## 990 **990**

## **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service 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

Α	For the	2022 calend	dar year, or tax year beginning	, <b>2022</b> , and end	ling	_	, 20		
В	Check if	applicable:	C Name of organization Free t	he Oppressed		D Empl	oyer identification number		
	Address	change	Doing business as Free Bu	rma Rangers		47-4	648581		
	Name ch	nange	Number and street (or P.O. box if	mail is not delivered to street address)	Room/suite	E Telepl	hone number		
	Initial ret	urn	PO Box 60972			(907	720-8900		
	Final retu	ırn/terminated	City or town, state or province, co	ountry, and ZIP or foreign postal code					
	Amende	d return	Colorado Springs,	CO 80960		<b>G</b> Gross	receipts \$6,980,005.		
		ion pending	F Name and address of principal offi	cer:	H(a) Is this a	roup return fo	or subordinates? Yes X No		
		, ,	Wes Price, PO Box 609	972, Colorado Springs, CO 80	960 <b>H(b)</b> Are all	subordinat	es included? Yes No		
ī	Tax-exe	mpt status:	▼ 501(c)(3)	) (insert no.) 4947(a)(1) or 527			st. See instructions.		
J	Website	: www.f	to.org		H(c) Group	exemption	number		
K	Form of o	organization:		tion Other L Year of for	mation: 2015	M State	of legal domicile: CO		
Р	art I	Summa	ry						
	1			on or most significant activities: To b	ring help, h	ope and	l love to people of		
é				iflict areas, to shine a light on th					
ano				and organizations committe					
ern	2			scontinued its operations or disposed					
Activities & Governance	3		_	rning body (Part VI, line 1a)		3	11		
<u>«</u>	4			s of the governing body (Part VI, line 1		4	9		
ies	5		-	calendar year 2022 (Part V, line 2a)	•	5	1		
Ĭζ	6			necessary)		6	800		
Act	7a			Part VIII, column (C), line 12		7a	0.		
	b			from Form 990-T, Part I, line 11		7b	0.		
	1				Prior Ye		Current Year		
4	8	Contributio	ons and grants (Part VIII, line	1h)	8,925	. 917	6,924,799.		
nue	9		ervice revenue (Part VIII, line 2		0,523	7517.	0/321/733.		
Revenue	10	•	•	), lines 3, 4, and 7d)	28	,173.	-83.		
æ	11			es 5, 6d, 8c, 9c, 10c, and 11e)		,635.	55,289.		
	12			nust equal Part VIII, column (A), line 12)			6,980,005.		
_	13	-		K, column (A), lines 1–3)		,000.	224,805.		
	14			(, column (A), line 4)	120	,000.	224,003.		
"	15	-		penefits (Part IX, column (A), lines 5–10)	124	,042.	154,390.		
Expenses	16a			olumn (A), line 11e)	124	,042.	154,570.		
ben	b		raising expenses (Part IX, colu						
$\overline{\mathbf{x}}$	17			es 11a–11d, 11f–24e)	4,947	975	6,775,621.		
	18	-		equal Part IX, column (A), line 25)	5,192		7,154,816.		
	19			8 from line 12			-174,811.		
- Se		Tiovorido io	as expenses. Castract into 10	0.110.111.111.0.12	Beginning of Cui		End of Year		
Net Assets or Fund Balances	20	Total asset	ts (Part X, line 16)		6,590		5,764,733.		
Ass Bal	21		ties (Part X, line 26)			,083.	46,971.		
Net S	22		or fund balances. Subtract li	ne 21 from line 20	6,550		5,717,762.		
	art II		re Block		7 3 3 0	7070.	3//1///02:		
				return, including accompanying schedules and s	tatements, and to the	ne best of	my knowledge and belief it is		
				officer) is based on all information of which prep			yomoago ana zonon, n io		
_		MA			1.	1/15/2	0033		
Sig	an	Signature of	officer		L±.		.023		
	ere		Price, Treasurer						
			name and title						
_		1 71	preparer's name	Preparer's signature	Date	Ch!	if PTIN		
Pa		Mighae	el J Vredeveld		11/15/2023	Check self-em	∟ "		
	epare	er <del>-                                    </del>		IED IIC	11/13/2023				
Us	se Onl	Firm's nar					41-2208930		
1/10	v tha IE	Firm's add		NW, GRAND RAPIDS, MI 4953	4 Phor	ie 110. (6	16) 460-9388		

Page **2** 

Part	
4	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	To bring help, hope and love to people of
	all faiths and ethnicities in the conflict areas, to shine a light on the actions of oppressors, to stand with the
	oppressed and support leaders and organizations committed to liberty, justice and service.
2	Did the organization undertake any significant program services during the year which were not listed on the
2	
2	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?
	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.
	(O
4a	(Code: ) (Expenses \$ 4,450,271. including grants of \$ 0.) (Revenue \$ 0.)
	Burma Ministries - We have over 140 multi-ethnic Free Burma Ranger relief teams serving in
	the conflict areas of Burma. We are providing assistance all over Burma and
	the teams are doing a wonderful job, bravely and humbly. They are not led
	by comfort, fear, or pride, but by love and the opportunities God gives them.
	This report uses the July 2022 Karenni mission as an example of how you
	are helping us help those in need all over Burma. Along with our role of
	sharing God's love, we give material assistance to people in need. We have
	been able to help with treating wounded, transporting wounded for more
	advanced care, providing plastic tarps for shelter for those in hiding, as well
	as school supplies, blankets, rice, stipends for teachers, ambulances and
	See Part III, Ln 4a statement
	bee rait iii, iii ta statement
4b	(Code:) (Expenses \$ _1,191,786. including grants of \$0.) (Revenue \$0.)
	Middle East Ministries - I learned to ask God for everything. And then after you ask God, you may
	ask your friends for help and see what happens. But trust God Abdul
	Sattar, a teacher at a frontline school near Manbij in northeast Syria.
	Because of these prayers, a school building and new toilets have been built
	at his school, which continues to be within range of enemy machine gun and
	mortar fire. In spite of the frequent attacks, Abdul Sattar, the teachers,
	parents, and the children keep the school open. Since the Turkish invasion
	of 2019, their school in Dadat, north of Manbij, has become a front line with
	the proxy forces of the Turks and the Turks themselves just across the Sajur
	River to the north.
	Continued on note in Additional Information section
4c	(Code:) (Expenses \$903,085. including grants of \$0.) (Revenue \$0.)
	Thailand Ministries Chaplaincy: "I have a darkness in my heart that I cannot get rid of,"
	shared a student with one of the chaplains during training. "It is a burden I
	have carried since before I can remember." "Do you want to be free of this
	burden? Only Jesus can remove this burden from you, " the chaplain
	responded. "I am not sure He can take this burden. It is too deep. I am not
	sure I even want to give it to up, " replied the student. "Pray," the chaplain
	replied. "Ask Jesus to give you the courage. Only He can do this." Over the
	next few weeks this student progressively shared more about the burden he
	was carrying. He hated ethnically Burman people. He had watched over his
	25+ years of life the atrocities committed against his Karen people by the
	Burma Army. Continued on note in Additional Information section
A al	Other program conject (Describe on Schodule O.)
40	Other program services (Describe on Schedule O.)
	(Expenses \$ 194,050. including grants of \$ 0.) (Revenue \$ 0.)
4e	Total program service expenses 6,739,192.

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	90 (2022)		F	Page
Part	IV Checklist of Required Schedules		-	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
-	complete Schedule A	1	×	
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I </i>	2	×	
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	3		×
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		×
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		×
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		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		×
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? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		×
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		×
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	×	
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		×
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		×
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		×
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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)? <i>If "Yes," complete Schedule D, Part X</i>	11e		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	×	
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		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a b	Did the organization maintain an office, employees, or agents outside of the United States? 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	14a 14b	×	
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	×	
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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16	×	
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		×
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		×
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		×
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

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 . . . . .

Part	IV Checklist of Required Schedules (continued)		-	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	×	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	×	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	04-		
<b>h</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		×
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a		25a		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		×
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	×	
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
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</i> "Yes," complete Schedule L, Part IV	28a		×
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		×
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	×	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	×	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
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		×
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? <i>If "Yes," complete Schedule R, Part I</i>	33		×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
0-	or IV, and Part V, line 1	34		×
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		×
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		×
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	×	
Part				<u> </u>
	The state of the s	<u> </u>	Yes	No
1a				
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 reportable gaming (gambling) winnings to prize winners?	10		

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	×	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i> .	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	×	
b	If "Yes," enter the name of the foreign country See Statement			
E0	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	F.o.		×
5a b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		×
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).	OD		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		×
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		×
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		
h 8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	/11		
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .    10b			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	,	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	120		
13	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.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	4.4		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u></u>
b 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O. Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	14b		
IJ	excess parachute payment(s) during the year?	15		×
	If "Yes," see the instructions and file Form 4720, Schedule N.	10		
16	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.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	See in	struc	tions.
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		×
Secti	on A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year		Yes	No
b 2	Enter the number of voting members included on line 1a, above, who are independent .  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		×
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		×
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		×
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		×
6	Did the organization have members or stockholders?	6		×
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		<u></u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	76		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		×
		00		
a b	The governing body?	8a 8b	×	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	OD		
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		×
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode.)	
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		<u>×</u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	10b 11a	×	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	Ha		
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a	×	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	×	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done.	12c	×	
13	Did the organization have a written whistleblower policy?	13	×	
14	Did the organization have a written document retention and destruction policy?	14	×	
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	×	
b	Other officers or key employees of the organization	15b	×	
16a	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.  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		×
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		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed CO Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	Γ (sec	tion 5	501(c)
19	☑ Own website ☑ Another's website ☑ Upon request ☐ Other (explain on Schedule O)  Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of and financial statements available to the public during the tax year.			olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and reverse Price, PO Box 60972, Colorado Springs, CO 80960 (907)720-8900	cords.		

