AVE FL 3
NEW YORK, NY 10169-0005

THE FREEDOM FUND
315 FLATBUSH AVENUE, 406
BROOKLYN, NY 11217

|||||||

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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.

2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE FREEDOM FUND		D Employer identification number 30-0805768
	Doing business as		E Telephone number 929-224-2448
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 13,472,289.
	315 FLATBUSH AVENUE	406	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code BROOKLYN, NY 11217		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
F Name and address of principal officer: NICHOLAS GRONO SAME AS C ABOVE			H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.FREEDOMFUND.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation: 2013
			M State of legal domicile: PA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O.		
	2 Check this box <input type="checkbox"/> 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	8
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	8
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	9
	6 Total number of volunteers (estimate if necessary)	6	8
	7 a 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.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 51,194,883.	Current Year 13,372,394.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,275.	99,895.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	51,201,158.	13,472,289.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	5,317,960.
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)		3,991,397.	4,545,985.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25)		1,911,649.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,399,784.	7,369,523.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	12,709,141.	19,583,402.	
19 Revenue less expenses. Subtract line 18 from line 12	38,492,017.	-6,111,113.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 51,719,352.	End of Year 45,895,614.
	21 Total liabilities (Part X, line 26)	927,533.	1,296,898.
	22 Net assets or fund balances. Subtract line 21 from line 20	50,791,819.	44,598,716.

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		
	ZOE MARSHALL, DIRECTOR OF FINANCE/SECRETARY Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	GLENN MILLER, CPA	GLENN MILLER, CPA	10/26/23		P00086726
Preparer Use Only	Firm's name	Firm's EIN		Phone no. (212) 551-1724	
	WEGNER CPAS LLP 230 PARK AVE FL 3 NEW YORK, NY 10169-0005	39-0974031			

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 [X]

1 Briefly describe the organization's mission: CHALLENGE THE SYSTEMS THAT ALLOW MODERN SLAVERY TO PERSIST AND THRIVE. WORKING TOGETHER, WE PROTECT COMMUNITIES PUT AT RISK OF MODERN SLAVERY, ASSIST THOSE EXPERIENCING MODERN SLAVERY TO LEAVE THE SITUATION AND SUPPORT THEIR REINTEGRATION IN THE COMMUNITY, AS WELL AS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

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 \$ 8,743,315. including grants of \$ 4,420,987.) (Revenue \$ 0.) HOTSPOTS PROJECTS: THE FREEDOM FUND HAS SELECTED KEY GEOGRAPHIC AREAS KNOWN TO HAVE A HIGH INCIDENCE OF MODERN SLAVERY, WHERE OUR INTERVENTIONS ARE MOST LIKELY TO RESULT IN A MEASURABLE REDUCTION IN SLAVERY. IN OUR HOTSPOT PROJECTS, WE INVEST IN A RANGE OF COMMUNITY-BASED ORGANIZATIONS TO ENABLE THEM TO PROTECT THOSE AT RISK OF SLAVERY, RESCUE AND REHABILITATE THOSE ENSLAVED, AND PROSECUTE THOSE RESPONSIBLE. THESE HOTSPOT PROJECTS ENCOURAGE COOPERATION BETWEEN LOCAL GRASSROOTS ORGANIZATIONS AND ENSURE AN INTEGRATED, CROSS-DISCIPLINARY APPROACH.

4b (Code:) (Expenses \$ 3,518,445. including grants of \$ 1,957,500.) (Revenue \$ 0.) MOVEMENT BUILDING: ORGANIZATIONS AROUND THE WORLD ARE DOING EXCEPTIONAL WORK TO ERADICATE SLAVERY BUT, TOO OFTEN, THESE EFFORTS ARE FRAGMENTED AND UNDERFUNDED. WE AIM TO BUILD A GLOBAL COMMUNITY OF ACTIVISTS, EXPERTS AND DONORS BY PROVIDING THE PLATFORM, KNOWLEDGE, AND TOOLS FOR THEM TO CONNECT AND WORK TOGETHER MORE EFFECTIVELY OVER A SUSTAINED PERIOD. WE USE OUR GLOBAL LEADERSHIP ROLE, AND THE CREDIBILITY CONFERRED BY THE BACKING OF OUR FOUNDERS, TO BRING ACTORS TOGETHER AND ENCOURAGE GREATER COLLABORATION AND COORDINATION.

