PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. 00-56-43

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

OMB No. 1545-0047

A I	For the	lpha 2021 calendar year, or tax year beginning $lpha$ PR $1,2021$ and endir	ng MA	AR 31,	2022	
В	Check if applicabl	C Name of organization AMERICAN CIVIL LIBERTIES UNION		D Employ	er identific	cation number
	Addre chang	FOUNDATION, INC.				
	Name chang			13-	62135	16
	∏lnitial ∏return ∏Final	125 BBOAD CUBERT 18TH FLOOR	m/suite	E Telepho	ne number – 5 4 9 – 2	
	⊥return. termir			G Gross rece		511,487,836.
	ated Amen- return			H(a) Is this		
	Applic tion				oordinates	
	pendi					cluded? Yes No
<u> </u>	Tax-ex	empt status: X 501(c)(3) 501(c) ()	527			list. See instructions
		e: ► WWW.ACLUFOUNDATION.ORG				n number 🕨
K	orm of	organization: X Corporation Trust Association Other L				1 State of legal domicile: NY
Pa	art I	Summary				
a)	1	Briefly describe the organization's mission or most significant activities: PRESERV				OTION OF
Activities & Governance		CIVIL RIGHTS AND CIVIL LIBERTIES (CONTINUED			-	
rns	2	Check this box 🕨 🔛 if the organization discontinued its operations or disposed of	f more tl	nan 25% of	its net ass	
8	3	Number of voting members of the governing body (Part VI, line 1a)				15
જ	4	Number of independent voting members of the governing body (Part VI, line 1b)				15
es	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)				474
Ϊ	6	Total number of volunteers (estimate if necessary)				16
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12				332,236. 58,900.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	·····		I	
		Contributions and grants (Part \/III line 1h)	2.2	Prior Ye 27,368		Current Year 213,682,199.
e	8	Contributions and grants (Part VIII, line 1h)		3,069		2,459,308.
Revenue	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		9,137		22,500,473.
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,264		3,306,504.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		11,839		241,948,484.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		4,973		19,483,882.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		,	0.	0.
"	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		52,624		65,535,213.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			,210.	411,851.
per	. ь	Total fundraising expenses (Part IX, column (D), line 25) \(\bigcup \)			-	
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,120	,173.	87,234,168.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	. 17	73,082		172,665,114.
	19	Revenue less expenses. Subtract line 18 from line 12	6	8,757	,285.	69,283,370.
Net Assets or	G G			nning of Cur		End of Year
sets	20	Total assets (Part X, line 16)		35,145		824,812,518.
A	21	Total liabilities (Part X, line 26)		18,331		166,048,482.
<u>Z</u>	22	Net assets or fund balances. Subtract line 21 from line 20	58	86,814	,101.	658,764,036.
	art II	Signature Block				
		Ities of perjury, I declare that I have examined this return, including accompanying schedules an				knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which pr	reparer n		leage. リノン 人	
e:~	_	Signature of officer		Dat		<u> </u>
Sig Her		CHARIZMA WILLIAMS, COO/INTERIM CFO				
пе	E	Type or print name and title				
		Print/Type preparer's name Preparer's signature	Da	ite	Check	PTIN
Paid	d	LYNNE JOHNSON	_		if self-employ	P00757336
	parer	Firm's name ► RSM US LLP		Firr		42-0714325
	Only	Firm's address 4 TIMES SQUARE		1		<u> </u>
	•	NEW YORK, NY 10036		Pho	one no. 21	2-372-1000
Ma	y the I f	RS discuss this return with the preparer shown above? See instructions				X Yes No

FOIII	13 0213310 Page	<u>e ~</u>
Ра	rt III Statement of Program Service Accomplishments	
		X
1	Briefly describe the organization's mission:	
	AS NOTED IN ITS ARTICLES OF INCORPORATION, THE MISSION OF THE ACLU	
	FOUNDATION IS "TO ENCOURAGE, SPONSOR, AND FACILITATE THE CULTIVATION	
	AND DIFFUSION OF KNOWLEDGE AND UNDERSTANDING OF THE VARIOUS CIVIL	
	LIBERTIES AND CIVIL RIGHTS WHICH ARE PROTECTED BY THE CONSTITUTION AND	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported. (Code:) (Expenses \$ 63,420,763. including grants of \$ 9,594,558.) (Revenue \$ 2,459,308.)	
4a	(Code:) (Expenses \$ 63,420,763. including grants of \$ 9,594,558.) (Revenue \$ 2,459,308.) LEGAL - THE ACLU FOUNDATION'S LITIGATION PROGRAM IS THE CORNERSTONE OF	<u>•</u>)
	ITS CIVIL LIBERTIES PROGRAM. THE ACLU TODAY IS THE NATION'S PREEMINENT	
	CIVIL LIBERTIES ORGANIZATION, WITH A STAFF OF ATTORNEYS IN THE NATIONAL	
	OFFICE WORKING IN COLLABORATION WITH ATTORNEYS AT AFFILIATE OFFICES	
	NATIONWIDE TO ADDRESS CASES INVOLVING A WIDE RANGE OF CIVIL LIBERTIES	
	ISSUES. THE ACLU APPEARS BEFORE THE U.S. SUPREME COURT MORE THAN ANY	
	OTHER LEGAL SERVICES ORGANIZATION OR GOVERNMENTAL AGENCY EXCEPT THE	
	U.S. DEPARTMENT OF JUSTICE.	
4b	(Code:) (Expenses \$ 62,424,292. including grants of \$ 9,774,516.) (Revenue \$	
40	(Code:) (Expenses \$62,424,292. including grants of \$9,774,516.) (Revenue \$ AFFILIATE SUPPORT - THE ACLU HAS AN AFFILIATE OR CHAPTER IN EVERY	/
	STATE, THE DISTRICT OF COLUMBIA, AND IN PUERTO RICO. AFFILIATES HANDLE	
	REQUESTS FOR LEGAL ASSISTANCE, LOBBY STATE LEGISLATURES AND HOST	
	EDUCATIONAL FORUMS THROUGHOUT THE YEAR. THE NATIONAL ACLU COORDINATES	
	FUNDRAISING EFFORTS WITH ITS AFFILIATES AND SHARES THE PROCEEDS OF	
	FUNDRAISING EFFORTS WITH AFFILIATES IN ACCORDANCE WITH A DETAILED	
	POLICY. THROUGH ITS AFFILIATE SUPPORT AND NATIONWIDE INITIATIVES	
	DEPARTMENT (ASNI), THE NATIONAL ACLU ALSO PROVIDES GRANTS AND SUPPORT	
	TO AFFILIATES ON SPECIFIC INITIATIVES AND PROJECTS THAT HAVE BEEN	
	IDENTIFIED AS INVOLVING MATTERS OF BOTH LOCAL/REGIONAL AND NATIONAL	
	SIGNIFICANCE. ASNI OFFERS TRAINING AND TECHNICAL ASSISTANCE TO	
	AFFILIATES ACROSS THE COUNTRY ON A VARIETY OF TOPICS OF RELEVANCE.	
4c	(Code:) (Expenses.\$ 14,157,968 including grapts of \$ 4,833 i.) (Revenue \$ 827,203 i.)	•)
	EDUCATION - THROUGH NEWSLETTERS, ITS WEBSITE, ADVERTISEMENTS, OP-ED	— ′
	ARTICLES, MEDIA INTERVIEWS, PUBLICATIONS, SOCIAL MEDIA, AND NUMEROUS	
	MEETINGS AND WORKSHOPS CONDUCTED IN COLLABORATION WITH ITS AFFILIATES	
	THROUGHOUT THE US, THE ACLU FOUNDATION PROVIDES ONGOING EDUCATION TO	
	THE ACLU'S 1.5 MILLION MEMBERS NATIONWIDE AND TO THE PUBLIC AT LARGE	
	WITH RESPECT TO A WIDE RANGE OF CIVIL LIBERTIES ISSUES AND CONCERNS. A	
	CORE COMPONENT OF THE ORGANIZATION'S EDUCATIONAL CAMPAIGNS IS THE	
	EMPHASIS ON KEY RIGHTS, INCLUDING FIRST AMENDMENT RIGHTS TO FREE	
	SPEECH, ASSOCIATION AND ASSEMBLY; THE RIGHT TO EQUAL PROTECTION UNDER	
	THE LAW; THE RIGHT TO DUE PROCESS AND TO FAIR TREATMENT WHEN THE LOSS	
	OF LIBERTY OR PROPERTY IS AT STAKE; AND THE RIGHT TO PRIVACY AND	
	FREEDOM FROM UNWARRANTED GOVERNMENT INTRUSION INTO PERSONAL AND PRIVATE	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ 4,036,956. including grants of \$ 109,975.) (Revenue \$)	
40	Total program service expenses 144,039,979.	

AMERICAN CIVIL LIBERTIES UNION

FOUNDATION, INC.

Form 990 (2021) FOUNDATION,
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	Х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?			
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	x	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			_ <u></u>
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	x	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	5		
	,	19		х
20a	complete Schedule G, Part III	20a		X
		20b		
21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	_00		
-'	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
	Gordon Gordon Corractor, Gordon (79), mortin 165. Complete Gorleculle I, Falts I aliu II			Ц

AMERICAN CIVIL LIBERTIES UNION

Form 990 (2021)

FOUNDATION. INC.

Page 4 Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Х 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete Х 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х Schedule K. If "No," go to line 25a 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Х 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% Х 26 controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III Х 27 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If Х "Yes." complete Schedule L, Part IV 28a Х **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If Х 28c "Yes," complete Schedule L, Part IV Х 29 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete Х 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х 34 Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х 36 If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI X 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O 38 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

	officer if deficidate of contains a response of flote to any life in this rare v					
					Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	165			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	le gaming			
	(gambling) winnings to prize winners?			1c	Х	

Page 5

Part V

AMERICAN CIVIL LIBERTIES UNION FOUNDATION INC. Statements Regarding Other IRS Filings and Tax Compliance (continued)

Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 474 filed for the calendar year ending with or within the year covered by this return 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Х Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions. Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За Х b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Х 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Х 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Х Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year 7d Х Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е Х Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b Enter the amount of reserves on hand Х Did the organization receive any payments for indoor tanning services during the tax year? 14a **b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or Х excess parachute payment(s) during the year? 15 If "Yes," see the instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17 If "Yes," complete Form 6069

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year1a15			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b				
	persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
_	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(This occition b requests information about policies not required by the internal nevenue code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
C				
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	X	
_	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
~	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed ▶AK , AR , CA , CO , CT , FL , GA , HI , IL	. KS	. KY	LА
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			
.5	for public inspection. Indicate how you made these available. Check all that apply.	Oilly)	avanai	010
	X Own website X 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	l finan	cial	
.5	statements available to the public during the tax year.	miail	-iui	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
20	TERENCE DOUGHERTY - 212-549-2500			
	125 BROAD STREET, 18TH FLOOR, NEW YORK, NY 10004			

Page 7

Form 990 (2021) 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, 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.