Form 990 (2022)

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

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

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

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

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

☐ 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.

Officer this box in ficturer the organization fic	,				C)			,	, , , , , , , , , , ,	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or directo	unles er and	eck s pe	erson	e than or is both or/trust Highest compensated	an	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Kiryn Trask	0.00									
Director, Asst. Treasurer		×		×				0.	0.	0.
(2) Gene Munn Director	0.00	×						0.	0.	0.
(3) Doug Yoder Director	0.00	×						0.	0.	0.
(4) Dave Boyce Director, Secretary	0.00	×		×				0.	0.	0.
(5) John Moore Director	0.00	×						0.	0.	0.
(6) Shannon Allison Director	0.00	×						0.	0.	0.
(7) Tom VanDyke Director	0.00	×						0.	0.	0.
(8) Dave Eubank Director, CEO	40.00	×		×				74,667.	0.	0.
(9) Wes Price Director, Treasurer	35.00	×		×				64,011.	0.	0.
(10) Bruce Woodall Director	0.00	×						0.	0.	0.
(11) Paul BradleyDirector	0.00	×						0.	0.	0.
(12) Hosannah Valentine Vice President	2.00			×				3,000.	0.	0.
(13) Jim Geisz Vice President	2.00			×				0.	0.	0.
(14) Karen Eubank Vice President	40.00			×				0.	0.	0.

Part	VII Section A. Officers, Directors,	Trustees,	Key I	Εm <sub>l</sub>	plo	yee	s, an	d F	lighest Compe	nsated Emp	oloye	es (contir	nued)
					(0	C)							
	(A)	(B)	(da 5	a. a. b		ition			(D)	(E)		(F)	
	Name and title	Average					e than is both		Reportable	Reportable		stimated am	ount
		hours per week	office	er and	d a d	irect	or/trus	tee)	compensation from the	compensation from related	1	of other compensati	on
		(list any	Ind or o	Ins	Officer	₹ e	Hig	For	organization (W-2/	organizations (W	-2/	from the	OH
		hours for	direc	litut	cer	/ em	hes	Former	1099-MISC/	1099-MISC/	- 1	organization	
		related organizations	ual t	ione		Key employee	ee co	,	1099-NEC)	1099-NEC)	reia	ated organiza	ations
		below	Individual trustee or director	ŧ		yee	npe						
		dotted line)	ee e	Institutional trustee			Highest compensated employee						
							ed				$\bot$		
	esse Cusic	40.00											
	ice President				×				7,000.		0.		0.
(16)			-										
(4.7)											+		
(17)			-										
(18)											+		
(10)			-										
(19)											+		
(10)		<del> </del>	1										
(20)											+		
3		<del> </del>											
(21)													
3													
(22)													
(23)													
(24)													
(25)													
											$\perp$		
1b	Subtotal								148,678.		0.		0.
С	Total from continuation sheets to Part	•		-	-			-	110 570				
d	<b>Total (add lines 1b and 1c)</b>								148,678.		0.		0.
_	reportable compensation from the organi		וו נט נו	1036	, 1131	eu	above	<i>5)</i> vv	no received moi	e man proo,c	00 01		
												Yes	No
3	Did the organization list any former	officer, dire	ector.	tru	iste	e. k	ev e	mpl	lovee or highes	st compensa	ed 📗		110
	employee on line 1a? If "Yes," complete							-				3	×
4	For any individual listed on line 1a, is the	sum of re	portal	ole (	con	npei	nsatio	n a	nd other compe	nsation from	the		
	organization and related organizations	greater th	an \$1	150,	,000	? /	f "Ye	s, "	complete Sched	dule J for su	ıch		
	individual										. [	4	×
5	Did any person listed on line 1a receive of						-		•	tion or individ	ual		
	for services rendered to the organization	? If "Yes," c	compl	ete	Sch	nedu	ule J i	for s	such person .			5 ×	
	on B. Independent Contractors												
1	Complete this table for your five high												
	compensation from the organization. Rep	ort compen	satior	n toi	r the	ca	lenda	r ye	ar ending with or	within the org	Janıza	tion's tax	year.
	(A)	luana							(B)		C = 10	(C)	
	Name and business add	II <del>U</del> SS							Description of sen	rices		npensation	
2	Total number of independent contractor	rs (includir	na bu	ıt n	ot I	limit	ted to	th	ose listed abov	e) who			
-	received more than \$100,000 of compens									, -			

## Part VIII Statement of Revenue

		Check if Schedule O contains a respon	nse or note to ar	ny line in this Pa	art VIII		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Ś, Ś	1a	Federated campaigns 1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues 1b					
ည် ရှိ	С	Fundraising events 1c					
fts,	d	Related organizations 1d					
ia gi	е	Government grants (contributions) 1e					
ns, Sim	f	All other contributions, gifts, grants,					
tio er (		and similar amounts not included above 1f	6,924,799.				
ğ Ě	g	Noncash contributions included in	, , , , , , , , , , , , , , , , , , , ,				
d tr		lines 1a–1f 1g	\$ 174,627.				
S E	h	Total. Add lines 1a–1f		6,924,799.			
			Business Code				
ce	2a						
e Z	b						
gram Ser Revenue	С						
am	d						
Program Service Revenue	е						
Pr	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
	3	Investment income (including dividend					
		other similar amounts)		-83.	0.	0.	-83.
	4	Income from investment of tax-exempt b	ond proceeds				
	5	Royalties		29,902.	0.	0.	29,902.
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	C	Rental income or (loss) 6c					
	_d	Net rental income or (loss)					
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets other than inventory 7a					
	<b>L</b>						
Revenue	D	Less: cost or other basis and sales expenses . <b>7b</b>					
Ver							
Re		Gain or (loss)					
Other	d						
₹	oa	Gross income from fundraising events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b					
	c	Net income or (loss) from fundraising even	ents				
		Gross income from gaming					
		activities. See Part IV, line 19 . 9a					
	b	Less: direct expenses 9b					
		Net income or (loss) from gaming activiti	es				
		Gross sales of inventory, less					
		returns and allowances 10a	1				
	b	Less: cost of goods sold 10b					
	С	Net income or (loss) from sales of invent	ory				
2			Business Code				
Miscellaneous Revenue	11a	Other	623990	25,387.	25,387.	0.	0.
scellaneo Revenue	b						
cel ev	С						
Mis F	d	All other revenue					
_		Total. Add lines 11a-11d		25,387.			
	12	Total revenue See instructions		6.980.005	25.387	0	29.819

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX . . . (B) Program service expenses **(D)** Fundraising Do not include amounts reported on lines 6b. 7b. (A) Total expenses Management and general expenses 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . 64,988. 64,988. Grants and other assistance to domestic 2 individuals. See Part IV, line 22 . . . . . 25,490. 25,490. Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 134,327. 134,327. Benefits paid to or for members . . . . 5 Compensation of current officers, directors, trustees, and key employees . . . . . 78,944. 69,734. 0. 148,678. 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits . . . . . . 9 10 Payroll taxes . . . . . . . . . . . . 5,712. 4,570. 1,142. 0. 11 Fees for services (nonemployees): Legal . . . . . . . . . . . . . . . . Accounting . . . . . . . . . . . . 8,583. 0. 8,583. 0. Lobbying . . . . . . . . . . . . Professional fundraising services. See Part IV, line 17 Investment management fees . . . . . Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) . 12 Advertising and promotion . . . . . 13 Office expenses . . . . . . . . 14 Information technology . . . . . . 0. 7,529. 0. 7,529. 15 Royalties . . . . . . . . . . . . Occupancy . . . . . . . . . . . . 0. 16 36,624. 19,593. 17,031. 232,340. 25,135. 17 207,205. 0. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 20 21 Payments to affiliates . . . . . . . 405,272. 5,201. 22 Depreciation, depletion, and amortization . 400,071. 0. 23 95,022. 92,499. 2,523. 0. 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) a Relief action 1,676,309. 1,676,309. 0. 0. 0. Stipends and support 1,027,200. 1,027,200. 0. 656,365. c Vehicles 643,856. 12,509. 0. Training relief teams 531,626. 531,626. 0. 0. All other expenses 2,098,751. 1,841,724. 210,520. 46,507. 25 **Total functional expenses.** Add lines 1 through 24e 7,154,816. 6,739,192. 369,117. 46,507. 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)

P	art X				
		Check if Schedule O contains a response or note to any line in this Par	(A) Beginning of year		
	1 2	Cash—non-interest-bearing	3,310,168.	1 2	2,482,677.
	3	Pledges and grants receivable, net		3	
	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		-	00.005
	6	Loans and other receivables from other disqualified persons (as defined		5	29,205.
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	48,571.	9	114,060.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 3,449,714.			
	b	Less: accumulated depreciation 10b 988,292.	2,089,317.	10c	2,461,422.
	11	Investments—publicly traded securities	1,139,897.	11	674,369.
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets	3,000.	14	3,000.
	15	Other assets. See Part IV, line 11	5 500 050	15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	6,590,953.	16	5,764,733.
	17 18	Accounts payable and accrued expenses	40,083.	17 18	46,971.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
iab		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X		24	
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	40,083.	26	46,971.
nces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
ala	27	Net assets without donor restrictions	5,221,172.	27	5,159,560.
d B	28	Net assets with donor restrictions	1,329,698.	28	558,202.
<b>Net Assets or Fund Balances</b>		Organizations that do not follow FASB ASC 958, check here 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	
As	31	Retained earnings, endowment, accumulated income, or other funds .		31	
<b>let</b>	32	Total net assets or fund balances	6,550,870.	32	5,717,762.
_	33	Total liabilities and net assets/fund balances	6,590,953.	33	5,764,733.

