Form	99	0
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Department of the Treasury

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.

Open to Public Inspection

OMB No. 1545-0047 2022

inte			-						011.			
				year, or tax year b	eginning	, 2022,	, and endi	ng			, 20	
В	Check	if applicable:	С						D Employ	er iden	tification number	
	A	ddress change		eedom Church							1198	
	N	ame change	79	41 Katy Free	eway #734				E Telepho	ne nun	nber	
	In	nitial return	НО	uston, TX 7	/024				231	8817	464	
	Fi	nal return/terminated										
	A	mended return							G Gross re	eceipts	\$ 37	3,116.
	A	pplication pending	F	Name and address of pr	incipal officer:			H(a) Is this	a group retur	n for su		es X No
			Sa	me As C Abo	ve			H(b) Are al	l subordinates ," attach a list.	include	ed? Ye	es No
T	Tax	-exempt status:	· · · · ·	501(c)(3) 501(c		4947(a)(1) or	527	IT INO,	," attach a list.	. See In	istructions.	
J					challiance.org			H(c) Group	exemption nu	umber		
κ	Forn	n of organization:		Corporation Trust	Association Other	L`	Year of forma		-		legal domicile:	Ϋ́
	art I	Summar				I			•			
	1	Briefly descri	be t	he organization's r	mission or most significar	nt activities:Emr	oowerin	ig a ne	twork	of d	churches	and
-					human traffick:							
ũ												
rna												
Activities & Governance	2	Check this bo		if the organiz	zation discontinued its op	erations or disp	osed of m	ore than 2	25% of its	net a	ssets.	
ğ	3				governing body (Part VI, I					3		4
ა ა	4				nbers of the governing bo					4		4
itie	5				ed in calendar year 2022					5		2
÷	6			•	te if necessary)					6		10
Ă					rom Part VIII, column (C),					7a		0.
	b	Net unrelated	ישמ נ	siness taxable inco	ome from Form 990-T, Pa	rt I, line I I				7b		0.
		Contributions		d grapta (Dart)/III	line 1h)				Prior Year	20	Current	
e	8 9				line 1h)				384,3	538.	37	3,116.
Revenue	10	-			nn (A), lines 3, 4, and 7d							
Re	11			-	A), lines 5, 6d, 8c, 9c, 10c							
_	12				h 11 (must equal Part VII				384,3	138	37	3,116.
	13			-	Part IX, column (A), lines				131,4			5,100.
	14				art IX, column (A), line 4)				131,4	50.	1/	5,100.
	15				loyee benefits (Part IX, co				70,1	52	0	9,319.
es	160				IX, column (A), line 11e)				70,1	.JZ.	0	9,319.
Expenses	16a			0 (_		_
Å	b		al fundraising expenses (Part IX, column (D), line 25)									
	17								43,5			3,087.
	18	•		•	nust equal Part IX, column				245,1			7,506.
	19	Revenue less	s exp	benses. Subtract li	ne 18 from line 12				139,1			4,390.
a or	~	T . 1 . 1 . 1 . 1 . 1 .	/D					Beginni	ng of Curren			
sset 3alai	20							· ·	186,7		8	0,205.
Net Assets or Fund Balances	21			-					2,8			649.
					act line 21 from line 20	<u>.</u>			183,9	946.	7	9,556.
Pa	art II	Signatur	'е В	lock								
Und com	er pena plete. D	Ities of perjury, I de Declaration of prepa	eclare arer (d	that I have examined th	is return, including accompanying ed on all information of which prep	schedules and state	ments, and to	the best of r	ny knowledge	and be	lief, it is true, corr	ect, and
					F							
~'		Signature of	office	er				Date				
Sign Here							-					
пе	re	Type or prin		Freyhof			1	Directo	or			
		Print/Type p			Preparer's signature		Date				PTIN	
-					. 5	-	Date		Check	if		- 7
Pa		Lee Ar			Lee Ann Kroo				self-employe	ed	P0169065	1
Pr	epar e Or				Streets Advisory		ТТС				1 4 0 1 0 0 -	
US	e or	IIY Firm's addr	ess	110 Cypres	ss Station Drive	, Stel28			Firm's EIN	- 83	-1421931	

May the IRS discuss this return with the preparer shown above? See instructions . BAA For Paperwork Reduction Act Notice, see the separate instructions.