4c (Code:) (Expenses \$ 1,939,686. including grants of \$ 1,189,407.) (Revenue \$ 0.) GLOBAL INITIATIVES: THE FREEDOM FUND'S CORPORATE ACCOUNTABILITY INITIATIVE INVESTS IN ACCOUNTABILITY-BASED PROGRAMS DESIGNED TO SHIFT CORPORATE BEHAVIOUR AS A DRIVER OF FORCED LABOUR ACROSS ALL SECTORS OF THE GLOBAL ECONOMY. OUR GOAL IS TO INCENTIVISE BROADER SYSTEMS CHANGE BY INCREASING THE PRESSURE ON BUSINESSES TO ADDRESS AND REMEDY FORCED LABOUR IN THEIR SUPPLY CHAINS. THIS WORK IS FOCUSED ON INCENTIVISING COMPANIES TO ACT, THROUGH ACCOUNTABILITY ACTIONS AND CAMPAIGNS, SUPPORTING ACCESS TO REMEDY, AND BUILDING A STRONGER AND MORE CONNECTED GLOBAL CORPORATE ACCOUNTABILITY MOVEMENT.

4d Other program services (Describe on Schedule O.) (Expenses \$ 743,308. including grants of \$ 100,000.) (Revenue \$ 0.)

4e Total program service expenses 14,944,754.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and schedules A through I.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 detailing various organizational requirements and compliance checks.

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

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 1b Enter the number of voting members included... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of the organization's assets... 6 Did the organization have members or stockholders... 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... 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b 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 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization 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? 16b 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?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CT, FL, IL, KY, MD, MA, MI, MN
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of 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
ZOE MARSHALL - 20-3777-2220
LIGHTERMAN HOUSE 26-36 WHARF DALE HOUSE, LONDON UNITED KINGDOM N1 9RY

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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 line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) NICHOLAS GRONO CEO	40.00			X			279,555.	0.	47,294.	
(2) AMY RAHE MANAGING DIRECTOR OF NORTH AMERICA	40.00				X		194,972.	0.	27,417.	
(3) DAN VEXLER MANAGING DIRECTOR OF PROGRAMS	40.00					X	131,989.	0.	13,053.	
(4) ZOE MARSHALL DIR. OF FINANCE/ SECRETARY	40.00			X			121,238.	0.	12,124.	
(5) ERIN PHELPS SENIOR ADVISER TO THE CEO	40.00					X	109,440.	0.	20,973.	
(6) HAVOVI WADIA DIRECTOR OF PROGRAMS	40.00					X	100,273.	0.	10,016.	
(7) YUKI LO HEAD OF RESEARCH AND EVALUATION	40.00					X	100,225.	0.	9,524.	
(8) ALAN MCCORMICK CHAIR	1.00	X		X			0.	0.	0.	
(9) FELICITY GOODING TREASURER	0.50	X		X			0.	0.	0.	
(10) NATASHA DOLBY TRUSTEE	0.50	X					0.	0.	0.	
(11) MOLLY GOCHMAN TRUSTEE	0.50	X					0.	0.	0.	
(12) GRACE FORREST TRUSTEE	0.50	X					0.	0.	0.	
(13) PHILIPPE SION TRUSTEE	0.50	X					0.	0.	0.	
(14) MAHENDRA PANDEY TRUSTEE	0.50	X					0.	0.	0.	
(15) ANDRE DOUST (FROM MAY 2022) TRUSTEE	0.50	X					0.	0.	0.	