Form 990 (2022) Page **12** 

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				×
1	Total revenue (must equal Part VIII, column (A), line 12)	6	,98	0,0	05.
2	Total expenses (must equal Part IX, column (A), line 25)	7	,15	4,8	16.
3	Revenue less expenses. Subtract line 2 from line 1		-17	4,8	11.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4	6	,55	0,8	70.
5	Net unrealized gains (losses) on investments		-61	9,2	89.
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O) 9		-3	9,0	08.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	5	,71	7,7	62.
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				
			`	Yes	No
1	Accounting method used to prepare the Form 990:   Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain	on			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2	2a		×
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled	d or			
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	×	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited o	n a			
	separate basis, consolidated basis, or both:				
	▼ Separate basis  □ Consolidated basis □ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh	I			
	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 Schedule O.	on			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	I			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		За		×
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

REV 05/17/23 PRO Form **990** (2022)

Free the Oppressed 47-4648581 1

## Additional Information From Form 990: Return of Organization Exempt from Income Tax

Form 990: Return of Organization Exempt from Income Tax Form 990, Page 2, Part III, Line 4a (continued)

**Continuation Statement** 

Description
other vehicles, wells and water projects, and the rebuilding of damaged churches.
Continued on note in Additional Information section

# Form 990: Return of Organization Exempt from Income Tax Part V, Line 4b (continued)

**Continuation Statement** 

	Foreign Country	
IZ		
TH		

## SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

OMB No. 1545-0047

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.

Open to Public Inspection

Employer identification number Name of the organization 47-4648581 Free the Oppressed Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 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).) 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: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ 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.) 8 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 university: An organization that normally receives (1) more than 331/3% 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<sup>1</sup>/<sub>3</sub>% 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.) 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 12a, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. 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) d 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 III, 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). (iii) Type of organization (i) Name of supported organization (ii) EIN (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E) **Total** 

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) **(b)** 2019 (c) 2020 (d) 2021 (a) 2018 **(e)** 2022 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 2,452,318. 2,652,474. 3,970,759. 8,925,917. 6,924,799. 24,926,267. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . The value of services or facilities furnished by a governmental unit to the organization without charge . . . . **Total.** Add lines 1 through 3 4 2,452,318. 2,652,474. 3,970,759. 8,925,917. 6,924,799. 24,926,267. 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) . . . . 734,792. **Public support.** Subtract line 5 from line 4 24,191,475. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 7 2,452,318. 2,652,474. 3,970,759. 8,925,917. 6,924,799. 24,926,267. Amounts from line 4 . . . . . . Gross income from interest, dividends, 8 payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . . Net income from unrelated business 9 activities, whether or not the business is regularly carried on . . . . . . 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . . 50,588. 362. 461. 207. 24,171. 25,387. **Total support.** Add lines 7 through 10 11 24,976,855. Gross receipts from related activities, etc. (see instructions) . . . . . . . . . . . . . . . . . . 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) . . . . . 14 96.86% Public support percentage from 2021 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . 15 331/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 

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

## 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.)

Secti	on A. Public Support			, ,		,	
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the						
	organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
<u> </u>	line 6.)						
	on B. Total Support	( ) 0010	(1.) 0040	4 ) 0000	( 1) 0004	4 ) 0000	(O.T.)
	dar year (or fiscal year beginning in) Amounts from line 6	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	<b>(e)</b> 2022	(f) Total
9 10a	Amounts from line 6						
IUa	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	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	•						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the organization, check this box and stop he	•	•		•	ear as a sectio	. , , ,
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2022 (line 8						%
16	Public support percentage from 2021 Sch	nedule A, Part	III, line 15 .			16	%
Secti	on D. Computation of Investment In			_			
17	Investment income percentage for 2022 (			•	. ,,		%
18	Investment income percentage from 2021						%
19a	331/3% support tests—2022. If the organ						
	17 is not more than 331/3%, check this box		_	-		-	_
b	331/3% support tests—2021. If the organiz						
	line 18 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this l		_	=	-		_
20	Private foundation. If the organization di	d not check a	box on line 14.	, 19a, or 19b, (	check this box	and see instru	ctions .

#### 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.)

### Se

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

10b

determine whether the organization had excess business holdings.)

Part I	V Supporting Organizations (continued)			
			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		
С	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 <b>Part VI</b> .	11c		
Section	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Section	on 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on 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?			
0		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Section	on 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 in	netru	ctions	2)
a b c	<ul> <li>☐ The organization satisfied the Activities Test. Complete line 2 below.</li> <li>☐ The organization is the parent of each of its supported organizations. Complete line 3 below.</li> <li>☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (</li> </ul>			
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 <b>Part VI identify those supported organizations and explain</b> 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>ل</b>	·	24		
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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	6:		
_	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
	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? <i>If "Yes" or "No," provide details in <b>Part VI</b>.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b		

				9
Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jan	izations	
1	$\Box$ Check here if the organization satisfied the Integral Part Test as a qualifying	j tru	st on Nov. 20, 1970 (expla	ain in <b>Part VI</b> ). <b>See</b>
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sect	ions 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	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
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-functional (see instructions)	ally	integrated Type III suppor	ting organization

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 5 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 Distributable amount for 2022 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) **Underdistributions Distributable** Section E—Distribution Allocations (see instructions) **Excess Distributions** Pre-2022 Amount for 2022 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 **a** From 2017 . . . . . From 2018 **c** From 2019 **d** From 2020 From 2021 . . . . . Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2022 distributable amount Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2022 from 4 Section D, line 7: Applied to underdistributions of prior years Applied to 2022 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2023. Add lines 3j and 4c. Breakdown of line 7: Excess from 2018 . . . Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . .

Schedule A (Form 990) 2022 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) Pt II Ln 10: Other Income Part II, Line 10 Description: Other income 2018: 362. 2019: 461. 2020: 207. 2021: 24171. 2022: 25387.

## SCHEDULE D (Form 990)

## **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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

Fre	e the Oppressed		47-4648581
Par			
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets h	neld in donor advised
	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, ar	nd donor advisors in writing that gra	nt funds can be used
	only for charitable purposes and not for the benefi	t of the donor or donor advisor, or f	or any other purpose
	conferring impermissible private benefit?		· · · · · · · · · · · · · · · · · · ·
Par	Conservation Easements.		
ı aı	Complete if the organization answered "	Ves" on Form 990 Part IV line 7	
1	Purpose(s) of conservation easements held by the c		·
'	Preservation of land for public use (for example, recre		of a historically important land area
		•	of a certified historic structure
	Protection of natural habitat	☐ Preservation	of a certified historic structure
2	Preservation of open space Complete lines 2a through 2d if the organization hel	d a qualified concentration contribution	on in the form of a concervation
2	easement on the last day of the tax year.	d a quaimed conservation contribution	
			Held at the End of the Tax Year
a			
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified hi		
d	Number of conservation easements included in (c) a		
	_		
3	Number of conservation easements modified, trans	ferred, released, extinguished, or ter	rminated by the organization during the
	tax year		
4	Number of states where property subject to conserve		
5	Does the organization have a written policy reg		
	violations, and enforcement of the conservation eas		
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	ng conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting	g, handling of violations, and enforcing	conservation easements during the year
8	Does each conservation easement reported on line 2	2(d) above satisfy the requirements of	f section 170(h)(4)(B)(i)
9	In Part XIII, describe how the organization reports co		•
	balance sheet, and include, if applicable, the text of	S S	nancial statements that describes the
	organization's accounting for conservation easemen	nts.	
Part	III Organizations Maintaining Collections	of Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FAS	B ASC 958, not to report in its reven	nue statement and balance sheet works
	of art, historical treasures, or other similar assets	held for public exhibition, educatio	n, or research in furtherance of public
	service, provide in Part XIII the text of the footnote t	o its financial statements that descri	bes these items.
b	If the organization elected, as permitted under FAS	B ASC 958, to report in its revenue	statement and balance sheet works of
	art, historical treasures, or other similar assets held	·	
	provide the following amounts relating to these item		,
	(i) Revenue included on Form 990, Part VIII, line 1		<b>\$</b>
	(ii) Assets included in Form 990, Part X		φ
2	If the organization received or held works of art,		
_	following amounts required to be reported under FA		
a	Revenue included on Form 990, Part VIII, line 1 .		\$
b	Assets included in Form 990, Part X		\$