Houston, TX 77090

Phone no.

No

713-516-5702

X Yes

	m 990 (2022) Freedom Church Alliance	46-3864198	Page 2
Par	art III Statement of Program Service Accomplishments		
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission:		
1	Empowering a network of churches and organizations to	o fight human trafficking.	
2	Did the organization undertake any significant program services during the year which were Form 990 or 990-EZ?	· · · · · · · · · · · · · · · · · · ·	No
	If "Yes," describe these new services on Schedule O.	Yes X	No
3	Did the organization cease conducting, or make significant changes in how it conducting	ts, any program services?	No
	If "Yes," describe these changes on Schedule O.		-
4		rgest program services, as measured by exp	enses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of g and revenue, if any, for each program service reported.	rants and anocations to others, the total expe	enses,
4a	a (Code:) (Expenses \$ 458,851. including grants of \$)
	The Freedom Church Alliance exists to engage the Church		Lve
	body to make a greater impact in the anti-human traff charitable donations to organizations whose purpose		
	trafficking.		
4b	b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
	A Other program convises (Describe on Schedule O.)		
40	d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
4e	e Total program service expenses 458,851.	, (1010100 T)	
RAA		Form 99	0 (2022)

Form 990 (2022)Freedom Church AlliancePart IVChecklist of Required Schedules

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	·		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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		Х
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	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
b	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Х
d	I 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
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	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
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
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		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

 Form 990 (2022)
 Freedom Church Alliance

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>	22		Х
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? <i>If "Yes," complete Schedule J</i> .	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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? <i>If "Yes," complete Schedule L, Part I</i> .	25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 6		162	
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10	X	

46-3864198

BAA

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Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No			
•			165	NO			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, 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				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х			
b	If "Yes," enter the name of the foreign country						
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	-		X			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		X			
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	50 50					
		30					
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х			
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b					
	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			X			
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	70		<u> </u>			
	Form 8282?	7c		Х			
	If "Yes," indicate the number of Forms 8282 filed during the year						
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X			
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х			
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h					
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring						
	organization have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.						
	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					
	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						
	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders						
	Gross income from members or shareholders. 11a Gross income from other sources. (Do not net amounts due or paid to other sources) 11a						
U	against amounts due or received from them.)						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b						
	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	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						
	Enter the amount of reserves on hand	14		X			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a					
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		—			
13	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х			
16	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X			
	If "Yes," complete Form 4720, Schedule O.						
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17					
BAA	TEEA0105L 09/01/22	Form	990	(2022)			

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. Х

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 4 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.			
	Enter the number of voting members included on line 1a, above, who are independent 1b 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	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? <i>If "Yes," provide the names and addresses on Schedule O</i>	9		Х
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Re	eveni	ie Co	ode.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11-	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O	Πü		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
	• Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c		
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	
b	Other officers or key employees of the organizationSee Schedule. O	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 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	1.01		
<u> </u>	organization's exempt status with respect to such arrangements?	16b		L
<u>Sec</u> 17	List the states with which a copy of this Form 990 is required to be filed None			
		1(2)		
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 50 available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Image: Check all that apply.) (C)(C	95 UN	iy)
40		L		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements availate the public during the tax year. See Schedule O	of 910		

State the name, address, and telephone number of the person who possesses the organization's books and records. 20