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	5,051,385.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	8,321,009.				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f		13,372,394.				
Program Service Revenue	2 a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		99,895.			99,895.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss)						
	8 a 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							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a 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							
Miscellaneous Revenue	11 a _____	Business Code					
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			13,472,289.	0.	0.	99,895.	

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	2,391,077.	2,391,077.		
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	5,276,817.	5,276,817.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	682,600.	191,560.	149,835.	341,205.
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	3,057,163.	1,551,527.	785,021.	720,615.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	267,686.	120,701.	87,495.	59,490.
9 Other employee benefits	139,397.	95,666.	3,812.	39,919.
10 Payroll taxes	399,139.	171,158.	115,207.	112,774.
11 Fees for services (nonemployees):				
a Management	4,337,876.	4,237,500.	59,293.	41,083.
b Legal	32,195.	2,808.	29,387.	
c Accounting	38,881.	15,071.	23,810.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	283,568.	65,748.	217,820.	
12 Advertising and promotion	150,023.	8,040.		141,983.
13 Office expenses	150,127.	32,954.	83,424.	33,749.
14 Information technology	179,340.	25,925.	78,714.	74,701.
15 Royalties				
16 Occupancy	268,684.	7,965.	260,719.	
17 Travel	628,949.	400,519.	46,344.	182,086.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	250,471.	89,555.	17,609.	143,307.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	60,831.		60,831.	
23 Insurance	66,848.	19,515.	47,261.	72.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a MEMBERSHIPS	32,141.	411.	11,065.	20,665.
b _____				
c _____				
d _____				
e All other expenses _____	889,589.	240,237.	649,352.	
25 Total functional expenses. Add lines 1 through 24e	19,583,402.	14,944,754.	2,726,999.	1,911,649.
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 <input type="checkbox"/> 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 X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	27,802,559.	1	22,888,979.
	2 Savings and temporary cash investments	20,719,379.	2	20,844,775.
	3 Pledges and grants receivable, net	2,997,520.	3	1,318,846.
	4 Accounts receivable, net	0.	4	66,723.
	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	127,836.	9	72,980.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 127,618.		
	b Less: accumulated depreciation	10b 79,379.	10c	48,239.
	11 Investments - publicly traded securities		11	
	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	24,565.	15	655,072.
16 Total assets. Add lines 1 through 15 (must equal line 33)	51,719,352.	16	45,895,614.	
Liabilities	17 Accounts payable and accrued expenses	814,609.	17	1,075,979.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	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	112,924.	25	220,919.
	26 Total liabilities. Add lines 17 through 25	927,533.	26	1,296,898.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	46,159,341.	27	40,867,627.
	28 Net assets with donor restrictions	4,632,478.	28	3,731,089.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> 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	50,791,819.	32	44,598,716.
33 Total liabilities and net assets/fund balances	51,719,352.	33	45,895,614.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	13,472,289.
2	Total expenses (must equal Part IX, column (A), line 25)	2	19,583,402.
3	Revenue less expenses. Subtract line 2 from line 1	3	-6,111,113.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	50,791,819.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-81,990.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	44,598,716.

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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
b Were the organization's financial statements audited by an independent accountant?	X	
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:		
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> 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?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on 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?	X	
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 on Schedule O and describe any steps taken to undergo such audits	X	

Form 990 (2022)

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

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

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 grants.")	13722548.	16372920.	18659507.	51194884.	13372394.	113322253
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	13722548.	16372920.	18659507.	51194884.	13372394.	113322253
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)						12408501.
6 Public support. Subtract line 5 from line 4.						100913752

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	13722548.	16372920.	18659507.	51194884.	13372394.	113322253
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	27,102.	25,504.	26,041.	6,275.	99,895.	184,817.
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.)						
11 Total support. Add lines 7 through 10						113507070
12 Gross receipts from related activities, etc. (see instructions)					12	
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	88.91 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	89.24 %
16a 33 1/3% support test - 2022. 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		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2021. 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		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2022. 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		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2021. 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		<input type="checkbox"/>
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		<input type="checkbox"/>

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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2022. 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 - 2021. 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, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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):		
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 (<i>explain in detail in Part VI</i>):		
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 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> 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 - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). 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 (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2022 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-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule A (Form 990) 2022

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.)