Part III Organ	nizations Maintaining	Collections of	Art, Hist	orical T	reasures,	or Ot	her Similar As	sets (co	ntinued)
	ganization's acquisition, ns (check all that apply):		ner recor	ds, chec	k any of the	follow	ring that make s	significant	use of its
a   Public exh	nibition		d	Loan	or exchange	e progr	am		
<b>b</b> Scholarly	research		е	Other					
c Preservati	on for future generations	3							
4 Provide a des	scription of the organiza	tion's collections a	and expla	in how tl	ney further t	the org	anization's exer	npt purpo	se in Part
	ear, did the organization								
	sold to raise funds rather		ined as p	art of the	organization	on's co	llection?	☐ Ye	s 🗌 No
	w and Custodial Arra lete if the organization		on For	n 990, F	Part IV, line	9, or	reported an ar	nount on	Form
	Part X, line 21.						•		
_	zation an agent, trustee form 990, Part X?			-				ot	s 🗆 No
<b>b</b> If "Yes," expl	ain the arrangement in P	art XIII and comple	ete the fo	llowina ta	able:				
,							Д	mount	
<b>c</b> Beginning ba	lance					1c			
	ing the year					1d			
	during the year					1e			
	ce					1f			
	ization include an amou							/? <b>☐ Ye</b>	s No
	ain the arrangement in P								
	wment Funds.								
	lete if the organization	answered "Yes"	on For	n 990, F	art IV, line	10.			
·		(a) Current year	(b) Prid		(c) Two years		(d) Three years bac	k (e) Four	years back
1a Beginning of	year balance			-	., ,			1	-
	,								
c Net investme	nt earnings, gains, and								
	olarships								
	ditures for facilities and								
	e expenses								
	alance								
	stimated percentage of	the current vear en	d halanc	e (line 1a	column (a)	) held a			
	ated or quasi-endowme			c (iiiic ig	, column (a)	) Hold t			
<b>h</b> Permanent e	ndowment	%							
c Term endowr		/0							
	ges on lines 2a, 2b, and	2c should equal 10	nn%						
	dowment funds not in th			ation tha	at are held a	and adi	ministered for th	ne	
organization		o possocion on in	o o. ga					_	Yes No
_	l organizations							3a(i)	100 110
(ii) Related o	=							3a(ii)	
	ne 3a(ii), are the related o							3b	
	art XIII the intended uses	-	-					0.0	
	Buildings, and Equip		ni o onao	***************************************	,,,,do.				
	lete if the organization		on For	n 990. F	Part IV. line	11a. S	See Form 990.	Part X. I	ine 10.
	Description of property	(a) Cost or oth			r other basis		Accumulated	(d) Boo	
		(investme			ther)		epreciation	,=, 500	
<b>1a</b> Land			0.	3	76,240.			3.5	76,240.
			•		92,618.		26,475.		6,143.
	provements				_,,		= - ,		-,
				2.6	80,856.		961,817.	1.71	19,039.
				2,0				-, / -	,,
Total. Add lines 1a t									51,422.

Part VII	Investments – Other Securities.	000 D. I.IV. I'	441. 0	000 D. LV I' 40
	Complete if the organization answered "Yes" on For			
	(a) Description of security or category (including name of security)	(b) Book value		hod of valuation: -of-year market value
(1) Financial	derivatives			
	neld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G) (H)				
	mn (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments – Program Related.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11c. See Form	990, Part X, line 13.
	(a) Description of investment	(b) Book value		hod of valuation: -of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	mn (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
I di Cix	Complete if the organization answered "Yes" on For	m 990. Part IV. lin	e 11d. See Form	990. Part X. line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	(1) 15 000 D 11/ 1/D) (1 45)			
	mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.			
Part X	Complete if the organization answered "Yes" on For	m 000 Part IV lin	0 110 or 11f Co	Earm 000 Part V
	line 25.	ili 990, Fait IV, ilir	e i le oi i ii. Sec	er omi 990, Fait A,
1.	(a) Description of liability			(b) Book value
(1) Federal in				(a) Book raido
(2)	Notifie taxes			
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 25.)			
	runcertain tax positions. In Part XIII, provide the text of the footnote			
organization'	s liability for uncertain tax positions under FASB ASC 740. Check	k here it the text of the	tootnote has been	provided in Part XIII . 🔲

Part	•		•	Retur	n.
	Complete if the organization answered "Yes" on Form 990, F	Part I	V, line 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	6,360,716.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-619,289.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	-619,289.
3	Subtract line <b>2e</b> from line <b>1</b>			3	6,980,005.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines <b>4a</b> and <b>4b</b>			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	6,980,005.
Part				er Reti	urn.
	Complete if the organization answered "Yes" on Form 990, F				
1	Total expenses and losses per audited financial statements			1	7,154,816.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ı	I		
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
_	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	7,154,816.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-	
b	Other (Describe in Part XIII.)	4b			
_	Add lines 4e and 4h			1 4 - 1	
	Add lines 4a and 4b			4c	7 154 016
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			4c 5	7,154,816.
5 Part	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b>	e 18.)		5	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  The descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 1.	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b>	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  The descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 1.	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  The descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 1.	9 18.) d 4; P	art IV, lines 1b and 2b	5 o; Part \	/, line 4; Part X, line

Schedule D (Fo	orm 990) 2022	Page \$
Part XIII	Supplemental Information (continued)	

## **SCHEDULE F** (Form 990)

## **Statement of Activities Outside the United States**

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

OMB No. 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization Employer identification number Free the Oppressed 47-4648581

Part	General Information Form 990, Part IV, line		ties Outside	the United States. Con	nplete if the organization a	nswered "Yes" on
1	For grantmakers. Does the other assistance, the grante award the grants or assistance	es' eligibility	for the grant		selection criteria used to	⊠ Yes □ No
2	For grantmakers. Describe outside the United States.	in Part V the	e organization	's procedures for monitoring	ng the use of its grants and	d other assistance
3	Activities per Region. (The fo	llowing Part	I, line 3 table o	an be duplicated if addition	nal space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) E	East Asia and Pacific	2	50	Program service	Ministry of Christ	5,353,356.
<b>(2)</b> N	Middle East	1	7	Program service	Ministry of Christ	1,191,786.
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)	Cubtotal					C F45 140
3a b	Subtotal Total from continuation	3	57			6,545,142.
D	sheets to Part I					
С	Totals (add lines 3a and 3b)	3	57			6,545,142.

Schedule F (Form 990) 2022

Page 2

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

-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(E)			Europe	Afghan refugees	10,000.	Wire			
(2)			Middle East	Hospital building	88,817.	Cash and wire			
(3)									
(4)									
(2)									
(9)									
(7)									
(8)									
(6)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
0	Enter total nu exempt 501(c)	mber of recipi (3) organizatior	ent organizations linby the IRS, or for	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	ecognized as che ounsel has provid	writies by the foreign of a section 501(c)(3)	country, recognized equivalency letter	as a tax	2
က	Enter total nur	nber of other o	Enter total number of other organizations or entities	ties				<b>A</b>	
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Schedule F (Form 990) 2022

Page 3

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Part III

(a) Type of grant or assistance	ance	(b) Region	(c) Number of	(d) Amount of	(e) Manner of	(f) Amount of	(g) Description	(h) Method of
			recipients	cash grant	cash disbursement	noncash assistance	of noncash assistance	valuation (book, FMV, appraisal, other)
(1) Cash for refugee assistance	sistance	East Asia and Pacific	Н	30,000.	Wire			
(2)								
(6)								
(4)								
(5)								
(9)								
(2)								
(8)								
(6)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
(18)								
BAA				REV (	REV 05/17/23 PRO		Sch	Schedule F (Form 990) 2022

## Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	⊠ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	⊠ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	⊠ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	⊠ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	⊠ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	X Yes	□ No

## Part V Supplemental Information

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

Pt I Line 2: The organization has individuals on the ground in Burma, Iraq,
Syria, Tajikistan, and Thailand that monitor the applicants, selection process,
disbursement, use of grant funds, and reporting of grant outcomes. The organization
also has a committee that communicates with individuals in the countries being
considered, reviews grant applications, approves of the grant disbursements,
and reviews grant outcomes.

# SCHEDULE I (Form 990)

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.

OMB No. 1545-0047 2022

> Go to www.irs.gov/Form990 for the latest information. Attach to Form 990.

Open to Public Inspection **Employer identification number** 47-4648581

Department of the Treasury Internal Revenue Service Name of the organization

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	sistance to Dor	mestic Organiza eceived more th	ations and Don Ian \$5,000. Part	n <b>estic Governr</b> Il can be duplica	nents. Complete i ated if additional	f the organization ansv space is needed.	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	(p) 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 Novi Community PO Box 3673 Midland TX 79702	88-2235835		10,000.				Help children in war-torn areas
(2) Bonus Years, Inc.	93-2232349		.000,000				Ministry to disabled individuals
(3)							
(4)							
(5)							
(9)							
(7)							
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table	501(c)(3) and gov ganizations listed	ernment organization the line 1 table	tions listed in the l	ine 1 table			0
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instructions		BAA			REV 05/17/23 PRO	PRO Schedule I (Form 990) 2022

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.