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Form 990 (2022) Freedom Church Alliance	46-3864198	Page 7							
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest C Independent Contractors	ompensated Employe	es, and							
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 wit organization's tax year.	h or within the								
 List all of the organization's current officers, directors, trustees (whether individuals or organization) 	s), regardless of amount of								

compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

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

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

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

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

		(C)								
(A) Name and title	(B) Average hours per	thar	n one s both dire	n (do not check r ne box, unless pe oth an officer and director/trustee)			on	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee		the organization (W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) Leigh Kohler	_ <u>25</u>								0	0
President	0	Х		Х				0.	0.	0.
_ <u>(2)</u> <u>Echo_Green</u> Director	<u>5</u> 0	Х		Х				0.	0.	0.
(3) Joe Lee	5									
Director	0	Х						0.	0.	0.
(4) Pete Ramirez	5									
Treasurer	0	Х						0.	0.	0.
(6)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
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		022) Freedom Church Alliance								46-3864198	
Pa	rt VII	Section A. Officers, Directors, Tr	ustees,	Key	Emj	plo	yees	s, and	d Highest Com	pensated Emp	oyees (continued)
		(A) Name and title	(B) Average hours per week (list any hours for related organiza - tions below dotted line)	box,	unles: er and	s per: La di	tion nore th son is l rector/t	e a e Former abtrist Highest compensated	(D) Reportable compensation from the organization (W-2/1099- MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-271099- MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(15)											
(16)											
(17)											
(18)											
(19)				•							
(20)											
(21)											
(22)											
(23)											
(24)											
(25)											
		tal							0.	0.	0.
		rom continuation sheets to Part VII, Section							0.	0.	0.
		add lines 1b and 1c).							0.	0.	0.
2		umber of individuals (including but not limited ne organization 0	to those	Isted	above	e) w	no reo	ceived	more than \$100,00	of reportable comp	
3		e organization list any former officer, direc a 1a? If "Yes,"complete Schedule J for suc									Yes No 3 X
4	For an the org	y individual listed on line 1a, is the sum o anization and related organizations great ndividual	f reportab er than \$1	le cor 50,00	nper)0? /:	nsati f "Yo	ion ai es," c	nd oth comple	er compensation ete Schedule J for	from	. 4 X
5		y person listed on line 1a receive or accruving vices rendered to the organization? If "Ye	ie comper s," compl	nsatio ete So	n fro ched	m a ule .	ny ur J for	nrelate <i>such p</i>	d organization or	individual	5 X
Sec		Independent Contractors								¢100.000 (
1		ete this table for your five highest comper nsation from the organization. Report comper									
		(A) Name and business add	lress						(B) Description	of services	(C) Compensation
2		umber of independent contractors (including 000 of compensation from the organization		ited to	o thos	se lis	sted a	ibove)	who received more	than	

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		Check if Schedule O contains a	a respo	onse or note to any	v line in this Part VI	11		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
হ হ	1a	Federated campaigns	1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues	1b					
An S	С	Fundraising events.	1c					
fiar Gi		Related organizations	1d					
Sin's		Government grants (contributions) All other contributions, gifts, grants, and	1e					
iti a		similar amounts not included above	1f	373,116.				
di b te		Noncash contributions included in						
and		lines 1a-1f	1g		272 116			
				Business Code	373,116.			
Program Service Revenue	2a							
Rev	b	,						
ice	С							
Serv	d							
Ĕ	е							
ogra	f	All other program service revenue						
<u>r</u>	g							
	3	Investment income (including divide other similar amounts)	ends, int	terest, and				
	4	Income from investment of tax-ex						
	5	Royalties	•					
		(i) Re	eal	(ii) Personal				
	6a	Gross rents 6a						
		Less: rental expenses 6b						
		Rental income or (loss) 6c						
	d	()						
	7a	Gross amount from (i) Secur	rities	(ii) Other				
		other than inventory /a						
	b	Less: cost or other basis and sales expenses 7b						
	с	Gain or (loss) 7c						
		Net gain or (loss)						
Û	8a	Gross income from fundraising events						
ň		(not including \$	_					
eve		of contributions reported on line 1c).						
Ĕ		See Part IV, line 18	8a					
Other Revenue		Less: direct expenses	8b	(anta				
0		Net income or (loss) from fundrai	ising e\	·ciila				
	9a	Gross income from gaming activities. See Part IV, line 19	9a					
	b	Less: direct expenses	9b					
	с	Net income or (loss) from gaming	g activi	ties				
	10a	Gross sales of inventory, less						
		returns and allowances	10a					
		Less: cost of goods sold	10b	<u> </u>				
	С	Net income or (loss) from sales o	of inver	tory				
SIL	11-			DUSITIESS CODE				
Miscellaneous Revenue	11a b c d							
ella Ver	c							
Re	d	All other revenue						
Σ		Total. Add lines 11a-11d		· · · · · · · · · · · · · · · · · · ·				
	12	Total revenue. See instructions			373,116.	0.	0.	0.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX