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

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

(A)	(B)				C)			ted any current officer, director, or trustee. (D) (E) (F)					
Name and title	Average	(d-		Posi	ition	l than c		Reportable	Reportable	Estimated			
	hours per	box	, unle	ss per	son is	s both	an	compensation	compensation	amount of			
	week		cer an	nd a di	recto	r/trust	tee)	from	from related	other			
	(list any	Individual trustee or director						the	organizations	compensation			
	hours for related	or di	99			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/	from the			
	organizations	rustee	l trus		ee ee	ubeu		1099-NEC)	1099-NEC)	organization and related			
	below	dual t	Institutional trustee		Key employee	st cor	<u></u>	1000 1420)		organizations			
	line)	Indivi	Institu	Officer	Key er	Highest compensated employee	Former			g			
(1) ANTHONY D. ROMERO	14.00												
EXECUTIVE DIRECTOR/CEO	26.00			X				0.	646,153.	238,735.			
(2) DOROTHY M. EHRLICH	14.00												
DEPUTY EXECUTIVE DIRECTOR	26.00			X				0.	502,056.	267,337.			
(3) TERENCE R. DOUGHERTY	14.00												
COO/GENERAL COUNSEL	26.00			X				0.	472,282.	80,494.			
(4) MARK V. WIER	34.00												
CHIEF DEVELOPMENT OFFICER	6.00				Х			459,460.	0.	23,922.			
(5) KIMBERLY P. TRUEBLOOD	14.00												
CHIEF OF STAFF (THRU 1/3/22)	26.00				X			0.	421,781.	53,289.			
(6) DAVID D. COLE	34.00												
NATIONAL LEGAL DIRECTOR	6.00				X			449,936.	0.	24,855.			
(7) KARY L. MOSS	26.00							200 000	•	00 610			
DIR. AFFIL. SUPPORT & NATIONWIDE INI	14.00				Х			392,975.	0.	80,613.			
(8) RONALD NEWMAN	6.00								200 600	01 005			
NAT'L POLITICAL DIR. (THRU 3/15/22)	34.00				Х			0.	390,602.	81,885.			
(9) REBECCA LOWELL EDWARDS	26.00							202 550	•	04 000			
CHIEF COMMUNICATIONS OFFICER	14.00				X			383,578.	0.	21,338.			
(10) CHARIZMA T. WILLIAMS	14.00								256 221	26 520			
CHIEF FINANCIAL OFFICER	26.00			Х				0.	356,331.	36,530.			
(11) ELIZABETH FITZGERALD	40.00							206 001	0	04 541			
DIRECTOR OF DEVELOPMENT	0.00					X		306,891.	0.	94,541.			
(12) LOUISE MELLING	26.00 14.00					х		215 722	0.	72 070			
DEPUTY LEGAL DIRECTOR (13) SOPHIA K. GOLDMACHER	14.00					Λ		315,722.	0.	72,078.			
CHIEF PEOPLE OFFICER	26.00					Х		0.	308,478.	70 661			
(14) CECILLIA D. WANG	40.00					Λ		0.	300,4/0.	78,661.			
DEPUTY LEGAL DIRECTOR	0.00					х		315,930.	0.	49,527.			
(15) AMBER HIKES	14.00					Λ		313,930.	0.	43,341.			
CHIEF EQUITY & INCLUSION OFFICER	26.00					Х		0.	313,806.	31,097.			
(16) WILLIAM ACEVES	3.00					22		0.	313,000.	31,001.			
DIRECTOR	3.00	Х						0.	0.	0.			
(17) GRACE CHAN	3.50								J.				
	2.00	Х						0.	0.	0.			

13-6213516

	ATION, INC.								13-6213	<u>516</u>	Pa	age č
Part VII Section A. Officers, Directors	s, Trustees, Key Emp	oloy	ees,	and	Hiç	ghes	st C	ompensated Employee	s (continued)			
(A)	(B)			_ (C				(D)	(E)		(F)	
Name and title	Average	(do		Posi heck r			one	Reportable	Reportable	Es	timate	∍d
	hours per week	box	, unle	ss per id a di	son is	s both	n an	compensation from	compensation from related		ount other	
	(list any	ector						the	organizations		pensa	
	hours for related	or di	ee			ated		organization	(W-2/1099-MISC/		om th	
	organizations	rustee	l trust		ee	npens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		anizat d relat	
	below	Individual trustee or director	Institutional trustee	_	Key employee	st col	- E	1			ınizati	
	line)	Indivi	Instit	Officer	Key er	Highest compensated employee	Former					
(18) MICHELE GOODWIN	2.50											
DIRECTOR	2.50	X						0.	0.			0.
(19) GREG HASTY	2.50											
DIRECTOR (AS OF 5/15/21)	2.50	Х						0.	0.			0.
(20) MARY HERNANDEZ	3.50								_			
DIRECTOR (THRU 1/29/22)	2.50	X						0.	0.			0.
(21) JEFFREY HONG	3.00											_
DIRECTOR	3.00	Х						0.	0.			0.
(22) SHARON KYLE	2.50											^
DIRECTOR	2.50	Х						0.	0.			0.
(23) ANIL MUJUMDAR	2.50	7,							_			^
DIRECTOR	2.00 3.00	X						0.	0.			0.
(24) CHARU VERMA DIRECTOR	2.00	X						0.	0.			0.
(25) YOMI WRONG	2.50	^						0.	0.			<u> </u>
DIRECTOR (AS OF 1/29/22)	2.50	X						0.	0.			0.
(26) DEBORAH ARCHER	3.00	25						0.	0.			
DIRECTOR/PRESIDENT	3.00	x		x				0.	0.			0.
1b Subtotal	<u>'</u>							2,624,492.	3,411,489.	12:	349	
c Total from continuation sheets to l								0.	0.			0.
d Total (add lines 1b and 1c)							•		3,411,489.	12:	349	
2 Total number of individuals (including							o re					
compensation from the organization	~ .					,			•			166
· · · · · · · · · · · · · · · · · · ·											Yes	No
3 Did the organization list any former	officer, director, trust	ee, k	кеу е	emple	oye	e, or	hig	hest compensated emp	loyee on			
line 1a? If "Yes," complete Schedule	J for such individual									3		X
4 For any individual listed on line 1a, is												
and related organizations greater that	an \$150,000? <i>If</i> "Yes,	" co	mple	ete S	che	edule	J f	for such individual		4	Х	

rendered to the organization? If "Yes," complete Schedule J for such person **Section B. Independent Contractors**

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

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services

(A) Name and business address	(B) Description of services	(C) Compensation
NEW YORK INTERIOR CONCEPTS, INC., 315	PROPERTY RENOVATIONS	
MADISON AVENUE SUITE 209, NEW YORK, NY	AND REPAIRS	1,240,941.
REINKING ENTERPRISES, INC. DBA ADVANCED RES	PRINTING AND	
13175 GEORGE WEBER DRIVE, ROGERS, MN 55374	PUBLISHING	1,002,433.
MSP- COMMINUCATIONS, 220 S. 6TH STREET,		
SUITE 500, MINNEAPOLIS, DC 55402	COMMUNICATION	793,700.
BULLY PULPIT INTERACTIVE, 1445 NEW YORK	COMMUNICATIONS	
AVENUE NW 5TH FL, WASHINGTON, DC 20005	BRANDING	691,125.
TVP NYC, 875 AVENUE OF THE AMERICAS SUITE	DESIGN, PRODUCTION	
1700, NEW YORK , NY 10001	AND E-COMMERCE	601,065.
2 Total number of independent contractors (including but not limited to those listed \$100,000 of compensation from the organization ▶ 29	d above) who received more than	

Х

5

Form 990 FOUNDATIO									15-021	3310
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(cl	neck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week					ee/		the	organizations	compensation
	(list any	cto				oldu		organization	(W-2/1099-MISC)	from the
	hours for	dire				ed er		(W-2/1099-MISC)		organization
	related	tee o	ıstee			ensat				and related
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				organizations
	below	idua	tution	-e-	emp	esto	je j			
	line)	lnd je	Insti	Officer	Key	High	Former			
(27) RONALD CHEN	3.50									
DIRECTOR/GENERAL COUNSEL	3.00	Х		Х				0.	0.	0.
(28) TRACI GRIFFITH	2.50									
DIRECTOR/SECRETARY	2.50	Х		Х				0.	0.	0.
(29) ROBERT REMAR	5.00									
DIRECTOR/VICE PRESIDENT/TREASURER	4.50	Х		х				0.	0.	0.
(30) SHAAKIRRAH SANDERS	2.00									
DIR./GEN. COUNSEL (AS OF 5/15/21)	2.00	x		х				0.	0.	0.
(31) RONALD TYLER	3.00									
DIRECTOR/GENERAL COUNSEL	2.50	Х		Х				0.	0.	0.
_	I .		I	<u> </u>	ı	<u> </u>				
Total to Part VII, Section A, line 1c										

AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC.

Form 990 (2021)
Part VIII

VIII Statement of Revenue

		Check if Schedule O contain	is a response	or note to any line	e in this Part VIII			
					(A)	(B)	(C)	(D)
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
						Turiction revenue	business revenue	sections 512 - 514
တ္ တ	1 a	Federated campaigns	1a	4,043,700.				
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
င်္ပ ဥ		Fundraising events						
fts, r A		Related organizations						
<u>e</u>		Government grants (contribution						
Sin		All other contributions, gifts, grants,						
uti je	'	similar amounts not included above		209,638,499.				
흔	~	Noncash contributions included in lines 1a-		12,704,796.				
o d	•				213682199.			
OB	- "	Total. Add lines 1a-1f		Business Code	213002133.			
	•	IECNI EVD NWNDDED NEM		541100	2 450 309	2 450 308		
<u>i</u>	_			341100	2,459,308.	2,459,308.		
er v	b							
Program Service Revenue	С							
Jrar Se	d							
5 _	е							
- □		All other program service revenu			0 450 000			
-		Total. Add lines 2a-2f			2,459,308.			
	3	Investment income (including div	,	,				
		other similar amounts)		>	3,760,159.		332,236.	3427923.
	4	Income from investment of tax-e	xempt bond p	proceeds				
	5	Royalties						
			(i) Real	(ii) Personal				
	6 a	Gross rents 6a	1,239,486.					
	b	Less: rental expenses 6b	0.					
	С	Rental income or (loss) 6c	1,239,486.					
	d	Net rental income or (loss)			1,239,486.			1239486.
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory 7a 28	38,279,666.					
	b	Less: cost or other basis						
e		and sales expenses 7b 26	59,539,352.					
Revenue	С	Gain or (loss) 7c ¹	L8,740,314.					
Bè		Net gain or (loss)			18,740,314.			18740314.
ther		Gross income from fundraising even						
₹		including \$	of					
		contributions reported on line 10						
		Part IV, line 18	8a					
	b	Less: direct expenses						
		Net income or (loss) from fundra	· · · · · · · · · · · · · · · · · · ·					
		Gross income from gaming activ						
		Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gaming		•				
		Gross sales of inventory, less ret						
	10 u	and allowances		a				
	h	Less: cost of goods sold						
		Net income or (loss) from sales of		<u> </u>				
\rightarrow	U	Hot moone or hoss, nom sales t	, inventory .	Business Code				
sn	11 ^	MISCELLANEOUS INCOME		900099	1,239,815.	1,239,815.		
Miscellaneous Revenue	ıı d	MERCHANDISE AND BOOK SALI	ES	452000	827,203.	827,203.		
la Ven	b				027,203.	527,203.		
Sce	c C							
Ξ	a	All other revenue			2,067,018.			
		Total. Add lines 11a-11d Total revenue. See instructions		P	241948484.	4,526,326.	332,236.	23407723.
	1/	TOTAL LEVELUIR THE DEE HISHINGHOUS				1,040,040.	JJ4,4J0.	