Part III

Page 2

(f) Description of noncash assistance disbursement, use of grant funds, and reporting of grant outcomes and Thailand The organization also has a committee that communicates with individuals in the countries being considered, Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Iraq, Syria, Tajikistan, (e) Method of valuation (book, FMV, appraisal, other) reviews grant applications, approves of the grant disbursements, and reviews grant outcomes (d) Amount of noncash assistance Pt I Line 2: The organization has individuals on the ground in Burma, 25,000. (c) Amount of cash grant selection process,  $^{\circ}$ (b) Number of recipients to assist Afghan refugees that monitor the applicants, (a) Type of grant or assistance 1 Cash Part IV က Ŋ 9 2 4

### **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.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Free the Oppressed

Employer identification number

47-4648581

Par	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		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
•				
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☐ Compensation committee ☐ Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		×
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		×
С	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.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		×
b	Any related organization?	5b		×
	If "Yes" on line 5a or 5b, describe in Part III.			
-	5			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
•	The organization?	62		×

If "Yes" on line 6a or 6b, describe in Part III.

Regulations section 53.4958-6(c)?

**b** Any related organization? . . . . . . . . . . . . . . . .

6b

7

8

9

X

×

7

For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed 

If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

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 

Schedule J (Form 990) 2022

Page 2

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

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 and/or 1099-NEC compensation	id/or 1099-MISC and/or	1099-NEC compensation	(C) Betirement and	oldoxotack (a)		(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
Wes Price	()	53,333.	0.	10,678.	.0	0.	64,011.	0.
1 Treasurer	€	.0	0.	.0	.0	.0		.0
	Θ							
2	€							
	()							
ო	€							
	Ξ							
4	€							
	()							
5	€							
	()							
9	€							
	()							
7	<b>E</b>							
	(							
8	<b>E</b>							
	(							
6	€							
	(							
10	(ii)							
	()							
11	(ii)							
	<b>E</b>							
12	<b>(E</b>							
	Ξ							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							
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Page 3	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.									
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	and fe									
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	7, an									
	. , d9									
	, 6a,									
	a, 5b									
	4c, 5									
	4b,									
	3, 4a,									
	1b, 3									
	s 1a,									
	, line									
	Part									
	for									
	uirec									
	s red									
	ption									
	escri									
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022	Part III Supplemental Information, expla for any additional information.									
Schedule J (Form 990) 2022	ional									
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Sch	로 도 호									

#### SCHEDULE L (Form 990)

## **Transactions With Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open To Public nspection

Name	of the organization							Emplo	yer ider	ntificat	ion nu	mber		
Fre	e the Oppressed	i						47-	4648	3581				
Pa								ction 501(c)(29) sa or 25b, or Fo					40b.	
1	(a) Name of disqualif	ied person	(b) Relationship be			person and		(c) Description	n of trar	nsactio	n		(d) Cor	rrected'
				organiza	ation								Yes	No
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
2	Enter the amount of under section 4958								ng the 	year 	\$_			
3	Enter the amount of	f tax, if any, on	line 2, above,	reimb	ursed by	the organ	izatior	ı			\$_			
Par	Complete if th	or From Interest organization eported an ame	answered "Ye	s" on 990, P			2.	38a or Form 99				26; or i		ritten
(4)	varie of interested person	with organization	loan	fro	m the nization?	principal an		(i) Balance due	(9) 111	, ciauit:	by bo	pard or mittee?		ment?
				То	From				Yes	No	Yes	No	Yes	No
(1)	Sahale Eubank	Daughter of CEO			×	13,7		13,746.		×	×		×	<u> </u>
(2)	Suuzanne Eubank	Daughter of CEO	Higher education		×	15,4	159.	15,459.		×	×		×	—
(3)														
(4)														
(5)														
(6)									-					-
(7)														-
(8)													_	-
(9) (10)														-
Tota	ı							<b>\$</b> 20 205						
Par	t III Grants or Ass	sistance Bene e organization		ed Pe	rsons.			\$ 29,205. '.						
(a	a) Name of interested person		ship between intercand the organization			mount of istance	(	d) Type of assistanc	е	(e)	) Purp	ose of a	ssistan	ce
(1)													-	
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														

Schedule L (Form 990) 2022 Page **2** 

Part IV	Business Transactions Involvi Complete if the organization and	ng Interested Persons. swered "Yes" on Form 990	). Part IV. line 28a.	28b. or 28c.			
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction		(e) Sharing o organization's revenues?	
					Yes	No	
	s Price	Director, Treasurer	64,011.	Payment for contracted services		×	
(2)							
(3)							
(4)							
(5) (6)							
(7)							
(8)							
(9)							
(10)							
Part V	Supplemental Information. Provide additional information for V Line 1: The Organizat						
Pait I	V Line 1: The Organizac	TOIL COILCIACES WICH	I PIICE ACCOU	ilcing and consulcing,			
LLC, w	hich employs Wes Price.						

## **SCHEDULE M** (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

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

**Employer identification number** 

Name of the organization Free the Oppressed 47-4648581 Types of Property

		(a) Check if applicable	<b>(b)</b> Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			
1	Art—Works of art			Tomi ood, rait viii, iirio 1g				
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	×	6	167,796.	FMV			
10	Securities—Closely held stock .			20171301				
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(Supplies )	×	3	6,831.	FMV			
26	Other ()							
27	Other ()							
28	Other ( )							
29	Number of Forms 8283 received							
	which the organization completed	F0fff1 8283	s, Part V, Donee Acknowled	igement	29			
00	B				4 11 1	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Yes	NO
30a	3 , 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1							
	28, that it must hold for at least 3 used for exempt purposes for the					00		
			ing penour			30a		×
	If "Yes," describe the arrangemen		stance policy that require	on the review of any m	anctandard			
31	Does the organization have a contributions?					24		V
32a	Does the organization hire or use					31		<u>×</u>
32d	contributions?					200		~
h	If "Yes," describe in Part II.					32a		<u>×</u>
33	If the organization didn't report an describe in Part II.	amount in	column (c) for a type of pro	perty for which column (a)	is checked,			

Schedule M (Form 990) 2022 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether Part II 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. Other: Part I, Column B - The number here represents the number of contributions received in each category.

# SCHEDULE O (Form 990)

## 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection

Employer identification number

Free the Oppressed	47-4648581					
Pt VI, Line 19: Documents are provided upon request and on our webs:	ite.					
Pt VI, Line 11b: The organzization Treasurer and Board of Directors are responsible						
for review of the IRS form 990 before filing.						
Pt XI: The other change in net assets is a foreign currency translat	tion adjustment					
of \$39,008.						
Pt VI, Line 12c: The Treasurer and Executive Committee monitor finan	ncial transactions					
throughout the year and bring any suspicious activity to the Board	of Directors					
to enforce the conflict of interest policy.						
Pt VI, Line 15a: To determine compensation, the Board Members, elect	ced advisors					
to the Board, and all public individuals at the annual meeting open	ly discuss,					
compare to other ministries and nonprofits, and deliberate to decide	e the compensation					
of the CEO.						
Pt VI, Line 15b: To determine compensation, the Board Members, elect	ced advisors					
to the Board, and all public individuals at the annual meeting open	ly discuss,					
compare to other ministries and nonprofits, and deliberate to decide	e the compensation					
of the Treasurer.						
Pt XI: Currency translation adjustment						
Pt III, Line 4d:						
Expenses: \$194,050 including grants of: \$0 Revenue: \$0						
Description: Advocacy						
Pt IX, Line 24e:						
Description: Aviation Department						
Total: \$498,466						
Program services: \$498,466	Program services: \$498,466					
Management and general: \$0						

Schedule O (Form 990) 2022 Page **2** 

Schedule O (Form 990) 2022	Page <b>2</b>
Name of the organization  Free the Oppressed	Employer identification number 47-4648581
	47-4040301
Fundraising: \$0	
Description: Ranch ministries	
Total: \$159,374	
Program services: \$81,951	
Management and general: \$77,423	
Fundraising: \$0	
Description: Medical	
Total: \$363,316	
Program services: \$363,316	
Management and general: \$0	
Fundraising: \$0	
Description: JSMK	
Total: \$354,756	
Program services: \$354,756	
Management and general: \$0	
Fundraising: \$0	
Description: Other administration	
Total: \$132,325	
Program services: \$0	
Management and general: \$132,325	
Fundraising: \$0	
Description: Field communication	
Total: \$184,062	
Program services: \$184,062	
Management and general: \$0	
Fundraising: \$0	
Description: Communications	

Schedule O (Form 990) 2022 Page **2** 

Schedule O (Form 990) 2022	Page 2
Name of the organization  Free the Oppressed	Employer identification number 47-4648581
Total: \$127,406	
Program services: \$126,634	
Management and general: \$772	
Fundraising: \$0	
Description: Good life club	
Total: \$117,684	
Program services: \$117,684	
Management and general: \$0	
Fundraising: \$0	
Description: Maesarieng	
Total: \$70,453	
Program services: \$70,453	
Management and general: \$0	
Fundraising: \$0	
Description: Fundraising expenses	
Total: \$46,507	
Program services: \$0	
Management and general: \$0	
Fundraising: \$46,507	
Description: Global day of prayer	
Total: \$25,933	
Program services: \$25,933	
Management and general: \$0	
Fundraising: \$0	
Description: Other expenses	
Total: \$9,827	
Program services: \$9,827	

Scriedule O (Form 990) 2022	Pag	je ₄
Name of the organization	Employer identification number	
Free the Oppressed	47-4648581	
Management and general: \$0		
Fundraising: \$0		
Denoviotion Dealer and hibles		
Description: Books and bibles		
Total: \$8,642		
10.01: 30,042		
Program services: \$8,642		
Program Services: \$0,042		
Management and general: \$0		
Fundraising: \$0		

2022

Name Employer Identification No. Free the Oppressed 47-4648581

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Aviation Department	498,466.	498,466.	0.	0.
Ranch ministries	159,374.	81,951.	77,423.	0.
Medical	363,316.	363,316.	0.	0.
JSMK	354,756.	354,756.	0.	0.
Other administration	132,325.	0.	132,325.	0.
Field communication	184,062.	184,062.	0.	0.
Communications	127,406.	126,634.	772.	0.
Good life club	117,684.	117,684.	0.	0.
Maesarieng	70,453.	70,453.	0.	0.
Fundraising expenses	46,507.	70,453.	0.	46,507.
Global day of prayer			0.	
	25,933.	25,933.	0.	0.
Other expenses Books and bibles	9,827.	9,827.	0.	0.
Total to Form 990, Part IX,				
line 24e	2,098,751.	1,841,724.	210,520.	46,507.

