# Form **990**

# \*\* PUBLIC DISCLOSURE COPY \*\* Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

A F	or the	2024 calendar year, or tax year beginning and en	nding		2100-20
Вс	heck if	C Name of organization		D Employer identific	cation number
a	heck if pplicable	:	3		
Г	Addres change	America First Legal Foundation			
$\equiv$	Name change	Doing business as		86-21903	72
屵	Tinitial		oom/suite	E Telephone number	
屵	_return Final		31	202-964-	
_	return/ termin-	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	31,973,002.
$\Box$	ated ∏Amend			H(a) Is this a group re	
늗	⊒retum ∏Applica	F Name and address of principal officer: Gene Hamilton		for subordinates	
_	Applica tion pendin	same as C above		H(b) Are all subordinates in	(3.3)
		mpt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or	527	The second secon	list. See instructions
			J21	H(c) Group exemption	M ·
	Vebsit		I Voor		State of legal domicile: DE
		Organization, Land	L Tear C	or iorniauon. 2021 N	State of legal dollistic. DE
Pa	rt []	Summary	art T	TT line 1	
8	1 1	Briefly describe the organization's mission or most significant activities: See Pa	art I	II, IIIIe I.	
ā			divis.	A AFRA COLUMN	
Activities & Governance		Check this box if the organization discontinued its operations or disposed			sets.
ğ	1			3	<u> </u>
•₫		Number of independent voting members of the governing body (Part VI, line 1b)	40.		31
jes		Total number of individuals employed in calendar year 2024 (Part V, line 2a)	- 44		0
ğ		Total number of volunteers (estimate if necessary)			0.
Acı		Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	bl	Net unrelated business taxable income from Form 990-T, Part I, line 11			Current Year
Revenue				Prior Year	
	ı	Contributions and grants (Part VIII, line 1h)		9,419,317.	31,464,833.
		Program service revenue (Part VIII, line 2g)		0.	
36		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		226,632.	469,010.
_		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		761.	39,159.
		Fotal revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)		9,646,710.	31,973,002.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		75,000.	75,000.
		Benefits pald to or for members (Part IX, column (A), line 4)		0.	U.
88		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5·10)		3,380,495.	5,552,300.
Expenses	16a I	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Š	P.	Total fundraising expenses (Part IX, column (D), line 25) 1,404,349	9.		A PPA 444
ш	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,852,594.	
	18	Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		10,308,089.	15,186,933.
		Revenue less expenses. Subtract line 18 from line 12		-661,379.	16,786,069.
Net Assets or Fund Balances				ginning of Current Year	End of Year
Seg	20	Fotal assets (Part X, line 16)		13,167,362.	30,185,824.
38	21	Total liabilities (Part X, line 26)		371,180.	604,103.
원	22	Net assets or fund balances. Subtract line 21 from line 20		12,796,182.	29,581,721.
	irt II	Signature Block			
Und	er pena	ties of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	ents, and to the best of my	y knowledge and belief, it is
true,	correc	, and complete. Declaration of preparer (other than officer) is based on all information of which	h preparer	has any knowledge.	
Sigi		Signature of officer Gene Hamilton		Date 11/17,	/2025
Her	е	Gene Hamilton, President Gene Hamilton (Nov 17, 2005 10-40-14 EST)		11/1/	72025
		Type or print name and title			
		Preparer's name Preparer's signature	, D	ate Check	PTIN
Paid		Yong Zhang, CPA	erg 1	1/07/25 if self-employe	P01249785
Preg	arer	Firm's name Rogers & Company PLLC		Firm's EIN 5	8-2676261
	Only	Firm's address 8300 Boone Boulevard, Suite 600			
		Vienna, VA 22182		Phone no. (7	03) 893-0300
Mav	the IF	IS discuss this return with the preparer shown above? See instructions	195		X Yes No