Form 990 (2021) FOUNDATION, II Part IX Statement of Functional Expenses

Secti	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 respor								
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to domestic organizations								
	and domestic governments. See Part IV, line 21	19,483,882.	19,483,882.						
2	Grants and other assistance to domestic								
	individuals. See Part IV, line 22								
3	Grants and other assistance to foreign								
	organizations, foreign governments, and foreign								
	individuals. See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors,								
	trustees, and key employees	3,698,165.	2,105,640.	1,064,713.	527,812.				
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	43,202,500.	33,234,859.	5,549,107.	4,418,534.				
8	Pension plan accruals and contributions (include								
	section 401(k) and 403(b) employer contributions)	3,468,178.		294,319.	532,059.				
9	Other employee benefits	11,438,225.		970,680.	1,754,756.				
10	Payroll taxes	3,728,145.	2,796,109.	521,940.	410,096.				
11	Fees for services (nonemployees):								
а	Management								
b	Legal	2,029,299.	1,728,646.	141,997.	158,656.				
С	Accounting	255,191.		255,191.					
d	Lobbying	153,600.		153,600.					
е	Professional fundraising services. See Part IV, line 17	411,851.			411,851.				
f		2,240,777.		2,240,777.					
g	Other. (If line 11g amount exceeds 10% of line 25,	6 500 054	- 005 450	- 40 - 50 -	4 044 000				
	column (A), amount, list line 11g expenses on Sch 0.)	6,788,351.		540,595.	1,041,293.				
12	Advertising and promotion	5,708,760.		57,088.	2,112,241.				
13	Office expenses	3,850,253.		346,523.	539,035.				
14	Information technology	4,068,616.	2,766,659.	528,920.	773,037.				
15	Royalties	2 524 204	2 014 202	10 554	607 247				
16	Occupancy	3,534,284.	2,914,383.	12,554. 21,543.	607,347.				
17	Travel	502,815.	448,136.	21,343.	33,136.				
18	Payments of travel or entertainment expenses								
40	for any federal, state, or local public officials	379,344.	284,025.	19,759.	75,560.				
19	Conferences, conventions, and meetings	3/2,344•	204,023.	10,1000	73,300•				
20 21	Payments to affiliates								
22	Depreciation, depletion, and amortization	2,503,341.	1,681,577.		821,764.				
23	Insurance	574,503.	183,841.	57,450.	333,212.				
24	Other expenses, Itemize expenses not covered	3727000		0., 2000	333,222				
	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.)								
а	SHARED PORTION OF CONTR	41,579,522.	41,579,522.						
b	SPECIAL AFFILIATE SUBSI	6,793,000.	6,793,000.						
С	SHARED PORTION OF BEQUE	4,328,386.	4,328,386.						
d	POSTAGE	1,742,544.	509,060.	6,632.	1,226,852.				
е	All other expenses	201,582.		26,205.	38,301.				
25	Total functional expenses. Add lines 1 through 24e	172,665,114.	144,039,979.	12,809,593.	15,815,542.				
26	$\ensuremath{\mbox{\textbf{Joint costs}}}.$ Complete this line only if the organization								
	reported in column (B) joint costs from a combined								
	educational campaign and fundraising solicitation.								
	Check here if following SOP 98-2 (ASC 958-720)				5 QQQ (2024)				

Form 990 (2021)
Part X Balance Sheet

Par	rt 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
	1	Cash - non-interest-bearing	40,114,811.	1	51,071,028.
	2	Savings and temporary cash investments	98,335,819.	2	101,656,907
	3	Pledges and grants receivable, net	43,016,870.	3	61,254,434
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		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	
t2	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
ä	9	Prepaid expenses and deferred charges	313,517.	9	252,916
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 66,099,097.			
	b	Less: accumulated depreciation 10b 41,137,978.	23,868,460.		24,961,119
	11	Investments - publicly traded securities	223,692,329.	11	270,644,578
	12	Investments - other securities. See Part IV, line 11	301,452,615.	12	310,856,330
	13	Investments - program-related. See Part IV, line 11	E40 405	13	450 600
	14	Intangible assets	742,125.	14	450,622
	15	Other assets. See Part IV, line 11	3,608,602.	15	3,664,584
	16	Total assets. Add lines 1 through 15 (must equal line 33)	735,145,148.	16	824,812,518
	17	Accounts payable and accrued expenses	9,001,197.	17	6,441,165
	18	Grants payable		18	3,866,567
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21 22	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		and the Hard and the san families are and as a figure of the san are as		22	
Lia	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	139,329,850.	25	155,740,750
	26	Total liabilities. Add lines 17 through 25	148,331,047.		166,048,482
		Organizations that follow FASB ASC 958, check here X			
Ses		and complete lines 27, 28, 32, and 33.			
Net Assets or Fund Balances	27	Net assets without donor restrictions	379,903,228.	27	410,811,606
Bal	28	Net assets with donor restrictions	206,910,873.	28	247,952,430.
밀		Organizations that do not follow FASB ASC 958, check here			
린		and complete lines 29 through 33.			
S	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
t As	31	Retained earnings, endowment, accumulated income, or other funds		31	
§	32	Total net assets or fund balances	586,814,101.	32	658,764,036.
	33	Total liabilities and net assets/fund balances	735,145,148.	33	824,812,518

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	241,	,948	3,4	84.
2	Total expenses (must equal Part IX, column (A), line 25)	2	172,	, 66!	5,1	14.
3	Revenue less expenses. Subtract line 2 from line 1	3	69	, 283	3,3	70.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	586,	,814	4,1	01.
5	Net unrealized gains (losses) on investments	5	-	-602	2,5	64.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9	3	, 269	9,1	29.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	658	,764	4,0	36.
Pa	rt XII Financial Statements and Reporting	'				
	Check if Schedule O contains a response or note to any line in this Part XII					
	·				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate					
	consolidated basis, or both:	,				
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?	,		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin					
	Act and OMB Circular A-133?			За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit	t			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3h		

Form **990** (2021)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization AMERICAN CIVIL LIBERTIES UNION FOUNDATION 13-6213516 INC. Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

FOUNDATION, INC.

13-6213516 Page 2

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

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

Sec	tion A. Public Support						_
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and	, ,		, ,	, ,	, ,	,,
	membership fees received. (Do not						
	include any "unusual grants.")	134420043	156940567	176437112	227368352	213682199	908848273
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	134420043	156940567	176437112	227368352	213682199	908848273
	The portion of total contributions						
J	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)						18697080.
_	**						890151193
Sec	Public support. Subtract line 5 from line 4.						030131133
		(-) 0017	(h) 0010	/-\ 0010	(4) 0000	(-) 0001	(s) Tatal
	ndar year (or fiscal year beginning in)	(a) 2017 134420043	(b) 2018 1 5 6 9 4 0 5 6 7	(c) 2019 1 7 6 4 3 7 1 1 2	(d) 2020 2 2 7 3 6 8 3 5 2	(e) 2021 213682100	(f) Total
	Amounts from line 4	134420043	130340307	1/043/112	22/300332	213002199	900040273
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	8367496.	6288517.	6425662.	3995687.	1667100	29744771.
_	and income from similar sources	0307490.	0200317.	0423002.	3993007.	400/403.	Z3/44//1.
9	Net income from unrelated business						
	activities, whether or not the					222 226	222 226
	business is regularly carried on					334,436.	332,236.
10	Other income. Do not include gain						
	or loss from the sale of capital	710 726	000 007	740 161	1100001		2647725
	assets (Explain in Part VI.)	/19,/36.	999,027.	748,161.	1180801.		3647725.
	Total support. Add lines 7 through 10						942573005
	Gross receipts from related activities,	•	,				,371,083.
13	First 5 years. If the Form 990 is for the	•	st, second, third, f	fourth, or fifth tax y	ear as a section 5	01(c)(3)	
<u> </u>	organization, check this box and stop	here					>
	tion C. Computation of Publi						04 44
	Public support percentage for 2021 (I		•	***		14	94.44 %
	Public support percentage from 2020					15	94.07 %
16a	33 1/3% support test - 2021. If the	-			14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2020. If the				line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	- 2021. If the org	anization did not c	heck a box on line	: 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	re. Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances te	~	•				
b	10% -facts-and-circumstances test	- 2020. If the org	anization did not d	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	stances test, ched	ck this box and st	op here. Explain i	n Part VI how the	
	organization meets the facts-and-circle	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	zation	▶□
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	<u> </u>

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.)

Se	ction A. Public Support		•				
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support		Γ	I	1	T	
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
40	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	-					
80	check this box and stop hereetion C. Computation of Publi						P
	Public support percentage for 2021 (li			actions (f)		45	0/
	Public support percentage for 2021 (III Public support percentage from 2020)	, , , , , , , , , , , , , , , , , , , ,		(,,		15	<u>%</u>
	ction D. Computation of Inves				•••••	10	70
	Investment income percentage for 20			ne 13 column (f)		17	%
	Investment income percentage from 2					18	——————————————————————————————————————
	33 1/3% support tests - 2021. If the						
136	more than 33 1/3%, check this box ar						. —
ŀ	33 1/3% support tests - 2020. If the						
•	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization						

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
-		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
0-		
9c		
10a		
iva		
10b		
lule A (Forr	n 990)	2021

Pai	t IV Supporting Organizations (continued)			J
	1 2 2 1 1000000000000000000000000000000		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
-			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
-	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			<u> </u>
-			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	-		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			-110
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a	_		
_	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instance)	struction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b				
	of its supported organizations? If "Yes " describe in Part VI the role played by the organization in this regard	3b		

AMERICAN CIVIL LIBERTIES UNION

Schedule A (Form 990) 2021

FOUNDATION, INC.

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ying trust on N	lov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations may	ust complete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	nally integrated	d Type III supporting orga	nization (see

Schedule A (Form 990) 2021

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instructions).

Distributions to attentive supported organizations to which the organization is responsive

(provide details in Part VI). See instructions. Distributable amount for 2021 from Section C, line 6 8

9

FOUNDATION, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 1 Amounts paid to supported organizations to accomplish exempt purposes 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 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 6 Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 7

40	Line O and the first of the first of the control of			40	
10	Line 8 amount divided by line 9 amount			10	
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	ıs	(iii) Distributable Amount for 2021
1_	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2017				
b	Excess from 2018				
c	Excess from 2019				
d	Excess from 2020				
е	Excess from 2021				

Schedule A (Form 990) 2021

AMERICAN CIVIL LIBERTIES UNION

13-6213516 Page 8 FOUNDATION, INC. Schedule A (Form 990) 2021

Part VI	Supple	menta	l Inform	ation. Pr	ovide the	explanation	ns required	by Part II, line	10; Pa	art II, line 17a or	17b; Part III, I	ine 12;
	Part IV, S line 1; Pa	ection A rt IV, Sed	, lines 1, 2 ction D, lir	2, 3b, 3c, 4t nes 2 and 3;	o, 4c, 5a, ; Part IV,	6, 9a, 9b, 9 Section E, l	c, 11a, 11b, ines 1c, 2a,	, and 11c; Par 2b, 3a, and 3	rt IV, S b; Part	ection B, lines 1 t V, line 1; Part \	and 2; Part IV /, Section B, lir	', Section C, ne 1e; Part V,
	(See instr	uctions.)	, 6, and 8;	; and Part V	, Section	E, lines 2, 5	o, and 6. Als	o complete tr	nis pan	t for any additio	nai information	
SCHEDU	LE A,	PART	r II,	LINE	10, E	EXPLAN	ATION :	FOR OTH	ER	INCOME:		
MERCHA	NDISE	AND	воок	SALES	AND	OTHER	MISCE	LLANEOU	s I	NCOME		

132028 01-04-22 Schedule A (Form 990) 2021

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Organization type (check one):

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

2021

Name of the organization

AMERICAN CIVIL LIBERTIES UNION

FOUNDATION, INC.