Horizontal lines for supplemental information input.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

THE FREEDOM FUND

Employer identification number

30-0805768

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (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 property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

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

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

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

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

Name of organization THE FREEDOM FUND	Employer identification number 30-0805768
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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
<u>1</u>	 <hr/> <hr/> <hr/>	\$ <u>2,501,517.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	 <hr/> <hr/> <hr/>	\$ <u>1,052,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	 <hr/> <hr/> <hr/>	\$ <u>1,480,711.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	 <hr/> <hr/> <hr/>	\$ <u>697,239.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	 <hr/> <hr/> <hr/>	\$ <u>300,027.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>	 <hr/> <hr/> <hr/>	\$ <u>1,710,938.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE FREEDOM FUND	Employer identification number 30-0805768
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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
7	<hr/> <hr/> <hr/>	\$ <u>1,500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ <u>471,008.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ <u>1,224,387.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	<hr/> <hr/> <hr/>	\$ <u>500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	<hr/> <hr/> <hr/>	\$ <u>550,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE FREEDOM FUND	Employer identification number 30-0805768
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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
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization THE FREEDOM FUND	Employer identification number 30-0805768
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from 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	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

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 THE FREEDOM FUND Employer identification number 30-0805768

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, lines 2a-2d for total number, acreage, and structure counts, and questions about monitoring, expenses, and reporting.

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures and amounts for revenue and assets.

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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 make 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 program
 - 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 on 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 line 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				
d Equipment		127,618.	79,379.	48,239.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				48,239.

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. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) OPERATING LEASE LIABILITY	220,919.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

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

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.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include descriptions, sub-row labels (2a-2d, 4a-4b), and a final column for totals (1, 2e, 3, 4c, 5).

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.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include descriptions, sub-row labels (2a-2d, 4a-4b), and a final column for totals (1, 2e, 3, 4c, 5).

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.

Multiple horizontal lines provided for entering supplemental information.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization THE FREEDOM FUND	Employer identification number 30-0805768
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Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES,	0	3	GRANTS TO RECIPIENTS LOCATED IN REGION		564,355.
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	1	5	GRANTS TO RECIPIENTS LOCATED IN REGION		186,000.
EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	0	5	GRANTS TO RECIPIENTS LOCATED IN REGION		2,562,626.
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	1	2	GRANTS TO RECIPIENTS LOCATED IN REGION		947,097.
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	1	0	GRANTS TO RECIPIENTS LOCATED IN REGION		50,000.
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	0	3	GRANTS TO RECIPIENTS LOCATED IN REGION		921,330.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		45,409.
3 a Subtotal	3	18			5,276,817.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	3	18			5,276,817.

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Schedule F (Form 990) 2022

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	58,232.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	47,105.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	5,208.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	77,127.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	22,109.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	11,344.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	135,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	10,990.	WIRE TRANSFER	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **113**

3 Enter total number of other organizations or entities **0**

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	140,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	75,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	50,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	155,150.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	347,480.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	26,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	270,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	125,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	165,000.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	56,230.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	45,168.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	49,362.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	55,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	34,535.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	5,678.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	41,218.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	19,187.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	66,723.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	57,717.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	50,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	70,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	134,728.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	100,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	36,500.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	61,850.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	9,226.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	40,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	25,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	75,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	33,760.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	21,860.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	150,406.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	10,600.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	29,143.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	60,000.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	14,390.	WIRE TRANSFER	0.		
		NORTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	17,500.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	60,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	45,409.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	50,000.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	33,374.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	34,933.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	25,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	15,105.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	42,508.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	50,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	22,772.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	144,609.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	42,402.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	43,838.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	84,789.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	8,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	40,000.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	25,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	25,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	20,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	297,409.	WIRE TRANSFER	0.		
		SOUTH ASIA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	38,353.	WIRE TRANSFER	0.		
		SOUTH ASIA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	36,142.	WIRE TRANSFER	0.		
		SOUTH ASIA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	10,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	32,138.	WIRE TRANSFER	0.		
		SOUTH ASIA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	94,198.	WIRE TRANSFER	0.		
		SOUTH ASIA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	35,952.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	14,550.	WIRE TRANSFER	0.		
		SOUTH ASIA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	26,872.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	10,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	21,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	10,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	10,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	10,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	15,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	15,000.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	15,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	15,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	15,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	15,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	10,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	DIRECT FUNDING OF COMMUNITY BASED ANTI SLAVERY INTEVENTIONS	25,000.	WIRE TRANSFER	0.		