## Form 990 p 2: Line 4a Description-1

It is wonderful to be able to say, "Yes - because people around the world love you, we can help you." We had many joyous times together with people in their hiding places, singing songs, playing children's games, impromptu dances, sports events, and worshiping God together - all this within earshot of gunfire, mortars, and artillery. The attacks of the Burma Army could not quench the joy the people shared together. We were daily filled with gratitude for all of those who send support and I wanted to share a little bit about what we've been able to do and the scale of the assistance. I'll start with medical aid: Because of your help, we were able to supply every clinic in Karenni State with one year's supply of medicine. These resources went to over 10 FBR relief teams doing mobile medical care all over Karenni State, over 30 clinics providing relief for people in need, five hospitals, and two different mobile public health service teams. The total cost for the year was \$300,000 and, because of your help, we were able to do it all. At one point we had already used up \$100,000 and had no more money but we prayed and help came in the form of \$200,000 for medicine. We were able to purchase all the medical units and send them by truck, boat, and foot to each place of need. Also because of your help, we were able to outfit three clinics with x-ray machines and generators to power them. This is life-saving as the doctors can perform advanced surgical procedures and save many lives. One of the lives saved was Silverhorn's, one of our top medics and a Karen uncle who helped raise our children since they were babies. Silverhorn was with us as we carried out wounded under direct fire and he was hit twice. One rifle bullet went through his back and out his hip, while shrapnel from an RPG lodged deep in his back. We ran through a hail of fire carrying him while trying to slow the loss of blood. We were able to get him to our casualty collection point, where our medics stabilized him for further transport. Silverhorn had massive internal bleeding and it looked like he might die. We had to move him further and our son, Peter, with a Karen medic attending to Silverhorn, drove him four hours at night to get to a hidden field hospital we support. The surgeon there had fled the murderous regime and joined us in the jungle. He brought his world-class skills with him and began saving lives. He had an x-ray machine operated by generator and was able to find the fragment deep in Silverhorn's back. In 11 hours of surgery, he removed the shell fragment and repaired a perforated spleen, as well as patching up his other wounds. Due to the x-ray and skills of the doctor, Silverhorn's life was saved. He is one of the hundreds of casualties saved by this doctor and others who are helping us in the jungle. Sometimes, more seriously wounded need to be evacuated to neighboring countries. One was a young girl, Cherry Moo, who had a mortar fragment lodged in her chest which had injured her heart. She needed a complex surgery. We were able to transfer her by foot, vehicle, and boat to another country. Cherry Moo was taken to one of the top hospitals in the country to receive surgery and is now completely healed. What a blessing and what a miracle to be part of! We helped purchase two new pickup trucks at \$30,000 each, to be converted into ambulances as well as retrofitting two bigger trucks to become mobile surgical stations. They must be mobile because the Burma Army will bomb any hospital that they know of. They have a generator-run air conditioning system, sterilization, and surgical suite, and are able to move to areas of need and keep hidden. This has saved hundreds of lives. We're also supporting local hospitals with medical instruments and funds to build better wards and water systems. Many of the surgeons staffing these hospitals, like the man who operated on Silverhorn, fled the Burma military after the coup and are now in the jungle changing lives. In one case, the Burma Army had attacked a village, laid landmines, set the church on fire and left. As the church was burning, a young boy named David came in with members of the resistance to document what was happening. He was trying to video the burning church when he stepped on one of the Burma Army landmines. It blew his foot off. We were able to transport him to a clinic that we support. There, he was treated by a Burman surgeon. This man not only provided immediate care but

later, as David began to heal, the surgeon was able to rotate the heel bone into a different position so he will not need a prosthesis. With this procedure, David is able to walk and has a new chance at life. Support of schools: We normally don't provide much support for salaries for teachers, but because of the increased attacks and massive displacement, there are many teachers now in the jungle with no income. They teach the children in hiding places with whatever resources they can find. We were asked to supply teachers with a stipend of \$20 a month. Because of your generosity we were able to help over 400 teachers for six months. Tears came to the teachers' eyes as they thanked us. Food: We

## Form 990 p 2: Line 4a Description-1 (Continued)

normally give food supplies but until recently we could only meet very limited needs. On this mission, in every place we went, we were able to give rice to everyone that requested it, providing food for over 10,000 people. One sack of rice costs about \$30 and feeds a family of four for a month. In another area, a local Catholic priest asked for a pickup truck to help move food supplies as well as sick people they were caring for. We were able to say yes and give them \$8,000 for a used pickup truck. In one hiding place, in the middle of a children's program, a teacher asked if we had any funds for rice that they wanted to carry over the mountain to a new boarding school. I asked how much they needed and they said they needed about \$1000 to feed the students for the next three months. Because of all of your help we could say yes. We gave it to the teacher and he later sent photos of the students carrying the rice across rice fields. I want to include these details which we normally don't, just to let you know the scale of help and how you help us help others. We also tell the people we meet, "Please trust in God, not us and pray to God for what you need and it is because of God that we get assistance and it is through people who love and care about you all over the world." This is focused on Karenni State, but it's the same work we do in Karen, Chin, Kachin, Shan, and other areas of Burma. You're making a huge difference in these peoples' lives and we thank you for that. May God bless you all with all you need, relationally, physically, spiritually, materially, and professionally, in Jesus' name.

Over 300,000 Karenni IDPs are in hiding and the Burma Army continues to increase the frequency of airstrikes in the region, a campaign to destroy the Karenni people. We shared in the sorrows and unspeakable horrors the Karenni people have faced this year, including carrying fellow Karenni Rangers and dear friends' bodies from the frontlines, weeping with widows who had just lost their husbands to Burma Army brutality, and retrieving the remains of two brothers who were murdered and thrown into a well by the Burma Army for a mourning sister to be able to properly bury them. On 13 June 2022, our newest teams, composed of Karen, Karenni, Wa, Shan, Pa-Oh, Arakan, Mon, Padaung, and Burman Rangers, launched their first mission GLC program. Heavy mortaring in the area from which the villagers had fled eight months before could be heard in the pre-dawn hours and then sporadically up to the time we arrived at the IDP camp. When Dave met with the camp leaders about a program with the children they were resistant, not wanting to have any large group activity that could be seen by a drone and become a target for an attack. He agreed we'd just visit house-to-house in small groups. When our team arrived at the site, a beautiful pinecovered mountainside, the kids were already waiting and parents were nervous but willing to visit outside. Actually, all of us (Rangers) were a bit nervous as well, feeling the proximity of danger and uncertainty of the situation. I suggested we get started right away while it was quiet and peaceful, not knowing how long it would last, and the team dutifully jumped into the program. I opened with prayer, and, as we shared dances, skits and songs, the tension melted into warm smiles and gratitude for a reprieve from the oppression of worry as entertainment and encouragement provided a salve to the ache of anxiety. In God's amazing equation of love, the villagers' joy multiplied our team's exuberance. The Rangers were comical, animated, and engaged while the kids and adults were howling with laughter. (Someday I'll understand the Burmese language and enjoy to the same extent). At the end, the adults were so active in their games it looked like someone might get hurt. We finished with open-mic songs and dances from both the Rangers and the villagers. Walking back to our trucks, several Rangers, in surprised voices, told me, "This is so great! I love making people happy. Everyone started off so afraid and we helped them laugh a lot. They asked us if we were tired and I said I will never be tired making you happy." It really seemed that we viscerally felt God's perfect love casting out fear. I thank God for His presence - for both our team and the IDP families - adding so much more to the program and day than any could have expected.

2022-2023 Stats: 3,000,000 civilians displaced, 458,000 people aided, 140 Ranger Teams, 272 medical units to Burma, 248+ relief missions

Recommendations for Action for the International Community

# Form 990 p 2: Line 4a Description-1 (Continued)

- Immediate cross-border humanitarian assistance directly to areas of need through ethnic governments and NGOs and direct assistance to the Civil Disobedience Movement (CDM) in the Burman areas of the plains and cities.