Employer identification number

13-6213516

Filers of		Section:						
Form 990	or 990-EZ	X 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						
		covered by the General Rule or a Special Rule. '), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.						
General	Rule							
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special l	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.							
	year, contributions of is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., plete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year						
answer "	No" on Part IV, line 2	It isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 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 requirements of Schedule B (Form 990).						

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990) (2021)

Name of organization
AMERICAN CIVIL LIBERTIES UNION
FOUNDATION, INC.

Employer identification number

13-6213516

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		\$_13,000,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$9,600,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$6,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4		\$4,750,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.

Name of organization

AMERICAN CIVIL LIBERTIES UNION

FOUNDATION, INC.

Employer identification number

13-6213516

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

Page 4 Schedule B (Form 990) (2021) Name of organization **Employer identification number** AMERICAN CIVIL LIBERTIES UNION 13-6213516 FOUNDATION, INC. 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 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I

Relationship of transferor to transferee

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

SCHEDULE C

(Form 990)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

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

 Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization **Employer identification number** AMERICAN CIVIL LIBERTIES UNION 13-6213516 FOUNDATION, INC. Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures

 \$ _
 Volunteer hours for political campaign activities Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 **▶**\$ 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No 4a Was a correction made? Yes Nο b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities > \$ 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b _______ ▶\$ _ Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (d) Amount paid from (a) Name (b) Address (c) EIN (e) Amount of political contributions received and filing organization's promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

AMERICAN CIVIL LIBERTIES UNION

Schedule C (Form 990) 2021	FOUNDATION,	INC.		13-6	213516 Page 2
Part II-A Complete if the org	anization is exer	npt under sectior	1 501(c)(3) and file	ed Form 5768 (ele	ction under
section 501(h)).					
A Check ▶ ☐ if the filing organiza	tion belongs to an affi	liated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
expenses, and shar	re of excess lobbying	expenditures).			
B Check ▶ if the filing organiza	tion checked box A a	nd "limited control" pro	visions apply.		
	ts on Lobbying Expe ditures" means amoւ	nditures ınts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	Jones public opinion (grassroots Johnving)		242,321.	
b Total lobbying expenditures to influ	537,315.				
c Total lobbying expenditures (add li		• • • • •		779,636.	
d Other exempt purpose expenditures				171885478.	
e Total exempt purpose expenditure		 N		172665114.	
f Lobbying nontaxable amount. Enter				1,000,000.	
				1,000,000	
Not over \$500,000		bying nontaxable am			
Over \$500,000 but not over \$1,000		the amount on line 1e. 00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500	, , ,	00 plus 10% of the exc	. ,		
		•			
Over \$1,500,000 but not over \$17,		00 plus 5% of the exces	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
a Crassroots pontavable amount (on	tor 25% of line 1f			250,000.	
g Grassroots nontaxable amount (en	,			0.	
h Subtract line 1g from line 1a. If zeri Subtract line 1f from line 1c. If zero				0.	
j If there is an amount other than ze		line 1: did the evention		U •	
reporting section 4911 tax for this				Г	Yes No
reporting section 4911 tax for triis	•	eraging Period Under			1es 140
(Some organizations the	hat made a section 5		have to complete all c	of the five columns be	low.
	Lobbying Expe	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	303,131.	405,703.	702,973.	779,636.	2,191,443.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))	,	, , , , ,			1,500,000.
f Grassroots Johnving expenditures	141,862.	87,688.	227,570.	242,321.	699,441.

Schedule C (Form 990) 2021

Schedule C (Form 990) 2021 FOUNDATION, INC. 13-62135 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	No	Amo	ount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i			
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i			
a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i			
c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i			
d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i			
e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i			
f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i			
g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i			
i Other activities? j Total. Add lines 1c through 1i			
a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912	-		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	or soo	tion	
501(c)(6).	, or sec	lion	
		Yes	١
Were substantially all (90% or more) dues received nondeductible by members?	1		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5)	3		
answered "Yes." Dues, assessments and similar amounts from members	1		
Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	•		
expenses for which the section 527(f) tax was paid).			
·	2a		
a Current year			
a Current year b Carryover from last year	2b		
a Current year b Carryover from last year c Total	2b 2c		
a Current year b Carryover from last year c Total	2b 2c		
a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	2b 2c		
a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	2b 2c 3		

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 Inspection

Name of the organization

AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC.

Employer identification number 13-6213516

	organization answered "Yes" on Form 990, Part IV, line	(a) Donor advised funds		(b) Funds and	d other accor	unts
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in wi	riting that the assets held in dono	or advised fur	nds		
	are the organization's property, subject to the organization's ex	clusive legal control?			Yes	☐ No
6	Did the organization inform all grantees, donors, and donor adv					
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other pu	urpose confei	rring		
	impermissible private benefit?				Yes	☐ No
Par	t II Conservation Easements. Complete if the orga	nization answered "Yes" on Forr	n 990, Part I\	/, line 7.		
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).				
	Preservation of land for public use (for example, recreation	on or education) Preserv	ation of a his	torically import	tant land are	a
	Protection of natural habitat Preservation of a certified					
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualifie	d conservation contribution in th	e form of a c	onservation ea	sement on t	he last
	day of the tax year.			Held a	it the End of t	he Tax Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easements			2b		
С	Number of conservation easements on a certified historic struc	cture included in (a)		2c		
d	Number of conservation easements included in (c) acquired aff	er 7/25/06, and not on a historic	structure			
	listed in the National Register			2d		
3	Number of conservation easements modified, transferred, release	ased, extinguished, or terminated	by the orgar	nization during	the tax	
	year ▶					
4	Number of states where property subject to conservation ease	ment is located				
5	Does the organization have a written policy regarding the period	dic monitoring, inspection, hand	ling of			
	violations, and enforcement of the conservation easements it h	nolds?			Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting, has	andling of violations, and enforci	ng conservati	ion easements	during the y	ear ear
	>					
7	Amount of expenses incurred in monitoring, inspecting, handling	ng of violations, and enforcing co	nservation ea	asements durir	ng the year	
	▶ \$					
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section	on 170(h)(4)(E	3)(i)		
	and section 170(h)(4)(B)(ii)?				Yes	No
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and ex	xpense stater	ment and		
	balance sheet, and include, if applicable, the text of the footno	te to the organization's financial	statements th	nat describes t	he	
	organization's accounting for conservation easements.					
Par	t III Organizations Maintaining Collections of A		or Other	Similar Ass	ets.	
	Complete if the organization answered "Yes" on Form 9	90, Part IV, line 8.				
1a	If the organization elected, as permitted under FASB ASC 958,	, not to report in its revenue state	ement and ba	lance sheet w	orks	
	of art, historical treasures, or other similar assets held for publi	c exhibition, education, or resear	ch in furthera	ance of public		
	service, provide in Part XIII the text of the footnote to its finance	ial statements that describes the	se items.			
b	If the organization elected, as permitted under FASB ASC 958,	to report in its revenue statemen	nt and baland	e sheet works	of	
	art, historical treasures, or other similar assets held for public e	exhibition, education, or research	in furtherand	e of public ser	vice,	
	provide the following amounts relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1			• \$		
	400 A			. .		
2	If the organization received or held works of art, historical treas	sures, or other similar assets for f	inancial gain,	provide		
	the following amounts required to be reported under FASB AS	C 958 relating to these items:				
а	Revenue included on Form 990, Part VIII, line 1			• \$		
	Assats included in Form 900 Part V			•		

Par	t III	Organizations Maintaining C	ollections of Art	t, Historical Tre	easures, o	r Other	Simila	r Assets	s (contin	nued)	
3	Using t	he organization's acquisition, accession	on, and other records	s, check any of the	following tha	t make sig	gnificant ι	use of its			
	collecti	on items (check all that apply):									
а	F	Public exhibition	d	Loan or exc	change progr	am					
b		Scholarly research	е	Other							
С	Preservation for future generations										
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										
		old to raise funds rather than to be ma							Yes		No
Par		Escrow and Custodial Arrang		ete if the organization	n answered	"Yes" on	Form 990	, Part IV,	line 9, or		
		reported an amount on Form 990, Par	t X, line 21.								
1a	a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included								_		
	on Form 990, Part X? Yes No								No		
b	b If "Yes," explain the arrangement in Part XIII and complete the following table:										
								Amount			
С	c Beginning balance 1c										
d	Additio	ns during the year					1d				
е	Distributions during the year 1e										
f	f Ending balance 1f						_				
2a	Did the	organization include an amount on Fe	orm 990, Part X, line	21, for escrow or co	ustodial acco	unt liabilit	ty?	L	Yes	L	_ No
	If "Yes,	explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided on	Part XIII					
Par	t V	Endowment Funds. Complete i									
			(a) Current year	(b) Prior year	(c) Two year			ears back	 		
		ing of year balance	118,949,545.	91,496,353.	1	3,989.		54,535.	<u> </u>		479.
b	Contrib	outions	20,728,564.	752,669.		6,644.		50,979.			983.
		estment earnings, gains, and losses	11,891,664.	27,580,523.	-5,68	6,280.	3,7	98,475.	5,	940,	073.
d	Grants	or scholarships									
е	Other e	expenditures for facilities									
	•	ograms	2,348,259.	880,000.	85	8,000.		60,000.	2,	622,	000.
f	Admini	strative expenses									
-		year balance		118,949,545.	-	6,353.	97,8	43,989.	78,	854,	535.
		e the estimated percentage of the curr	ent year end balance	e (line 1g, column (a)) held as:						
		designated or quasi-endowment		_%							
		nent endowment 62.2460	%								
		ndowment ▶ 37.7540									
	-	rcentages on lines 2a, 2b, and 2c sho	-								
За		ere endowment funds not in the posse	ssion of the organiza	tion that are held ai	nd administe	red for the	e organiza	ation	Г	Yes	Na
	by:									res	
		related organizations							3a(i)		X
		lated organizations							3a(ii)		X
		on line 3a(ii), are the related organiza							3b		
4 Par	t VI	be in Part XIII the intended uses of the Land, Buildings, and Equipm		wment tunas.							
· ui		Complete if the organization answered		Part IV line 11a S	See Form 990) Part X I	line 10				
		-						\ d	(d) Bool	اد برماید	
		Description of property	(a) Cost or of basis (investment)	1 , ,	t or other (other)		ccumulate preciation	eu	(a) Bool	(valu	е
10	Lond		,	· ·	5,713.	ч	or ociation		4,925	5 7	13
		ne			8,175.	7 4	177,7	50. 1	$\frac{4,92}{1,63}$		
		gs old improvements			1,898.		277,6		8,084		
					3,311.		882,5				56.
		nent		=, 10	-,	=,5	. 5 . , 5 .		22(- , , .	
		nes 1a through 1e. (Column (d) must e		V ookumn (D) 15 = 1	(00.)	I		2	4,961	1 . 1	19.
ı otal	Auu III	ica ra unough re. (Column (a) must e	<u>quai FOIIII 990, Part /</u>	<u>v. columni (B), line i</u>	<u>UC.)</u>				_,	- / - ·	

	AIT TIBEKLIES		
Schedule D (Form 990) 2021 FOUNDATION,	INC.	1	3-6213516 _{Page} 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) PROPRIETARY EQUITY FUNDS	211,185,191.	END-OF-YEAR MARKET	
(B) PRIVATE EQUITY FUNDS	99,671,139.	END-OF-YEAR MARKET	r value
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	310,856,330.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(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"		1d. 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 1	1e or 11f. See Form 990, Part X, line 2	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) LIABILITIES UNDER SPLIT-IN	NTEREST		00 400 000
(3) AGREEMENTS	_		20,422,939.
(4) DUE TO RELATED PARTY (ACLU	J –		20 252 524
(5) 501(C)(4))	707		39,353,784.
(6) BILL OF RIGHTS TRUST HELD	FOR		F0 016 055
(7) AFFILIATES			50,816,350.
(8) DUE TO AFFILIATES			36,213,917.