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

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

PART I, LINE 2:

GRANTEES ARE REQUIRED TO SIGN GRANT AGREEMENTS AND SOME SUBMIT FINANCIAL REPORTS TO MEASURE COSTS AGAINST QUARTERLY AND ANNUAL BUDGETS. THE ITEMS ARE THEN REVIEWED TO MONITOR HOW GRANTS ARE EXPENSED. SOME GRANTEES ARE PAID ON DELIVERABLE-BASED CONTRACTS.

PART I, LINE 3:

THE ORGANIZATION USES THE ACCRUAL METHOD OF ACCOUNTING TO ACCOUNT FOR EXPENDITURES IN THE LISTED REGIONS.

**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

2022

**Open to Public
Inspection**

Name of the organization **THE FREEDOM FUND** Employer identification number **30-0805768**

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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CORPORATE ACCOUNTABILITY LAB 6214 N GLENWOOD AV CHICAGO, IL 60660	81-5123686	501(C)(3)	149,845.	0.			END MODERN SLAVERY
FREE THE SLAVES 1320 19TH ST NW, STE 600 WASHINGTON, DC 20036	56-2189635	501(C)(3)	115,000.	0.			END MODERN SLAVERY
HUMAN TRAFFICKING LEGAL CENTER 1030 15TH STREET, NW 10413 WASHINGTON, DC 20005	46-1349584	501(C)(3)	220,000.	0.			END MODERN SLAVERY
POLARIS PROJECT PO BOX 65323 WASHINGTON, DC 20035	03-0391561	501(C)(3)	225,000.	0.			END MODERN SLAVERY
POPULATION COUNCIL INC 1 DAG HAMMARSKJOLD PLAZA NEW YORK, NY 10017	13-1687001	501(C)(3)	337,555.	0.			END MODERN SLAVERY
SURVIVOR ALLIANCE 1173 SUTTER ST BERKELEY, CA 94707	82-4425458	501(C)(3)	87,500.	0.			END MODERN SLAVERY

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **13.**

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

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

Schedule I (Form 990) 2022

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRANSPARENTTEM 310 ATLANTIC AVE THIRD FL BROOKLYN, NY 11201	47-5175472	501(C)(3)	600,000.	0.			GENERAL SUPPORT
A BREEZE OF HOPE FOUNDATION P.O. BOX 148 ESSINGTON, PA 19029	27-1734337	501(C)(3)	20,000.	0.			GENERAL SUPPORT
CHINA LABOR WATCH 127 WEST 30TH STREET, 9TH FLOOR #96 NEW YORK, NY 10001	11-3596560	501(C)(3)	75,000.	0.			GENERAL SUPPORT
DARK BALI PO BOX 340835 TAMPA, FL 33694	82-5414542	501(C)(3)	20,000.	0.			GENERAL SUPPORT
GREENPEACE FUND 1300 EYE STREET, NW SUITE 1100E WASHINGTON, DC 20005	95-3313195	501(C)(3)	200,000.	0.			GENERAL SUPPORT
INTERNATIONAL LABOR RIGHTS FORUM 1634 I STREET NW, SUITE 1000 WASHINGTON, DC 20006	46-1349584	501(C)(3)	140,000.	0.			GENERAL SUPPORT
NORC 4350 EAST-WEST HIGHWAY, 8TH FLOOR BETHESDA, MD 20814	46-1349584	501(C)(3)	196,177.	0.			GENERAL SUPPORT