- Political recognition of the ethnic groups and support of the movement for a democratic and federal government between the ethnic groups, the Civilian Defense Movement (CDM), and pro-democracy political groups such as the National Unity Government (NUG), CRPH and NLD.
- Protection for people under attack from Burma military and police, both in the cities and in the ethnic areas. Also, the support of safe areas where people targeted by the regime and defectors from the police and army can go.
- Establishment of a no-fly zone over the ethnic areas of Burma to prevent Burma military air attacks against the population.

The 2022 Free Burma Ranger Servant Leadership and Relief Team Training was conducted from October to December 2022. 204 people from across Burma participated in the training including 133 new basic students, making up 25 new FBR teams. 47 second year students, partnering with 24 students from JSMK, took part in our advanced training, going deeper into the topics they had learned in their basic training the previous year. Despite challenges traveling around Burma since the coup, seven different ethnic groups, representing ten different organizations, attended training. The Kachin team traveled the farthest, all the way across the country to attend, joining the Karen, Karenni, Shan, Po Karen, Arakan, and Burman teams. At the beginning of the training the students were asked to look around at each other, at the many new faces, across many ethnic lines, and ask themselves if reconciliation within Burma is possible. At graduation three months later, they were asked the same question. They were able to say they had seen a small picture of what reconciliation in Burma could look like, by spending three months working, learning, eating, sleeping, sweating - all together. Working together across ethnic backgrounds to bring help, hope and love is one of the many skills the Rangers learn during training. Graduation took place on December 29th and part of the celebration was recognizing 11 Rangers who were baptized this year during training. After graduation, the teams divided into four groups to complete follow-on relief missions, together with instructors. They had an opportunity to practice their new skills on a real mission but with instructors and experienced Rangers available for further coaching and feedback. Once finished with the mission, they will return to their home areas, ready to conduct missions there. They will have learned and practiced many new skills to be able to help their people in many kinds of crises, as well as having gained new relationships across ethnic lines. The skills and relationships will both be of vital importance as Burma and her people move into a challenging future.

During the training rangers learn the following:

- " Ethnic Unity
- " Leadership Principles
- " Map Reading and Drawing
- " Compass Reading
- " Land Navigation
- " GPS (Global Positioning System)
- " Landmine Removal
- " Swimming and Lifesaving
- " Solar Power and Battery Management
- " SALUTE Reporting
- " Human Rights Violations Recording and Reporting
- " General Reporting
- " Video and Photography
- " Medical Training

# Form 990 p 2: Line 4a Description-1 (Continued)

- " Five Field Training Exercises
- " Physical Training
- " Rope Bridge Building
- " Poncho Raft
- " Rappelling
- " Good Life Club Training

Summary of 2022 FBR Burma Teams:

#### **ARAKAN**

15 Teams: 9 Full-Time, 6 Part-Time

Partner Organizations: Arakan Liberation Party and Arakan Army

#### **BURMAN**

10 Teams: 10 Full-Time

Partner Organization: National Unity Government

#### **CHIN**

7 Teams: 4 Full-Time, 3 Part-Time

Partner Organization: Chin National Party

## **KACHIN**

8 Teams: 2 Full-Time, 6 Part-time

Partner Organizations: Kachin Independence

Organization and

Kachin National Organization

#### **KAREN**

44 Teams: 44 Full-Time

Partner Organization: Karen National Union

#### **KARENNI**

20 Teams: 20 Full-Time

Partner Organizations: Karenni National Progressive Party and United Karenni State Youth

### **LAHU**

2 Teams: 1 Full-Time, 1 Part-Time

Partner Organization: None

#### **MON**

2 Teams: 2 Part-Time Partner Organization: None

NAGA

5 Teams: 5 Part-Time

Partner Organization: Naga National Council

## Form 990 p 2: Line 4a Description-1 (Continued)

PA-OH

2 Teams: 2 Full-Time

Partner Organizations: Pa-Oh National Liberation Organization and Pa-Oh Youth Generation

**ROHINGYA** 

2 Teams: 2 Full-Time Partner Organization: None

These teams are located in the refugee camps in Bangladesh

**SHAN** 

14 Teams: 1 Full-Time, 13 Part-Time

Partner Organizations: Restoration Council of Shan State and Shan State Progressive Party

TA'ANG

6 Teams: 6 Part-Time

Partner Organization: Palaung State Liberation Front

**HEADQUARTERS** 

2 headquarters teams join local teams for missions all over Burma

#### Form 990 p 2: Line 4b Description-1

In spite of all the attacks, displacement, constant motion, and loss of his own home, Abdul Sattar has helped rebuild the school, add the new building, build toilets, start a well, and helped to put a roof on another new school that also was forced to flee. And, with the help of friends, he was able to buy a small apartment for his family in the city after his own home was taken by the Syrian Army. These are all miracles of God and God's people helping. These are the kind of miracles we see in northeast Syria. There is a new hope here, one that shines more broadly than I've ever seen it. In spite of the attempts by ISIS to destroy all of Syria, the Kurds, Arabs, and Christians, in a coalition called the Syrian Democratic Forces (SDF) have defeated them. ISIS still exists in pockets and has the ability to daily launch terrorist attacks and ambushes, but they control no terrain. And they have become visibly weaker than they were before. Adding to the deadly challenge of fighting ISIS, the Turks and their proxies have launched multiple invasions into northern Syria in 2016, 2018, and 2019, displacing hundreds of thousands of Kurds, Arabs, Yezidis, and Christians. On top of this, the US broke its promise to stand with the Syrian Kurds and in 2019, at midnight on 9 October, left their positions along the Syrian-Turkish border. By four in the afternoon, the Turkish military and their proxies had invaded, driving hundreds of thousands of people before them. In spite of these terrible things, the SDF has not given up. They are protecting what they have and caring for the displaced people in abandoned schools, camps, and in shared homes. We were surprised with new hope when we went down to Deir Ezzoir along the Euphrates River. Here we were told by the local Arab leader that 90% or more are still supporting ISIS. Even so, in this area there is governance by the Syrian Democratic Forces, which has made inroads in trying to form an equitable, democratic, just society. Even though ISIS sleeper cells try to launch attacks in this area and, just across the Euphrates to the west are Assad's forces, Russians, and Iranians, the SDF governance is growing. The fact that we could drive the entire distance from Raqqa to Baghouz (which was the last stronghold of ISIS and is on the border of Iraq and Syria) and not come under attack was amazing. Even though ISIS has over 90% support in this area, the people here seem to be attempting to try and work with the

# Form 990 p 2: Line 4b Description-1 (Continued)

SDF. And even though many Kurds and Arabs don't trust each other very much, there is enough trust to work together. This is a new beginning. To me, it's a great hope, not only for northeast Syria, but all of Syria. This attempt at community-based governance, democracy, the upholding of women's and children's rights, and freedom of religion needs support. This is an area where Christians, Arabs, Muslims, Yezidis and others can live together in peace and justice. This attempt at a just and free society is not present in other parts of Syria, and is not present in many parts of the Middle East. Against this emergent freedom, many forces have been arrayed. To the south and the west, the Syrian Army wants to crush any independent movement not under Assad's direct control. They are supported by the Russians, who use airplanes and heavy artillery to attack and kill anyone who opposes. The Assad regime is also supported by the Iranian government directly as well as Iranian militias that attack anyone opposing Assad. Another enemy is ISIS, which is still in the area, able to ambush, kill, and harass. And then in the north, there are the Turks. Turkey is attacking regularly with jet aircraft, drones, and heavy artillery, killing men, women, and children in the SDF controlled area of northeast Syria. They not only attack directly using their air force and artillery, they support a variety of jihadi proxy forces that still occupy large swaths of northeast Syria. During the week of 9-26 November 2022, the Turkish air force conducted over 40 airstrikes. These strikes by Turkish war planes killed over 40 people, including 11 civilians whose funeral we attended on 20 November. Destruction Driven by Fear This is evil and none of this is productive. It's all about destruction, degradation and attack. I think that the most common, strongest motive for why countries are involved in northeast Syria is fear. Why is Iran involved? They have to cross all the way over Iraq to get involved. Again, I think it's fear. They're afraid of Israel. They're afraid of other powers. They're afraid of the world coming in on them, because they know they have a government and a tyranny that is not loved, not only around the world, it's not loved by their own people. And I believe one of the reasons they want to stir up fighting in Syria, and attack Israel, among other places, is because they want an enemy that they can project and focus their people on so they can retain their grip on power, and make people in Iran really think this Iranian military is needed to protect Iran, when, actually, this form of government is not needed. It's the worst thing Iran can experience. Why does Assad lash out against everybody who opposes him in Syria, including northeast Syria? Because of fear, because he wants to retain his power. He's not directly fighting the Kurds right now, or the SDF, but the threat is there, once the other forces against him are eliminated. He's already told the Kurds and the SDF they must comply and come into his fold. Why are the Russians involved? I think fear again. They want a port in the Mediterranean, they want more projection of power to defend Russia. They want some kind of ally. Why is Turkey involved? Well, Turkey has over 20 million Kurds that have been repressed for centuries. They're afraid of them. And what they see with the SDF is Kurds with power; they're afraid of that. So these are all fear. In spite of this, the Syrian Democratic Forces operating under the self-administration of northeast Syria are still forging ahead with health care, schools, agriculture projects, roads, and the beginnings of a participatory political system. There needs to be a lot of improvement, but this effort to change has no chance if no one will defend it. The forces around northeast Syria are not just, not pro-democratic, not pro-women, and not pro-children. They are a collection of dictators, extremists, terrorists, and hate-fueled factions. Supporting the SDF from the outside is a US-led coalition. But in talking to the local people here, they do not feel they can trust the US or the coalition. They feel they are being used. It is hard to assure them otherwise. Why did the US come in? It doesn't seem that we suddenly decided we want to help the Kurds and other minorities here such as the Christians. In fact, they've labeled some Kurdish parties as terrorist parties. It seems to the people here that the US-led coalition came because they were afraid of ISIS. They did not seem to come out of love. Down in Deir Ezzoir, along the Euphrates, we were in a meeting of over 70 local sheiks. One of the sheiks came up to me after the meeting and said, "Thank you for coming and we appreciate you being here. But why do the Americans launch all these raids against us and fly helicopters at night and scare our children? We're not ISIS. Why do you treat us like we're all ISIS? Are we guilty just because we are here? We're not innocent until proven guilty. We're just guilty. That really hurts us. It's not right either. Please tell your government to stop that." And then talking to the Kurds, they said to us numerous times, "Yes, America is helping us. We're really grateful. Please help us more. But we feel you're really just using us. You don't really care about us. You