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

▶ 155,740,750.

(9)

Sche	dule D (Form 990) 2021 FOUNDATION, INC.		13-6213516 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial State	tements With Rever	nue per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ne 12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	45	
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.) Add lines 4a and 4b		40
5			
Pai	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII Reconciliation of Expenses per Audited Financial Sta	atements With Expe	
	Complete if the organization answered "Yes" on Form 990, Part IV, lir		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	·	2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		4c
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8.)	5
Pa	rt XIII Supplemental Information.		
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4		; 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 ar	ny additional information.	
DλI	OM V TINE /.		
PAI	RT V, LINE 4:		
тит	E PURPOSE OF THE ENDOWMENT FUND IS TO BU	TITI.D AN FNDIIR	TNG FNDOWMFNT TO
1111	FORFOSE OF THE ENDOWMENT FOND IS TO BO	TILD AN ENDOR	ING ENDOWMENT TO
CAE	RRY OUT THE WORK OF THE ACLU AND ITS AF	TTI.TATES TN D	ROTECTING
CHI	WI OUT THE WORK OF THE ACED AND TIE AT	THIMIDD IN I	NOTECTING,
PRE	ESERVING AND EXPANDING THE CIVIL LIBERT	IES OF ALL PE	RSONS IN THE UNITED
			11, 111, 111, 01,112,
STA	ATES OF AMERICA.		
PAF	RT X, LINE 2:		
	·		
THE	E FOUNDATION IS A NONPROFIT ORGANIZATION	N EXEMPT FROM	INCOME TAXES UNDER
-			
SEC	CTION 501(C)(3) OF THE U.S. INTERNAL REV	VENUE CODE (I	RC). THE FOUNDATION
IS	SUBJECT TO TAXES ON UNRELATED BUSINESS	INCOME, AS A	PPLICABLE.
THE	E FOUNDATION FILES TAX AND INFORMATION I	RETURNS WITH	THE INTERNAL REVENUE
~	NITCH (TRO) NR	- 015 15 5-	
SEI	RVICE (IRS) AND WITH VARIOUS STATES. THI	יי אול בוע ב IbTH ST	KEET, LLC IS TREATED

Part XIII Supplemental Information (continued)
AS A DISREGARDED (TAX) ENTITY AND ITS ACTIVITIES ARE INCLUDED WITH THE
FOUNDATION'S RETURN.
MANAGEMENT EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE
ORGANIZATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADDITIONAL
ADJUSTMENT OR DISCLOSURE TO THE ACCOMPANYING CONSOLIDATED FINANCIAL
STATEMENTS. GENERALLY, THE FOUNDATION IS NO LONGER SUBJECT TO INCOME TAX
EXAMINATIONS BY U.S. FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR TAX YEARS
BEFORE 2019, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOK-BACK
PERIOD.

Part XIII Supplemental Information (continued) Part X Other Liabilities. See Form 990, Part X, line 25. (a) Description of liability (b) Amount DUE TO THE ACLU - ACCRUED PENSION LIABILITY 6,933,760. FUNDS RECEIVED IN ADVANCE 2,000,000.

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public

Inspection

Name of the organization AMERICAN CIVIL LIBERTIES UNION **Employer identification number** FOUNDATION, INC. 13-6213516 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations e X Solicitation of non-government grants X Internet and email solicitations Solicitation of government grants X Phone solicitations Special fundraising events X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) O'BRIENT GARRETT - 1133 19TH Yes No STREET NW, SUITE 300 TELEMARKETING Х 49,897,018 268,486 49,628,532. DCM, INC. - 261 WEST 35TH STREET, SUITE 600, NEW YORK, TELEMARKETING Х 509,973. 140,269 369,704. OCSS SMARTCENTER - 21925 W. FIELD PKWY SUITE 210, DEER TELEMARKETING Х 0 3,096. -3,096. 50,406,991. 411 851. 49,995,140. Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration AK, AL, AR, AZ, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ NM, NY, OH, OK, OR, PA, RI, SC, SD, TN, UT, WA, WI, WV, VA

AMERICAN CIVIL LIBERTIES UNION

Schedule G (Form 990) 2021

FOUNDATION, INC.

13-6213516 Page 2

Pa	Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.							
		or iditariating event contributions and give	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))		
he			(event type)	(event type)	(total number)	COI. (C))		
Revenue	1	Gross receipts						
	2	Less: Contributions						
	3	Gross income (line 1 minus line 2)						
	4	Cash prizes						
"	5	Noncash prizes						
Direct Expenses	6	Rent/facility costs						
Jirect E	7	Food and beverages						
	8	Entertainment						
	9 10	Other direct expenses			•			
	11	Net income summary. Subtract line 10 from li			_			
Pa	rt I		answered "Yes" on Form	990, Part IV, line 19, or	reported more than			
		\$15,000 on Form 990-EZ, line 6a.		(b) Pull tabs/instant		(d) Total gaming (add		
Revenue			(a) Bingo bingo/progressive bingo		(c) Other gaming	col. (a) through col. (c))		
Rev	1	Gross revenue						
ses	2	Cash prizes						
Direct Expenses	3	Noncash prizes						
Direc	4	Rent/facility costs						
	5	Other direct expenses						
	6	Volunteer labor	Yes % No	Yes % No	Yes % No			
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		>			
а	ls t	ter the state(s) in which the organization conducted the organization licensed to conduct gaming and No," explain:	ctivities in each of these			Yes No		
10a	 We	ere any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax	year?	Yes No		
		Yes," explain:						

AMERICAN CIVIL LIBERTIES UNION FOUNDATION INC

Sch	ledule G (Form 990) 2021 FOUNDATION, INC.	07T22T	D Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
	Indicate the percentage of gaming activity conducted in:	1 1	
	The organization's facility		%
	o An outside facility	13b	<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$		
c	If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatory distributions:		
а	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
Da	organization's own exempt activities during the tax year > \$		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part I, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	art III, lines 9,	, 9b, 10b,
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISER	s:	
(I) NAME OF FUNDRAISER: O'BRIENT GARRETT		
\ <u>-</u>			
<u>(I</u>) ADDRESS OF FUNDRAISER:		
11	33 19TH STREET NW, SUITE 300, WASHINGTON, DC 20036		
<u>(I</u>) NAME OF FUNDRAISER: DCM, INC.		
(I) ADDRESS OF FUNDRAISER:		
26	1 WEST 35TH STREET, SUITE 600, NEW YORK, NY 10001		

AMERICAN CIVIL LIBERTIES UNION

Sched	dule G	(Form	990)	nont	al Infor	FOU	UNDA	OITA	N,	INC							1	3-62	21351	L 6	Page 4
Fai	LIV	Sup	piei	nent	ai iiiioi	mauc) (CC	ontinued	d)												
(I)	NA	ME (OF	FUN	DRAI	SER:	QC	ss s	SMA	RTC	ENT	ER									
(T)	Z D.	ח דים	22	OF	FUND:	RATS	FR.														
219	25	W.]	FIE	LD	PKWY	SUI	TE	210	, D	EER	PA	RK,	IL	6(010						

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.

Open to Public

Inspection

OMB No. 1545-0047

AMERICAN CIVIL LIBERTIES UNION

FOUNDATION		EKITES ONIO	IN				13-6213516
Part I General Information on Grants ar							
Does the organization maintain records to criteria used to award the grants or assis Describe in Part IV the organization's pro	tance? cedures for monit	oring the use of grant	funds in the United	States.			X Yes No
Part II Grants and Other Assistance to I recipient that received more than \$					anization answered "	Yes" on Form 990, Part	IV, line 21, for any
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
ACLU OF ALABAMA							AFFILIATE PROGRAM; FOR WORK THAT IS CHARITABLE
900 S. PERRY STREET, SUITE B MONTGOMERY, AL 36104	23-7093412	501(C)(4)	388,975.	0.			WITHIN THE MEANING OF 501C3
ACLU OF ARIZONA P.O. BOX 17148							AFFILIATE PROGRAM; FOR WORK THAT IS CHARITABLE WITHIN THE MEANING OF
PHOENIX, AZ 85011	86-0205157	501(C)(4)	31,470.	0.			501C3
ACLU OF COLORADO 303 E. 17TH AVENUE SUITE 350 DENVER. CO 80203	84-0437750	501(C)(A)	106,916.	0.			AFFILIATE PROGRAM; FOR WORK THAT IS CHARITABLE WITHIN THE MEANING OF 501C3
ACLU OF CONNECTICUT 765 ASYLUM AVENUE HARTFORD, CT 06105	45-2857664		54,648.	0.			AFFILIATE PROGRAM; FOR WORK THAT IS CHARITABLE WITHIN THE MEANING OF 501C3
ACLU OF FLORIDA 4343 W. FLAGLER STREET, SUITE 400 MIAMI, FL 33134	59-0883831		99,860.	0.			AFFILIATE PROGRAM; FOR WORK THAT IS CHARITABLE WITHIN THE MEANING OF 501C3
ACLU OF GEORGIA 1100 SPRING STREET, NW, SUITE 640 ATLANTA, GA 30309	58-0951433	501(C)(4)	300,000.	0.			AFFILIATE PROGRAM; FOR WORK THAT IS CHARITABLE WITHIN THE MEANING OF 501C3
2 Enter total number of section 501(c)(3) ar3 Enter total number of other organizations	•	9					