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 non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

PART I, LINE 2:

ALL GRANTS ARE AWARDED ON THE BASIS ON A SIGNED GRANT AGREEMENT IN WHICH DELIVERABLES HAVE BEEN CLEARLY IDENTIFIED. DELIVERABLES ARE THEN CLOSELY MONITORED TO ENSURE TIMELY DELIVERY, AND WHERE APPLICABLE, SUBSEQUENT INSTALLMENTS ARE DELAYED UNTIL THESE ARE MET.

**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

2022

Open to Public
Inspection

Name of the organization

THE FREEDOM FUND

Employer identification number

30-0805768

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- 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.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued 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

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2022

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(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) NICHOLAS GRONO CEO	(i)	233,329.	46,226.	0.	41,446.	5,848.	326,849.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) AMY RAHE MANAGING DIRECTOR OF NORTH AMERICA	(i)	194,972.	0.	0.	9,993.	17,424.	222,389.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 7:

NICK GRONO RECEIVED BONUS COMPENSATION OF \$46,226 DURING THE YEAR.

**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 Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

THE FREEDOM FUND

Employer identification number

30-0805768

FORM 990, PART I, LINE 1:

DEMONSTRATING HOW EFFECTIVE INTERVENTIONS CAN PROTECT THOSE AT RISK OF
MODERN SLAVERY AND TO SUPPORT THOSE EXPERIENCING MODERN SLAVERY TO
LEAVE THE SITUATION. WE INVEST IN COUNTRIES AND SECTORS WITH THE
GREATEST INCIDENCE OF MODERN SLAVERY. WE MEASURE THE EFFECTIVENESS OF
INTERVENTIONS WITH THE AIM OF DELIVERING SCALABLE PROGRAMS AND
SUSTAINABLE PROGRESS. WE CONVENE RESEARCHERS, PRACTITIONERS AND DONORS
TO SHARE LESSONS AND BEST PRACTICES, ENSURING THAT OUR PARTNERS' VOICES
ARE REPRESENTED. IN THIS WAY, WE CAN MAKE THE CASE FOR SYSTEMS CHANGE
AND FOR THE INVESTMENT NEEDED TO SUPPORT MORE FRONTLINE PARTNERS,
DRIVING THE PROGRAMMATIC WORK, AND SHIFTS IN POWER, THAT WILL BRING
MODERN SLAVERY TO AN END.

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

PROSECUTE THOSE RESPONSIBLE.

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

QUALITY AND LEARNING

EXPENSES \$ 743,308. INCLUDING GRANTS OF \$ 100,000. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION HAS FOUNDING MEMBERS.

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

EACH FOUNDING MEMBER RESERVES THE RIGHT TO APPOINT TWO MEMBERS OF THE

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

Schedule O (Form 990) 2022

Name of the organization THE FREEDOM FUND	Employer identification number 30-0805768
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GOVERNING BODY.