## Form 990 p 2: Line 4b Description-1 (Continued)

betrayed us multiple times, allowing the Turks to invade Afrin and saying nothing, breaking your promise and pulling your troops out of northeast Syria in 2019 and allowing those attacks to happen. And we feel you just want our oil, or you just want to stop ISIS, you don't really care about us as people. So yes, we're glad you're here. But you don't seem like friends." We are also close with the Christians, who are the smallest group here. Different Christians said to us, "No one really cares about us. We are the smallest group; most of the Christians around here have fled. However, we can work with the SDF and we can compromise together. The SDF is the only way forward. And we hope America cares about its fellow Christians, because we are a small minority here in Syria." As an American I am grateful that the US and the coalition are here. This not only saves many lives and blocks major invasions, but also gives a chance for a new society to grow up together. The most powerful force in the world is love and if the US and coalition and all of us are led by love there will be a greater impact for good in Syria, the Middle East, and the world. One of the fruits of that will be the inability of groups like ISIS to have much support. Some of the reasons ISIS has any support is because there's corruption, there's inequality and a feeling that there's no real faith in God. ISIS responds to all three with faith in a real God, with equality for everyone who believes, and a stated goal of no corruption and justice. Of course, ISIS is evil and violates all those things. But they have an appeal, just like the Taliban did in Afghanistan. They give hope, however false, that there's something new and different. We need to give a different hope. We need to give a hope grounded in love and actions of love. Actions of love do not preclude the use of force to stop attacks, but whatever is based on love will be lasting. I pray we continue to support freedom in northeast Syria, and we work on faith in the living God of love. So my appeal to all these countries is, you don't need to be afraid of the SDF. You don't have to be afraid of northeast Syria, they can be your friends, we can compromise together. The United States can act as a real friend, not just use the people of northeast Syria, but cooperate and work with them. Friendship has so much more power, and so much more benefit, tactically and strategically, economically, diplomatically, relationally, and for security. As we see new lights, and new clinics and new schools coming up in northeast Syria, we pray that they'll get the support they need to continue and grow. In Tabqa, across the Euphrates from Raqqa, I met a young boy who told me in great English, "I want to be a biologist and study in Japan, even though it sounds very unlikely and seems impossible. I will work hard to do it." It's children like this who are the hope of northeast and all of Syria. They need help to fulfill their dreams. Otherwise, they could easily fall under the oppression of Assad's regime, under a resurgence of ISIS or under an onslaught of Turkish and proxy forces. Thank you for praying for another way that is of love and truth and reconciliation.

A hospital has been named after our fallen team-member and friend, Zau Seng. Below, Dave Eubank shares some memories of Zau and the significance of this hospital: During the Turkish and Free Syrian Army invasion of October 2019, when Zau Seng was killed, we became very close to Dr. Hassan and all the hospital staff in Tell-Tamer. Together we helped treat over 700 wounded people, and the bond of love between us grew and grew. When the hospital itself was hit and damaged, we were asked to help build a new hospital. We prayed and even though we did not feel this is our normal mission, because of the unique circumstance and our relationship with the people in the hospital and Zau's dying there, we said yes and we prayed for the funds. We thank God the funds did come in and we were able to build this hospital which they've named after Zau. When I think about Zau, who was my brother in Christ and Free Burma Rangers, and all we went through together, and how many times he risked his life to save other people including me, and then watching him be killed right next to me in Syria, it always makes me sad at the loss but glad that he's in heaven and glad that I and others got to spend so much time with him here on this earth. We pray for his young wife, Lu Nu, and his daughter, and pray for comfort for them. One comfort that we see is the building of this hospital in Tell-Tamer, Syria. I pray that it is a place of healing for all who enter it and a reminder of Zau and other people's love and sacrifice. The Bible says, "Greater love hath no man than this, that he lay down his life for his friends" (John 15:13). Zau exemplified that and we pray that the hospital is also a living symbol and a place of healing and help and hope.

Form 990 p 2: Line 4b Description-1 (Continued)

MIDDLE EAST TEAMS

1 SYRIA team and 1 KURDISH/IRAQ team operates in the Middle East

Form 990 p 2: Describc-1

He listened as racism was perpetuated in his school and community. This man was now teammates and bunkmates in training with ethnically Burman people and being taught to do everything in love - to even love your enemies. Before each meal he stood and recited the Ranger Motto while carrying this hatred in his heart. "Love each other. Unite and work for freedom, justice and peace. Forgive and don't hate each other. Pray with faith, act with courage, never surrender." God had brought this student to a crossroads. He could no longer carry his burden and carry the weight of loving his team. God had brought him to a crossroads. And then light shined into the darkness. "Last night I gave my burden to Jesus!" exclaimed the student one morning. "I can't believe He actually took it from me! It was so much easier than I ever thought. My heart feels so light and free!" The situation in Burma is dark. Each day millions of people are being oppressed and driven to despair. Hope remains. There are many other examples of the light of Jesus Christ shining in the darkness. We know from the gospel of John that when Jesus' light shines in the darkness, the darkness cannot overcome it (John 1:5). What's Ahead? The chaplaincy has been a longstanding, integral part of the FBR team. The men who have served and continue to serve over the years have helped us keep our eyes focused on Jesus, love each other despite our differences, and forgive even our enemies. It became apparent that as our team grows, so too must the chaplaincy. What changes? At the heart level, nothing changes. Jesus will help us to chart a course over time. Gospel centered activities are central to what everyone does in FBR regardless of department. As followers of Jesus we are all called to build up one another through God's Word, prayer, and Jesus' love (Eph 4) and to share the good news of Jesus Christ (Mt 28:19-20). The Chaplain Department wants to support and encourage everyone to follow obediently and boldly in faith where Jesus leads. The department will center its activities on three things: caring for people by pointing to Jesus Christ; encouraging Gospel connections into all areas of life; training, preparing, and building up followers of Jesus who disciple others to follow Jesus. Pray for our steps in 2023 and beyond!

HOSTELS AND MEDICAL CARE: We supported three hostels in Thailand, provided medical treatment, patient care, and other medical training.

AVIATION: The mission of FBR's aviation department is to bring help, hope and love from above. Our team fulfills this mission on a regular basis through the transportation of patients, medicine, and supplies for those affected by the conflict in Burma. This past year has been marked as another year of steady, foundation-laying work for establishing medical flight operations in a neighboring country, training of ethnic and international pilots, and meeting the needs of critical care patients from Burma. This year, FBR's aviation team grew in mechanical skill and problem-solving while working to keep our Cessna 172 aircraft flying in Thailand's humid and corrosive environment. The team moved through mechanical problems and upgraded the aircraft's avionics to increase overall performance and safety. FBR Aviation continues praying for and pursuing higher quality aircraft options while utilizing what God has currently provided. As part of this pursuit, four FBR pilots were trained and FAA-certified with new skill sets in the U.S. in 2022. Apart from maintenance and training, the aviation team safely transported more than 15 patients and caretakers this year, aiding in life-saving medical treatment and Christ-like care. One patient story from this past year that highlights the reality of those suffering in Burma and the complexity in serving them is the story of Kler Gay. Kler Gay, an eight year-old boy, arrived at FBR's Jungle School of Medicine (JSMK) clinic with his father last year with significantly low oxygen levels. Kler Gay's needs were urgent and beyond the scope of JSMK, so FBR arranged to fly him and his father

# Form 990 p 2: Describc-1 (Continued)

to larger medical facilities. On January 8, 2022, with blue lips and a smile wide across his face, Kler Gay was held by his father as they were flown by FBR's Karen pilot, Kittkoon. It was their first time to fly in a plane and Kler Gay was able to experience a glimmer of joy through aviation despite his circumstances. Unfortunately, after arriving at the hospital, the doctors found heart complications which resulted in Kler Gay passing away just a couple days after his treatment. Stories of the poor and oppressed whom FBR serves do not always end as we hope and pray. However, this does not negate the presence and power of Jesus, nor the purpose of serving them as best we can. As we all grieve the loss of this precious child, we also rejoice that he is free of suffering and that in his darkest time we were able to be with him and share the love of Christ. This reality, that Jesus never leaves us nor forsakes us, even unto death, is the reality FBR Aviation works to share with each patient, passenger and person we serve.