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

Schedule I (Form 990) 2021

Schedule I (Form 990) FOUNDATIO Part II Continuation of Grants and Other		mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	.3-6213516 Page
(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
ACLU OF KENTUCKY 315 GUTHRIE STREET, SUITE 300							AFFILIATE PROGRAM, 501H LOBBYING EXPENSES; FOR
LOUISVILLE, KY 40202	61-0597514	501(C)(4)	660,000.	0.			501C3 CHARITABLE WORK
ACLU OF MICHIGAN 2966 WOODWARD AVENUE	20 1642102	E01/Q)/A)	15 450	0			AFFILIATE PROGRAM; FOR WORK THAT IS CHARITABLE WITHIN THE MEANING OF
DETROIT, MI 48201	38-1643182	501(C)(4)	15,458.	0.			501C3 AFFILIATE PROGRAM; FOR
ACLU OF MISSOURI 906 OLIVE STREET SUITE 1130	32-0295491	501(C)(A)	36,000.	0.			WORK THAT IS CHARITABLE WITHIN THE MEANING OF 501C3
ST. LOUIS, MO 63101	32-0293491	501(C)(4)	36,000.	0.			AFFILIATE PROGRAM; FOR
ACLU OF MONTANA P.O. BOX 9138				_			WORK THAT IS CHARITABLE WITHIN THE MEANING OF
MISSOULA, MT 59807	81-0431527	501(C)(4)	125,000.	0.			501C3
ACLU OF OHIO 4506 CHESTER AVENUE CLEVELAND, OH 44103	34-0700606	501(C)(4)	153,725.	0.			AFFILIATE PROGRAM; FOR WORK THAT IS CHARITABLE WITHIN THE MEANING OF 501C3
ACLU OF OKLAHOMA P.O. BOX 13327 OKLAHOMA CITY, OK 73113	82-5301552	501(C)(4)	15,000.	0.			AFFILIATE PROGRAM, LOBBYING EXPENSES INCLUDED IN 501H EXPENDITURES
ACLU OF TEXAS P.O. BOX 8306 HOUSTON, TX 77288	76-0343140	501(C)(4)	20,000.	0.			AFFILIATE PROGRAM; FOR WORK THAT IS CHARITABLE WITHIN THE MEANING OF 501C3
ACLU OF THE DISTRICT OF COLUMBIA P.O. BOX 11637							AFFILIATE PROGRAM, LOBBYING EXPENSES INCLUDED IN 501H
WASHINGTON, DC 20008	52-0749684	501(C)(4)	25,000.	0.			EXPENDITURES
ACLU OF UTAH 355 NORTH 300 WEST							AFFILIATE PROGRAM, LOBBYING EXPENSES INCLUDED IN 501H
SALT LAKE CITY, UT 84103	27-1307106	501(C)(4)	10,000.	0.			EXPENDITURES

Schedule I (Form 990) FOUNDATION Part II Continuation of Grants and Other		mostic Organizations	and Domostic Go	wornments (Sch	adula I (Form 990) Pa		3-6213516 Page
(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
ACLU OF WEST VIRGINIA P.O. BOX 3952 CHARLESTON, WV 25339	23-7095474	501(C)(4)	250,000.	0.			AFFILIATE PROGRAM; FOR WORK THAT IS CHARITABLE WITHIN THE MEANING OF 501C3
ACLU OF WISCONSIN 207 E. BUFFALO STREET, SUITE 325 MILWAUKEE, WI 53202	39-6057574	501(C)(4)	351,750.	0.			AFFILIATE PROGRAM; FOR WORK THAT IS CHARITABLE WITHIN THE MEANING OF 501C3
ACLU FOUNDATION OF ALABAMA P.O. BOX 6179 MONTGOMERY, AL 36106	63-0883872	501(C)(3)	863,175.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF ALASKA 1057 W. FIREWEED LANE ANCHORAGE, AK 99503	23-7113202	501(C)(3)	170,000.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF ARIZONA P.O. BOX 17148 PHOENIX, AZ 85011	23-7238580	501(C)(3)	299,490.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF ARKANSAS 904 W. SECOND STREET, SUITE 1 LITTLE ROCK, AR 72201	71-0473676	501(C)(3)	16,000.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF COLORADO 303 E. 17TH AVENUE SUITE 350 DENVER, CO 80203	23-7028224	501(C)(3)	162,261.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF CONNECTICUT 765 ASYLUM AVENUE HARTFORD, CT 06105	06-0871754	501(C)(3)	163,942.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF DELAWARE 100 WEST 10TH STREET, SUITE 603 WILMINGTON, DE 19801	51-0220856	501(C)(3)	172,000.	0.			AFFILIATE PROGRAM, LOBBYING EXPENSES INCLUDED IN 501H EXPENDITURES

Part II Continuation of Grants and Other A	ssistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt 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
ACLU FOUNDATION OF FLORIDA 4343 W. FLAGLER STREETSUITE 400	02 5125500	F07 (G) (2)	556 050				
MIAMI, FL 33134	23-7137529	501(C)(3)	556,970.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF GEORGIA 1100 SPRING STREET, NW, SUITE 640							
ATLANTA, GA 30309	23-7115937	501(C)(3)	709,500.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF HAWAII P.O. BOX 3410 HONOLULU, HI 96801	99-0192064	501(C)(3)	80,000.	0.			AFFILIATE PROGRAM
NONCECED, HI 30001	JJ 01J2004	301(0)(3)	00,000.	<u> </u>			AFFIBIATE TROGRAM
ACLU FOUNDATION OF IDAHO P.O. BOX 1897							
BOISE, ID 83701	82-0467428	501(C)(3)	85,000.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF ILLINOIS 150 NORTH MICHIGAN AVENUE, SUITE 60 CHICAGO, IL 60601	36-2682569	501(C)(3)	260,000.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF INDIANA 1031 E. WASHINGTON STREET INDIANAPOLIS, IN 46202	23-7398358	501(C)(3)	266,000.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF IOWA 505 5TH AVENUE, SUITE 905							
DES MOINES, IA 50309	42-1002093	DUI(C)(3)	150,000.	0.			AFFILIATE PROGRAM AFFILIATE PROGRAM,
ACLU FOUNDATION OF KANSAS 6701 W 64TH STREET, SUITE 210							LOBBYING ACTIVITIES INCLUDED IN 501 (H)
OVERLAND PARK, KS 66202	43-0926406	501(C)(3)	755,500.	0.			ELECTION
ACLU FOUNDATION OF KENTUCKY 325 W. MAIN STREET, SUITE 2210							
LOUISVILLE, KY 40202	61-6058569	pnT(G)(3)	320,000.	0.			AFFILIATE PROGRAM

Schedule I (Form 990) FOUNDATIO Part II Continuation of Grants and Other		mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990). Pa		.3-6213516 Pa
(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
ACLU FOUNDATION OF LOUISIANA P.O. BOX 56157 NEW ORLEANS, LA 70156	72-0717944	501(C)(3)	1,448,174.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF MAINE							
ACLU FOUNDATION OF MARYLAND 3600 CLIPPER MILL ROAD, SUITE 350	01-0367357	501(C)(3)	208,000.	0.			AFFILIATE PROGRAM
BALTIMORE, MD 21211	23-7209538	501(C)(3)	136,770.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF MASSACHUSETTS 211 CONGRESS STREET							
BOSTON, MA 02110 ACLU FOUNDATION OF MICHIGAN 2966 WOODWARD AVENUE	23-7312949	501(C)(3)	245,000.	0.			AFFILIATE PROGRAM, AFFILIATE PROGRAM, LOBBYING EXPENSES INCLUDED IN 501H
DETROIT, MI 48201	23-7243421	501(C)(3)	586,375.	0.			EXPENDITURES
ACLU FOUNDATION OF MINNESOTA 2300 MYRTLE AVENUE, SUITE 180	44 5050040		250 200				
ST. PAUL, MN 55414 ACLU FOUNDATION OF MISSISSIPPI	41-6050012	501(C)(3)	250,000.	0.			AFFILIATE PROGRAM
P.O. BOX 2242 JACKSON, MS 39225	64-0694013	501(C)(3)	1,300,000.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF MISSOURI 906 OLIVE STREET SUITE 1130							
ST. LOUIS, MO 63101	43-6070952	501(C)(3)	238,000.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF MONTANA P.O. BOX 1968							
MISSOULA, MT 59806	81-0445339	501(C)(3)	96,000.	0.			AFFILIATE PROGRAM

Schedule I (Form 990) FOUNDATIO		mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa		3-6213516
(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
							AFFILIATE PROGRAM,
ACLU FOUNDATION OF NEBRASKA							LOBBYING EXPENSES
134 SOUTH 13TH STREET, SUITE 1010							INCLUDED IN 501H
LINCOLN, NE 68508	23-7259984	501(C)(3)	445,000.	0.			EXPENDITURES
ACLU FOUNDATION OF NEVADA							
LAS VEGAS, NV 89106	88-0217086	501(C)(3)	185,000.	0.			AFFILIATE PROGRAM
							AFFILIATE PROGRAM,
ACLU FOUNDATION OF NEW HAMPSHIRE							LOBBYING EXPENSES
18 LOW AVENUE							INCLUDED IN 501H
CONCORD, NH 03301	02-0347237	501(C)(3)	296,056.	0.			EXPENDITURES
ACLU FOUNDATION OF NEW JERSEY PO BOX 32159			105.000				
NEWARK, NJ 07102	22-2010593	501(C)(3)	195,000.	0.			AFFILIATE PROGRAM
							AFFILIATE PROGRAM,
ACLU FOUNDATION OF NEW MEXICO							LOBBYING EXPENSES
P.O. BOX 566	05 0055056	504 (5) (0)	500.000				INCLUDED IN 501H
ALBUQUERQUE, NM 87103	85-0275276	501(C)(3)	532,000.	0.			EXPENDITURES
ACLU FOUNDATION OF NORTH CAROLINA PO BOX 28004							
RALEIGH, NC 27611	56-1019644	501(C)(3)	382,000.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF OHIO 4506 CHESTER AVENUE							
CLEVELAND, OH 44103	23-7137105	501(C)(3)	726,175.	0.			AFFILIATE PROGRAM
							AFFILIATE PROGRAM,
CLU FOUNDATION OF OKLAHOMA							LOBBYING EXPENSES
P.O. BOX 13327							INCLUDED IN 501H
OKLAHOMA CITY, OK 73113	73-1003205	501(C)(3)	167,500.	0.			EXPENDITURES
•							AFFILIATE PROGRAM,
ACLU FOUNDATION OF PENNSYLVANIA							LOBBYING EXPENSES
P.O. BOX 60173							INCLUDED IN 501H
PHILADELPHIA, PA 19102	23-1742013	501(C)(3)	641,000.	0.			EXPENDITURES

Schedule I (Form 990) FOUNDATIO				(0-1-	- dula I (Farres 000) 5-		.3-6213516 Pa
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	s and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt 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
ACLU FOUNDATION OF SAN DIEGO & IMPERIAL COUNTIES - P.O. BOX 87131							
- SAN DIEGO, CA 92138	33-0325791	501(C)(3)	557,000.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF SOUTH CAROLINA 635 EAST BAY STREET, SUITE 1A	07.404000						
CHARLESTON, SC 29403	27-1942832	501(C)(3)	222,500.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF SOUTHERN CALIFORNIA - 1313 W 8TH STREET -							
LOS ANGELES, CA 90017	95-2673361	501(C)(3)	291,964.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF TEXAS P.O. BOX 8306							AFFILIATE PROGRAM, LOBBYING EXPENSES INCLUDED IN 501H
HOUSTON, TX 77288	76-0343171	501(C)(3)	606,000.	0.			EXPENDITURES
ACLU FOUNDATION OF THE DISTRICT OF COLUMBIA - P.O. BOX 11637 -							
WASHINGTON, DC 20008	52-6070446	501(C)(3)	270,000.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF UTAH 355 NORTH 300 WEST							AFFILIATE PROGRAM, LOBBYING EXPENSES INCLUDED IN 501H
SALT LAKE CITY, UT 84103	87-0439810	501(C)(3)	270,000.	0.			EXPENDITURES
ACLU FOUNDATION OF VERMONT P.O. BOX 277							
MONTPELIER, VT 05601	23-7123046	501(C)(3)	125,000.	0.			AFFILIATE PROGRAM
ACLU FOUNDATION OF VIRGINIA 701 E. FRANKLIN STREET							
RICHMOND, VA 23219	52-1283242	501(C)(3)	111,348.	0.			AFFILIATE PROGRAM
							AFFILIATE PROGRAM,
ACLU FOUNDATION OF WEST VIRGINIA							LOBBYING EXPENSES
P.O. BOX 3952	FF 0604501	E01/G)/2)	650 503	_			INCLUDED IN 501H
CHARLESTON, WV 25339	55-0681531	por(G)(3)	673,500.	0.			EXPENDITURES

(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
CLU FOUNDATION OF WISCONSIN 07 E. BUFFALO STREET, SUITE 325 ILWAUKEE, WI 53202	39-6057574	501(C)(3)	188,250.	0.			AFFILIATE PROGRAM
ANSANS FOR CONSTITUTIONAL REEDOM, INC 4401 W. 109TH TREET, SUITE 200 - OVERLAND PARK, S 66211	87-1224421		100,000.	0.			OPPOSING KANSAS REPRODUCTIVE RIGHTS RELATED BALLOT MEASURE
ATIONAL POPULAR VOTE O. BOX 1441 OS ALTOS HILLS, CA 94023	20-4329338	501(C)(A)	50,000.	0.			FOR POPULAR VOTE MESSAGING POLLING AND RESEARCH
55 IM165 IM165, CH 51045	20 1025000	501(0)(1)	30,000.	<u> </u>			NAD ZERON

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.