Sec	<i>tion 501(c)(3) and 501(c)(4) organizations must com</i> Check if Schedule O contains a re				
		esponse or note to any (A)	(B)	(C)	(D)
Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	175,100.	175,100.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and for- eign 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	0.	0.	0.	0.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	82,520.	82,520.		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	02,020.	02,320.		
9	Other employee benefits				
10	Payroll taxes	6,799.	6,799.		
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
	Accounting	19,205.	550.	18,655.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)	45,988.	45,988.		
12	Advertising and promotion.	440.	440.		
13	Office expenses	1,801.	1,801.		
14	Information technology	18,265.	18,265.		
15	Royalties				
16	Occupancy	4,320.	4,320.		
17	Travel	3,612.	3,612.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	,	,		
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23		1,320.	1,320.		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.).				
а	Printing and Publications	96,522.	96,522.		
	Recognitions & Gifts	5,352.	5,352.		
c		5,189.	5,189.		
d		3,454.	3,454.		
e	All other expenses.	7,619.	7,619.		
	Total functional expenses. Add lines 1 through 24e	477,506.	458,851.	18,655.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720).	·			
	001 90-2 (AOU 900-720)				

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Part X Balance Sheet Check if Schedule O contains

	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	181,703.	1	75,048.
2	Savings and temporary cash investments.		2	•
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	5,079.	4	5,156
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 disgualified persons (as defined under		-	
ľ	section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
7	Notes and loans receivable, net.		7	
	Inventories for sale or use.		8	
8 8 9	Prepaid expenses and deferred charges.		9	
			5	
	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
Ł	Less: accumulated depreciation 10b		1 0 c	
11	Investments – publicly traded securities.		11	
12	Investments – other securities. See Part IV, line 11		12	
13	Investments – program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	1
16	Total assets. Add lines 1 through 15 (must equal line 33)	186,782.	16	80,205
17	Accounts payable and accrued expenses	2,836.	17	649
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
2 21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
21 22 21	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
23			23	
24	Unsecured notes and loans payable to unrelated third parties		24	
24	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.		25	
26	Total liabilities. Add lines 17 through 25.	2,836.	26	649
-	Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.	2,000.		045
27	Net assets without donor restrictions	183,946.	27	79,556.
28		105,940.	28	19,330
27 28 29 30 31 32 33	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.		20	
5 20	Capital stock or trust principal, or current funds		20	
29			29	
30	Paid-in or capital surplus, or land, building, or equipment fund.		30	
1 31	Retained earnings, endowment, accumulated income, or other funds	100 040	31	
32	Total net assets or fund balances	183,946.	32	79,556
2 33	Total liabilities and net assets/fund balances.	186,782.	33	80,205

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Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI.					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	37	73,1	16.	
2	Total expenses (must equal Part IX, column (A), line 25)	2	47	17,5	06.	
3	Revenue less expenses. Subtract line 2 from line 1	3)4,3		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4	18	33,9	46.	
5	Net unrealized gains (losses) on investments.	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.	
10		10	7	79,5	56.	
Par	t 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 reviewer separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	ed on a				
h	Were the organization's financial statements audited by an independent accountant?		. 2b		Х	
2	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:					
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			
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the l Guidance, 2 C.F.R Part 200, Subpart F?		. 3a		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required aud or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b			
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SCHEDULE A (Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-F7