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

THE FOLLOWING TRANSACTIONS REQUIRE THE APPROVAL OF 2/3 OF THE FOUNDING MEMBERS: ANY AMENDMENTS TO, OR THE REPEAL OF, ANY PROVISION OF THE ARTICLES OR BYLAWS OR THE ARTICLES OF INCORPORATION OR BYLAWS OF ANY SUBSIDIARY OF THE CORPORATION; THE INCREASE OR DECREASE IN THE AUTHORIZED NUMBER OF MEMBERS OF THE BOARD OF DIRECTORS OR THE BOARD OF DIRECTORS OF A SUBSIDIARY; THE ADOPTION OF ANY PLAN FOR THE MERGER, CONSOLIDATION OR REORGANIZATION OF THE CORPORATION OR A SUBSIDIARY; THE ADOPTION OF ANY PLAN FOR THE DIVISION OR CONVERSION OF THE CORPORATION OR A SUBSIDIARY; THE SALE OF ALL OR SUBSTANTIALLY ALL OF THE ASSETS OF THE CORPORATION OR A SUBSIDIARY; THE FORMATION OF A SUBSIDIARY OF THE CORPORATION OR A SUBSIDIARY OF A SUBSIDIARY OTHER THAN A UNITED KINGDOM CHARITY FORMED AS A SUBSIDIARY OF THE CORPORATION WITHIN SIX (6) MONTHS FROM THE DATE OF THE FIRST MEETING OF THE BOARD OF DIRECTORS; THE ADOPTION OF ANY PLAN FOR THE DISSOLUTION OR LIQUIDATION OF THE CORPORATION OR A SUBSIDIARY; THE CREATION OF AN ADDITIONAL MEMBERSHIP CLASS OF THE CORPORATION OR A SUBSIDIARY; THE APPOINTMENT OF ANY ADDITIONAL MEMBERS OF THE CORPORATION OR A SUBSIDIARY; AND THE APPROVAL, MODIFICATION OR TERMINATION OF THE SIGNATORY AND DISBURSEMENT POLICY OF THE CORPORATION.

FORM 990, PART VI, SECTION A, LINE 8B:

THE FREEDOM FUND DOES NOT HAVE ANY COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

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

THE PREPARED FORM 990 WAS REVIEWED BY THE MANAGING DIRECTOR/ FINANCE AND

Name of the organization THE FREEDOM FUND	Employer identification number 30-0805768
--	--

ADMINISTRATION AND BY THE MEMBERS OF THE GOVERNING BODY BEFORE THE RETURN WAS FILED WITH THE IRS.

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

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST AN INTERESTED PERSON DISCLOSES THE EXISTENCE OF THE FINANCIAL INTEREST AND IS GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH GOVERNING BODY DELEGATED POWERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON HE/SHE IS RECUSED FROM THE GOVERNING BODY OR COMMITTEE WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING MEMBERS DECIDE IF A CONFLICT OF INTEREST EXISTS. IF THE GOVERNING BODY OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A MEMBER HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST IT INFORMS THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORDS THE MEMBER AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF, AFTER HEARING THE MEMBER'S RESPONSE AND AFTER MAKING FURTHER INVESTIGATION AS WARRANTED BY THE CIRCUMSTANCES, THE GOVERNING BODY OR COMMITTEE DETERMINES THE MEMBER HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST IT TAKES APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

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

THE PROCESS FOR DETERMINING THE CEO AND DIRECTOR OF FINANCE AND ADMINISTRATION'S COMPENSATION INCLUDES THE REVIEW AND APPROVAL BY INDEPENDENT PERSONS AND THE USE OF COMPARABLE DATA.

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

Name of the organization THE FREEDOM FUND	Employer identification number 30-0805768
---	---

AL, AK, AR, CA, CT, FL, IL, KY, MD, MA, MI, MN, NH, NY, OR, RI, SC, UT, VA, WV, WI

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

FOREIGN EXCHANGE RATE LOSS -81,990.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization **THE FREEDOM FUND** Employer identification number **30-0805768**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
THE FREEDOM FUND UK LIGHTERMAN HOUSE 26-36 WHARF DALE ROAD LONDON, UNITED KINGDOM N1 9RY	ANTI-SLAVERY SERVICES	UNITED KINGDOM	501(C)(3)		THE FREEDOM FUND	X	
THE FREEDOM FUND ETHIOPIA ETHIO CHAINA AVENUE, AROUND WOLO SEFER, HMM B KIRKOS SUB CITY, WOREDA, ETHIOPIA 02	ANTI-SLAVERY SERVICES	UNITED KINGDOM	501(C)(3)		THE FREEDOM FUND	X	

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

Schedule R (Form 990) 2022

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses	X	
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) THE FREEDOM FUND UK	O	3,288,539.	ACTUAL COST
(2) THE FREEDOM FUND UK	N	629,191.	ACTUAL COST
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information

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

Lined area for supplemental information.