Page 2

(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 red	uired in Part I, lin	ie 2; Part III, column	(b); and any other ac	dditional information.	
PART I, LINE 2:					
THE ACLU HAS ESTABLISHED PROCEDURE	S FOR THE	E RELEASE C	OF GRANTS,	AS WELL AS	
FOR MONITORING OF OUTCOMES, TO DET	ERMINE WH	ETHER THE	GOALS OF A	PARTICULAR	
GRANT AWARD HAVE BEEN MET. WHILE T	HE PRIMAR	RY GRANTMAR	KING THE OR	GANIZATION	
DOES IS TO ITS AFFILIATES, THE ORG	ANIZATION	I ALSO MAKI	ES GRANTS T	O OTHER	
ORGANIZATIONS WHEN IT DETERMINES T	HAT DOING	SO WILL E	BE IN THE F	URTHERANCE	
OF ITS MISSION. GRANT AWARDS ARE C	ONFIRMED	IN WRITING	AND SUPPO	RTED BY A	
WRITTEN AGREEMENT THAT SPECIFIES T	HE PURPOS	SE OF THE C	RANT, THE	SPECIFIC	
OUTCOMES TO BE ACHIEVED, AND, IF A	PPLICABLE	THE IND	CATORS THA	T THE	

Part IV Supplemental Information
PARTIES AGREE WILL BE USED TO MEASURE PROGRESS TOWARDS AGREED UPON GOALS.
WRITTEN AGREEMENTS DETAIL THE SPECIFIC ACTIVITIES FOR WHICH FUNDING IS TO
BE PROVIDED AND DOCUMENT THE COMMITMENT TO USING THE FUNDS PROVIDED TO
PURSUE SPECIFIC STRATEGIES IN ADDRESSING PROGRAM GOALS AND TARGET OUTCOMES.
AFFILIATES AND OTHER ORGANIZATIONS WHO RECEIVE GRANT AWARDS MAY BE REQUIRED
TO PROVIDE QUANTITATIVE AND QUALITATIVE REPORTS, AND THESE REPORTS MAY BE
USED TO DETERMINE WHETHER ADDITIONAL FUNDING MAY BE REQUIRED AND/OR TO
ENHANCE FUTURE GRANT PROGRAMS.

SCHEDULE J (Form 990)

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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Department of the Treasury

AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC.

 $Employer\ identification\ number \\ 13-6213516$

Questions Regarding Compensation Yes No 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. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account 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 1b 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? 2 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. X Compensation committee Written employment contract X Independent compensation consultant X Compensation survey or study X Form 990 of other organizations X Approval by the board or compensation committee 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: Х **a** Receive a severance payment or change-of-control payment? Х **b** Participate in or receive payment from a supplemental nonqualified retirement plan? 4b Х **c** Participate in or receive payment from an equity-based compensation arrangement? 4c 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. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 5 contingent on the revenues of: Х a The organization? 5a Х Any related organization? If "Yes" on line 5a or 5b, describe in Part III. 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: Х a The organization? 6a Х b Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. 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 Х 7 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 Х 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2021

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MISC compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) ANTHONY D. ROMERO	(i)	0.	0.	0.	0.	0.	0.	0.
EXECUTIVE DIRECTOR/CEO	(ii)	629,499.	0.	16,654.	212,725.	26,010.	884,888.	0.
(2) DOROTHY M. EHRLICH	(i)	0.	0.	0.	0.	0.	0.	0.
DEPUTY EXECUTIVE DIRECTOR	(ii)	484,767.	0.	17,289.	228,573.	38,764.	769,393.	0.
(3) TERENCE R. DOUGHERTY	(i)	0.	0.	0.	0.	0.	0.	0.
COO/GENERAL COUNSEL	(ii)	476,311.	0.	-4,029.	29,947.	50,547.		0.
(4) MARK V. WIER	(i)	447,957.	0.	11,503.	20,637.	3,285.	483,382.	0.
CHIEF DEVELOPMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KIMBERLY P. TRUEBLOOD	(i)	0.	0.	0.	0.	0.	0.	0.
CHIEF OF STAFF (THRU 1/3/22)	(ii)	392,829.	37,112.	-8,160.	20,448.	32,841.	475,070.	0.
(6) DAVID D. COLE	(i)	436,061.	0.	13,875.	19,987.	4,868.	474,791.	0.
NATIONAL LEGAL DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) KARY L. MOSS	(i)	384,009.	0.	8,966.	60,515.	20,098.	473,588.	0.
DIR. AFFIL. SUPPORT & NATIONWIDE INI	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) RONALD NEWMAN	(i)	0.	0.	0.	0.	0.	0.	0.
NAT'L POLITICAL DIR. (THRU 3/15/22)	(ii)	392,829.	0.	-2,227.	19,149.	62,736.	472,487.	0.
(9) REBECCA LOWELL EDWARDS	(i)	382,948.	0.	630.	18,803.	2,535.	404,916.	0.
CHIEF COMMUNICATIONS OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) CHARIZMA T. WILLIAMS	(i)	0.	0.	0.	0.	0.	0.	0.
CHIEF FINANCIAL OFFICER	(ii)	354,750.	0.	1,581.	17,077.	19,453.		0.
(11) ELIZABETH FITZGERALD	(i)	315,953.	0.	-9,062.	30,149.	64,392.	401,432.	0.
DIRECTOR OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) LOUISE MELLING	(i)	315,953.	0.	-231.	50,700.	21,378.	387,800.	0.
DEPUTY LEGAL DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) SOPHIA K. GOLDMACHER	(i)	0.	0.	0.	0.	0.	0.	0.
CHIEF PEOPLE OFFICER	(ii)	315,953.	0.	-7,475.	16,445.	62,216.		0.
(14) CECILLIA D. WANG	(i)	315,953.	0.	-23.	30,149.	19,378.	365,457.	0.
DEPUTY LEGAL DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) AMBER HIKES	(i)	0.	0.	0.	0.	0.	0.	0.
CHIEF EQUITY & INCLUSION OFFICER	(ii)	315,953.	0.	-2,147.	11,719.	19,378.	344,903.	0.
	(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, LINES 4A-B:

ONE INDIVIDUAL RECEIVED SEVERANCE PAYMENTS, THE AMOUNTS ARE REPORTED ON

PART IX - STATEMENT OF FUNCTIONAL EXPENSES. DUE TO CONFIDENTIALITY

CONCERNS, THE NAME OF THE INDIVIDUAL IS NOT DISCLOSED. THE DETAILED

INFORMATION IS AVAILABLE TO THE IRS UPON REQUESTS.

THE CEO PARTICIPATES IN A NONQUALIFIED, SUPPLEMENTAL RETIREMENT PLAN.

\$175,000 WAS CREDITED TO THE PLAN DURING TAX YEAR 2021. THE AMOUNT WILL

VEST AND BE DISTRIBUTED ON DECEMBER 31, 2023.

FORM 990, SCHEDULE J

PART II: COLUMN B(I) INCLUDES BASE COMPENSATION, COLUMN B(II) INCLUDES

BONUS PAYMENTS AND COLUMN B(III) INCLUDES ALL OTHER REPORTABLE

COMPENSATION, INCLUDING ANY REDUCTIONS TO TAXABLE COMPENSATION RELATED

TO PARTICIPATION IN HEALTH OR DEPENDENT SPENDING ACCOUNTS, IF/AS

APPLICABLE. NEGATIVE NUMBERS IN COLUMN B(III) OCCUR WHEN THE AMOUNTS

DEDUCTED FROM REPORTABLE COMPENSATION ARE GREATER THAN THE COSTS OF

OTHER TAXABLE BENEFITS REPORTED IN THIS COLUMN. COLUMN C INCLUDES

EMPLOYER CONTRIBUTIONS TO THE DEFINED BENEFIT PENSION PLAN OR, FOR

Tart in Cupplemental 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.
EMPLOYEES HIRED ON OR AFTER APRIL 1, 2009, TO THE DEFINED CONTRIBUTION
401(K) PLAN, AND CONTRIBUTIONS, IF ANY, TO THE 457(B) PLAN; THE TOTALS
SHOWN REFLECT AMOUNTS EARNED DURING THE YEAR, WHETHER OR NOT THE
EMPLOYEE IS FULLY VESTED. COLUMN D INCLUDES NON-TAXABLE BENEFITS, SUCH
AS HEALTH AND OTHER INSURANCE, AS WELL AS AMOUNTS SET ASIDE BY
EMPLOYEES IN THE HEALTH AND/OR DEPENDENT CARE FLEXIBLE SPENDING PLANS,
WHICH HAVE BEEN ADDED BACK TO PROVIDE THE FULLEST PICTURE POSSIBLE OF
TOTAL COMPENSATION.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

➤ Attach to Form 990.

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

AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC.

Employer identification number 13-6213516

Pai	t I Types of Property				·				
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of d noncash contrib	etermin		s	
1	Art - Works of art				9				
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles							-	
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	X	661	12.704.796	. SALES PRICE	3			
10	Securities - Closely held stock			, , , , , ,					
11	Securities - Partnership, LLC, or								
• •	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other								
26	Other • ()								
27	Other								
28	Other (
29	Number of Forms 8283 received by the organia	zation during	the tax year for c	ontributions					
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29			0	1	
							Yes	No	
30a	During the year, did the organization receive b	y contributio	n any property rep	orted in Part I, lines 1 thro	ugh 28, that it				
	must hold for at least three years from the date			·					
	exempt purposes for the entire holding period	?				30a		X	
b	If "Yes," describe the arrangement in Part II.						Х		
31									
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncas	sh				
	contributions?					32a	X		
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in o	column (c) foi	a type of property	for which column (a) is c	necked,				
	describe in Part II.								

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

Schedule M (Form 990) 2021

LHA

AMERICAN CIVIL LIBERTIES UNION

13-6213516 FOUNDATION, INC. Schedule M (Form 990) 2021 Page 2 Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. SCHEDULE M, PART I, COLUMN (B): THE NUMBER OF CONTRIBUTIONS ABOVE REPRESENTS THE TOTAL NUMBER OF STOCK GIFTS DURING THE YEAR. SCHEDULE M, LINE 32B: WE ENGAGE BROKERS, WITH EXPERTISE SELLING PROPERTY CONTRIBUTED TO THE ORGANIZATION, TO FACILITATE SALES OF NONCASH PROPERTY ON OUR BEHALF.