OMB No. 1545-0047	
2022	

Department of the Treasury Internal Revenue Service			G	Go to www.irs.gov/Form990 for instructions and the latest information.								
Name of the organization								Employer ident				
Fre	ed		Alliance					46-3864				
Parl					organizations must				ruc	tions.		
The c	rga	7	•		(For lines 1 through 12,		2	,				
1					hurches described in sec	•	b)(1)(A)	i).				
2					tach Schedule E (Form							
3					nization described in sec							
4		A medical res name, city, a	-	tion operated in conj	unction with a hospital o	describe	d in sec	tion 170(b)(1)(A)(iii)	. Er	nter the hospital's		
5		An organizati section 170(b	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 7		-	te, or local gov	ernment or governme	ental unit described in s	ection 1	70(b)(1)	(A)(∨).				
/	Х			eceives a substantial p Complete Part II.)	part of its support from a	governm	ental un	t or from the general	pub	lic described		
8		A community	trust described	in section 170(b)(1)	(A)(vi). (Complete Part I	l.)						
9					ction 170(b)(1)(A)(ix) oper e (see instructions). Enter							
10		investment in	come and unre	y receives (1) more t exempt functions, sul lated business taxab 509(a)(2). (Complete	han 33-1/3% of its supp bject to certain exceptio le income (less section Part III.)	oort from ns; and 511 tax)	contrib (2) no r from b	utions, membership nore than 33-1/3% o usinesses acquired l	fee of its by t	es, and gross receipts s support from gross he organization after		
11		1			ely to test for public safe	ety. See	section	n 509(a)(4).				
12		An organizati or more publi	on organized and cly supported of	nd operated exclusive rganizations describe	ely for the benefit of, to ed in section 509(a)(1) o	perform	the fur n 509(a	ctions of, or to carry (2). See section 50	/ ou 9(a)	t the purposes of one (3). Check the box on		
		lines 12a thro	ough 12d that de	escribes the type of s	supporting organization	and com	nplete li	nes 12e, 12f, and 12	2g.			
а		organization(s	orting organizati) the power to re t IV, Sections /	gularly appoint or elec	ed, or controlled by its sup t a majority of the directo	ported o rs or trus	rganizat tees of	ion(s), typically by giv he supporting organiz	ving zatio	the supported n. You must		
b		management of	oporting organiz of the supporting te Part IV, Sect	organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), the supported organi	by ł zatio	naving control or on(s). You		
С		Type III function	onally integrated s) (see instructi	A supporting organiza ons). You must com	tion operated in connectio	n with, ar A. D. an	nd functi d E.	onally integrated with,	its s	supported		
d		functionally in	ntegrated. The c	organization generally	ganization operated in cor y must satisfy a distribu 1s A and D, and Part V.	nnection tion requ	with its s uiremen	supported organization t and an attentivene	n(s) Iss I	that is not requirement (see		
е		Check this bo	x if the organiz	ation received a writ	ten determination from	the IRS	that it is	a Type I, Type II, T	уре	III functionally		
	E r				supporting organization							
1				n about the supporte	d organization(s)							
		ame of supported of	-	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) I organizat in your g	ion listed overning	(v) Amount of monetar support (see instruction		(vi) Amount of other support (see instructions)		
						Yes	No					
(^)												
(A)						}						
(B)												
(C)												
(D)												
(E)												
Total												