Schedule M (Form 990) 2021

SCHEDULE 0 (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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC.

Employer identification number 13-6213516

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
LAWS OF THE UNITED STATES OR OF THE VARIOUS STATES TO PERSONS INVOLVED
IN ACTIVITIES WHEREIN THEIR CIVIL RIGHTS AND LIBERTIES ARE THREATENED
OR INFRINGED." THE ACLU FOUNDATION TODAY REMAINS FOCUSED ON THE
OVERARCHING GOALS SET BY ITS FOUNDERS, SERVING AS THE NATION'S GUARDIAN
OF LIBERTY, WORKING DAILY IN COURTS, LEGISLATURES AND COMMUNITIES TO
DEFEND AND PRESERVE THE INDIVIDUAL RIGHTS AND LIBERTIES THAT THE
CONSTITUTION AND LAWS OF THE US GUARANTEE. THE ACLU ALSO WORKS TO
EXTEND RIGHTS TO SEGMENTS OF THE POPULATION THAT HAVE TRADITIONALLY
BEEN DENIED THEIR RIGHTS, INCLUDING PEOPLE OF COLOR; WOMEN; LESBIANS,
GAY MEN, BISEXUALS AND TRANSGENDER AND GENDER NONBINARY PEOPLE;
PRISONERS; AND PERSONS WITH DISABILITIES.
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
AFFAIRS.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
LEGISLATIVE ADVOCACY - THE ACLU SEEKS TO IMPACT CIVIL LIBERTIES THROUGH
WORK ON LEGISLATION AT THE FEDERAL AND STATE LEVEL, AS APPROPRIATE. THE
ORGANIZATION'S LEGISLATIVE ADVOCATES ARE A CONSTANT PRESENCE ON FEDERAL
AND STATE CIVIL LIBERTIES LEGISLATIVE ISSUES. UPDATES ON KEY
LEGISLATIVE ISSUES IMPACTING CIVIL LIBERTIES ARE INCLUDED IN MAIL,
EMAIL, AND OTHER COMMUNICATIONS TO ACLU MEMBERS NATIONWIDE, AS WELL AS
IN PUBLIC EDUCATION CAMPAIGNS. IN ADDITION, THE ACLU DEVELOPS POLICY
RELATING TO POSITIONS ON CIVIL LIBERTIES ISSUES.

INCLUDING GRANTS OF \$ 109,975.

REVENUE \$ 0.

EXPENSES \$ 2,888,781.

CIVIL LIBERTIES POLICY FORMULATION - THE BOARD OF DIRECTORS OF THE ACLU

WORKS THROUGH ITS STANDING AND SPECIAL COMMITTEES TO ANALYZE CIVIL

LIBERTIES ISSUES AND, WHERE APPROPRIATE, TO DEVELOP POLICIES THAT WILL

SERVE AS THE FRAME OF REFERENCE FOR LEGISLATIVE, EDUCATIONAL AND

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

IMPLEMENTS AND ASSISTS IN THE DEVELOPMENT OF POLICY GOALS THROUGH ITS

AFFILIATES.

EXPENSES \$ 1,148,175. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

ACLU FOUNDATION IS A MEMBERSHIP ORGANIZATION. ITS MEMBERS ARE THE BOARD DIRECTORS OF THE AMERICAN CIVIL LIBERTIES UNION.

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

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

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

ACLU HAS THE AUTHORITY TO AMEND ITS BYLAWS, AND UNDER NEW YORK LAW, ACLU

HAS THE RIGHT TO APPROVE A DECISION BY THE BOARD TO DISSOLVE,

MERGE/CONSOLIDATE WITH ANOTHER ORGANIZATION OR DISPOSE OF ALL OR

SUBSTANTIALLY ALL OF THE ORGANIZATION'S ASSETS.

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

THE FORM 990 WAS PREPARED BY MANAGEMENT IN CONSULTATION WITH THE

ORGANIZATION'S AUDITORS. THE ORGANIZATION'S AUDIT COMMITTEE AND ITS

TREASURER REVIEWED A DRAFT OF THE 990 AND PROVIDED COMMENTS. A COMPLETE

COPY OF THE FORM 990 WAS PROVIDED TO THE ORGANIZATION'S GOVERNING BODY

Schedule O (Form 990) 2021 Page 2

Name of the organization AMERICAN CIVIL LIBERTIES UNION Employer identification number FOUNDATION, INC. 13-6213516

BEFORE IT WAS FILED.

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

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

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

ON AN ANNUAL BASIS, A COMMITTEE OF THE BOARD OF THE ORGANIZATION

ESTABLISHES THE EXECUTIVE DIRECTOR'S COMPENSATION, AND THE AUDIT COMMITTEE

APPROVES THE COMPENSATION OF ALL OTHER KEY EMPLOYEES, AS RECOMMENDED BY THE

EXECUTIVE DIRECTOR. NO MEMBER OF EITHER COMMITTEE HAS A CONFLICT OF

INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT. EACH COMMITTEE

Schedule O (Form 990) 2021 Page **2**

Name of the organization AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC.

Employer identification number 13-6213516

REVIEWS COMPENSATION STUDIES AND COMPARABLE COMPENSATION DATA FOR

FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS. EACH

COMMITTEE CONTEMPORANEOUSLY DOCUMENTS AND RECORDS, IN ITS MINUTES, ITS

DELIBERATIONS AND DECISIONS. NO ACLU OFFICER RECEIVES COMPENSATION IN

HIS/HER CAPACITY AS AN OFFICER.

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

AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NV

NY, OH, OK, OR, PA, RI, SC, TN, UT, WA, WI, WV

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

THE ORGANIZATION'S FORM 990, FOR THE PAST THREE OR MORE YEARS, EXCLUDING SCHEDULE B, IS AVAILABLE ON THE ORGANIZATION'S WEBSITE. COPIES OF THE ORGANIZATION'S FORM 990 ARE ALSO AVAILABLE ON THE GUIDESTAR WEBSITE. THE ORGANIZATION'S IRS FORM 1023, BYLAWS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS FOR THE PRIOR THREE OR MORE YEARS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE. THE ORGANIZATION'S ARTICLES OF INCORPORATION ARE AVAILABLE UPON REQUEST OR THROUGH THE NEW YORK OFFICE OF THE SECRETARY OF STATE.

FORM 990, PART VII, SECTION A, LINE 1A, COLUMN B:

THE NUMBER OF HOURS REPORTED FOR THOSE INDIVIDUALS RECEIVING

COMPENSATION IS BASED ON WEEKLY HOURS FOR PAYROLL PURPOSES. THE ACTUAL

NUMBER OF HOURS WORKED IS CONSIDERABLY HIGHER.

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

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS

-212,381.

SCHEDULE R (Form 990)

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC.

Employer identification number 13-6213516

OMB No. 1545-0047

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
915 15TH STREET, LLC - 13-6213516					AMERICAN CIVIL
915 15TH STREET NW					LIBERTIES UNION
WASHINGTON, DC 20005	REAL ESTATE HOLDING COMPANY	DISTRICT OF COLUMBIA	888,133.	7,355,765.	FOUNDATION, INC.

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	contr	g) 512(b)(13) rolled tity?
	DESCRIPTION AND DESCRIPTION			501(c)(3))		Yes	No
AMERICAN CIVIL LIBERTIES UNION, INC	PRESERVATION AND PROMOTION						
13-3871360, 125 BROAD STREET, 18TH FLOOR, NEW YORK, NY 10004	OF CIVIL RIGHTS AND LIBERTIES	DISTRICT OF COLUMBIA	501(C)(4)		N/A		X
RBSO, INC 04-3730759	DIDEKTIES	DISTRICT OF COHOMBIA	501(0)(4)		N/A		
125 BROAD STREET, 18TH FLOOR	1						
NEW YORK, NY 10004	SUPPORTING ORGANIZATION	DELAWARE	501(C)(3)	LINE 12B, II	N/A		X
	4						
	-						

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

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(i	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag partne	or Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes I	lo

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	512(l conti	(i) ction (b)(13) trolled tity?
		country)		Of trusty		assets		Yes	No
		3.7						77	
CHARITABLE REMAINDER TRUST	CHARITABLE TRUST	AL	ACLUF					Х	-
CHARITABLE REMAINDER TRUST	CHARITABLE TRUST	GA	ACLUF					Х	
CHARITABLE REMAINDER TRUSTS (2)	CHARITABLE TRUST	MA	ACLUF					Х	
		3. T						37	
CHARITABLE REMAINDER TRUST	CHARITABLE TRUST	NJ	ACLUF					Х	-
CHARITABLE REMAINDER TRUST	CHARITABLE TRUST	NM	ACLUF					х	

Part IV Continuation of Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	(i) ction (b)(13) trolled tity?
		Country						Yes	No
CHARITABLE REMAINDER TRUSTS (4)	CHARITABLE TRUST	NY	ACLUF					х	

X

Yes No

Schedule R (Form 990) 2021

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

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

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?

а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entit	:y			1a		X		
	Gift, grant, or capital contribution to related organization(s)				1b		X		
	Gift, grant, or capital contribution from related organization(s)				1c		X		
d	Loans or loan guarantees to or for related organization(s)				1d		X		
е	Loans or loan guarantees by related organization(s)				1e		X		
f	Dividends from related organization(s)				1f		X		
g	Sale of assets to related organization(s)				1g		X		
h	Purchase of assets from related organization(s)				1h		X		
	Exchange of assets with related organization(s)				1i		X		
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		X		
_							37		
	Lease of facilities, equipment, or other assets from related organization(s)				1k 1l		X		
	Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s)								
1 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									
 n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) 									
0	Sharing of paid employees with related organization(s)				10	Х			
_	Reimbursement paid to related organization(s) for expenses				1p		Х		
	Reimbursement paid by related organization(s) for expenses				1q	Х	-21		
ч	Treimbursement paid by related organization(s) for expenses				14				
r	Other transfer of cash or property to related organization(s)				1r		Х		
	Other transfer of cash or property from related organization(s)				1s		X		
	If the answer to any of the above is "Yes," see the instructions for information on w								
	•	(b)	(c)	(d)					
	(a) Name of related organization	Transaction	Amount involved	Method of determining amount in	volved				
		type (a-s)							
(1) Z	MERICAN CIVIL LIBERTIES UNION, INC.	N	1,269,851.FT	TE BASED ALLOCATION MET	CHOD	DLOC	FY_		
(2) P	MERICAN CIVIL LIBERTIES UNION, INC.	0	11,369,286.RE	EVENUE BASED ALLOCATION	1 ME	гног)		
_		_							
(3) P	MERICAN CIVIL LIBERTIES UNION, INC.	Q	10,245,673.FT	TE BASED ALLOCATION MET	THOD	OLOC	3Y		
(4)									
(5)									

13-6213516

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

(a)	(b)	(c)	(d) (d)	e) (f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	reactions 512-514) (d) (in Arrival A		Share of end-of-year assets	Disproportionate allocations Yes No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner? Yes No	Percentage ownership

AMERICAN CIVIL LIBERTIES UNION FOUNDATION INC

Schedule R Part VII	(Form 990) 2021 Supplemental Infor	FOUNDATION,	INC.	13-6213516	Page 5
			estions on Schedule R. See instructions.		

132165 11-17-21 Schedule R (Form 990) 2021