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

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

Section A. Public Support

begi	ndar year (or fiscal year nning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	146,312.	236,809.	200,974.	384,338.	373,116.	1,341,549.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	146,312.	236,809.	200,974.	384,338.	373,116.	1,341,549.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.
6	Public support. Subtract line 5 from line 4						1,341,549.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	146,312.	236,809.	200,974.	384,338.	373,116.	1,341,549.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						0.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
	Total support. Add lines 7 through 10						1,341,549.
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	0.
13	First 5 years. If the Form 990 is organization, check this box and						
	tion C. Computation of Pul						
	Public support percentage for 20						100.00%
	Public support percentage from a					L1	100.00%
16a	33-1/3% support test-2022. If the and stop here. The organization	he organization di qualifies as a pub	d not check the b licly supported or	ox on line 13, and rganization	d line 14 is 33-1/3	% or more, check	this box
b	33-1/3% support test—2021. If the and stop here. The organization	e organization dic qualifies as a pul	I not check a box plicly supported o	on line 13 or 16a rganization	i, and line 15 is 3	3-1/3% or more, c	check this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	test, check this b	box and stop here	Explain in Part '	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-and I-circumstances te	nd-circumstances est. The organizat	test, check this t ion qualifies as a	box and stop here publicly supporte	. Explain in Part d organization	VI how the
18	Private foundation. If the organiz	zation did not che	ck a box on line 1	13, 16a, 16b, 17a,	, or 17b, check thi	s box and see ins	structions

Schedule A (Form 990) 2022

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.)

Sec	tion A. Public Support						
Calen 1	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support			-			
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 11	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is organization, check this box and	stop here					
-	tion C. Computation of Pu		-	10 1 (0			0
	Public support percentage for 20						00 0
-	Public support percentage from						010
Sec	tion D. Computation of Inv						
17	Investment income percentage f			-			010
18	Investment income percentage f						olo
19a	33-1/3% support tests—2022. If is not more than 33-1/3%, check						
b	33-1/3% support tests—2021. If t line 18 is not more than 33-1/3%	the organization o	lid not check a bo	ox on line 14 or li	ne 19a, and line 1	6 is more than 33	-1/3%, and
20	Private foundation. If the organi	zation did not che	eck a box on line	14, 19a, or 19b, o	check this box and	d see instructions.	

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 Part IV
 Supporting Organizations

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

Section A. All Supporting Organizations

			Vee	Ma
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was			
	described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
Ł	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	-		
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
		ти		
Ł	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled			
	or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under			
	sections $501(c)(3)$ and $509(a)(1)$ or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
_				
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the			
	supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the			
	authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
Ł	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
	Substitutions only. Was the substitution the result of an event beyond the organization's control?	50 50		
		50		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of			
	the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes,"	0		
	complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?			
	If "Yes," provide detail in Part VI.	9a		
Ł	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the			
	supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
C	: Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9с		
10		50		
102	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.	1 0 a		
Ł	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Freedom Church Alliance

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Yes

1

2

No

Par	IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below,				
	the governing body of a supported organization?			
b	b A family member of a person described on line 11a above?			
c	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		

Section B. Type I Supporting Organizations

- 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 had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*

Section C. Type II Supporting Organizations

 Yes
 No

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported** organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

2a

2b

3a

Yes

No

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Section	on A – Adjusted Net Income		(A) Prior Year	(B) Current Year
Jecu				(optional)
	let short-term capital gain	1		
2 F	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		
i	Portion of operating expenses paid or incurred for production or collection of gross norme or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 (Other expenses (see instructions)	7		
84	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section	on B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 / t	Aggregate fair market value of all non-exempt-use assets (see instructions for short ax year or assets held for part of year):			
a /	Average monthly value of securities	1a		
b /	Average monthly cash balances	1b		
сF	air market value of other non-exempt-use assets	1c		
d 1	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors explain in detail in Part VI):			
2 /	Acquisition indebtedness applicable to non-exempt-use assets	2		
3 S	Subtract line 2 from line 1d.	3		
	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 N	let value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 N	/lultiply line 5 by 0.035.	6		
7 F	Recoveries of prior-year distributions	7		
8 N	flinimum Asset Amount (add line 7 to line 6)	8		
Section	on C – Distributable Amount			Current Year
1 /	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 E	Enter 0.85 of line 1.	2		
	Iinimum asset amount for prior year (from Section B, line 8, column A)	3		
4 E	Enter greater of line 2 or line 3.	4		
5	ncome tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency emporary reduction (see instructions).	6		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). 7

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Schedule A (Form 990) 2022

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Su	apporting Organiza	ations (continue	ed)	1100
	tion D – Distributions		•		Current Year
1	Amounts paid to supported organizations to accomplish exempt pu		1		
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	IS,	2		
3	Administrative expenses paid to accomplish exempt purposes of su	upported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - provide	e details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organizati in Part VI). See instructions.	on is responsive (provide	e details	8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2022	ons	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required – <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2022				
	From 2017				
-	• From 2018				
	From 2019				
	From 2020				
•	e From 2021				
	f Total of lines 3a through 3e				
ç	Applied to underdistributions of prior years				
ŀ	Applied to 2022 distributable amount				
	i Carryover from 2017 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D, line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
	Excess from 2019				
C	Excess from 2020				
	Excess from 2021				
e	Excess from 2022				

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Schedule A (Form 990) 2022

Schedule A (For	rm 990) 2022	Freedom Church	Alliance	46-3864198	Page 8
Part VI	B, lines 1 and 2; 3a, and 3b; Part	Part IV, Section C, line 1; Part	IV, Section D, lines 2 and 3; e 1e; Part V, Section D, lines	rt II, line 10; Part II, line 17a or 17b; Part a, 11b, and 11c; Part IV, Section Part IV, Section E, lines 1c, 2a, 2b, 5, 6, and 8; and Part V, Section E, e instructions.)	

SCHEDULE I (Form 990)		Grants and Other Assistance to Organizations, Governments, and Individuals in the United States						
	Complet	te if the organizat	on answered "Yes" on I	orm 990, Part IV, line	21 or 22.		2022	
Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.							Open to Public Inspection	
Name of the organization						Employer identifie	cation number	
Freedom Church Alliance						46-386419	98	
Part I General Information or								
 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 							X Yes No	
				• • •		Part IV	/ II	
Part II Grants and Other Assi Form 990, Part IV, line								
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	
(1) The Landing								
9894 Bissonnet St, 605							Prograam	
Houston, TX 77036	47-4507618		15,600.	0.			Support	
(2) Street Grace								
11612 Memorial Drive								
Houston, TX 77024	26-4335907		100,000.	0.			Program Support	
(3) Refuge for Women								
<u>342_WALLER_AVENUE, SUITE_D</u>								
Lexington, KY 40504	26-4388243		12,000.	0.			Program Support	
(4) Houston Legal Aid								
P.O. Box 2738			10 500	0.			Dura marta Comma arta	
Cypress, TX 77410 (5) Demand Disruption	81-1013533		12,500.	0.			Program Support	
3435 Sheldon Dr								
Pearland, TX 77584			20,000.	0.			Program Support	
(6) Hands of Justice			20,000.	0.				
2415 Springwood Glen Ln								
Conroe, TX 77304	82-2379372		15,000.	0.			Program Support	
(7)								
(8)								
2 Enter total number of section 50	1(c)(3) and government or	ganizations listed	in the line 1 table				<u> </u>	
3 Enter total number of other organ	.,.,	•					1	

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

46-3864198

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance		
1							
2							
3							
4							
5							
6							
7							
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.							

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.

Freedom Church Alliance provides assistance to partner organizations to support

activities to aid victims and combat human trafficking.

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

2022

OMB No. 1545-0047

Open to Public Inspection

Freedom Church Alliance

46-3864198

Form 990, Part VI, Line 11b - Form 990 Review Process

The Form 990 will be emailed to the governing body for review.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

The compensation of key employees is reviewed and approved by the governing body

during the budget approval process.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.