-orm	n 990 (2024) America First Legal Foundation	86-2190372	Page 2
Pai	rt III   Statement of Program Service Accomplishments		<u> </u>
I GI			
	Check if Schedule O contains a response or note to any line in this Part III	***************************************	.,
1	Briefly describe the organization's mission:	the	
	America First Legal Foundation's mission is to provide	- 7050117505	
	conservative movement with the litigation tools, tactic	s, resources	
	and strategies to help make it successful in advancing	conservative	
	policy solutions.		
2	Did the organization undertake any significant program services during the year which were not listed on the		TT.
	prior Form 990 or 990-EZ?	Yes	L& No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	LX No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	revenue, if any, for each program service reported.	( ) .	
4a	75,000 × 12,559,159 × habiting parts of \$ 75,000 × 1/2 manager	ue \$	)
	To encourage, sponsor, and facilitate the cultivation as	nd diffusion	of
	knowledge and understanding of the law and individual r	ights, to	
	promote the rule of law in the United States and to ensi	ure due proce	ess
	and equal protection under the law for all Americans.	-	,
	and educat proceeding and the few for the first	29 20	
	16		
		<u></u>	
		<u> </u>	
42-	(Code: ) (Expenses \$ Including grants of \$ ) (Reveni	ua #	
40	(Code:) (Expenses \$) (Reven	76.9	
		· · · · · · · · · · · · · · · · · · ·	
		<u></u>	
4c	(Code: ) (Expenses \$ Including grants of \$ ) {Reveni		
46	(Code: ) (Expenses \$) (Revenue)		
	<del>- 100</del>		
4d	Other program services (Describe on Schedule O.)	<b>\</b>	
	(Expenses \$ including grants of \$ ) (Revenue \$ Total program service expenses 12,559,159.		
40	Total program service expenses 14,009,109.		

Form **990** (2024)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	1	x	140
	If "Yes," complete Schedule A  Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	_
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	Ť	SP 7	-
3	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Š	x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-197 if "Yes," complete Schedule C, Part III	5	, i	х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	1		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	_	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	3.20.00	85 7	
-	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	9	_	x
40	If "Yes," complete Schedule D, Part IV  Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	-	700	
10	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			113
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11b		x
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  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		<u> </u>
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		x_
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	and the second s			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
ь	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	1 3	Х
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	. 8	X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		1 3	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X_
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			x
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	-	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
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		X
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		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	4-		х
	complete Schedule G, Part III	19	7	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		_
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		$\vdash$
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21	x	
_	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		000	(222.1)

1 0	THE Office that Of Required Scriedales (Continued)	-	_	_
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	١	1	<b> </b> ₩
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	_	X
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	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	-	
270	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1		
	Schedule K. If "No," go to line 25a	240		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	1		$\Box$
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Dld the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
þ	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	10		
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current		١.,	
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			v
	controlled entity or family member of any of these persons? If "Yes," complete Schedule Portal	26	-	Х
27	Did the organization provide a grant or other assistance to any current or former officer, treator, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	27		x
00	entity (including an employee thereof) or family member of any of these persons? If the complete Schedule L, Part III	21		<u> </u>
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 exception):		553	
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			-
-	"Yes," complete Schedule L, Part IV	28a		x
ь	A family member of any individual described in line 28a? If "Yes, complete Schedule L, Part IV	28b		Х
	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	. 1	X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	X	1000
30	Did the organization receive contributions of art historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedulo M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		- 3	77
	sections 301.7701-2 and 301.7781-327 "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to toy tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		x	
05-	Part V, line 1	34 35a	X	_
35a	Did the organization there a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33 <u>a</u>	4h	
D	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 50 (c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		
30	If " es, " complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	TV Statements Regarding Other IRS Filings and Tax Compliance		1	
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 12 12 15	78		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	222	v	
	(gambling) winnings to prize winners?	10	X	(000 f)
432004	l 12-10-24	rorm	990 (	ZUZ4)

			Yes	No
29	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	3	100	110
	filed for the calendar year ending with or within the year covered by this return 2a 31			100
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	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		X
b	If "Yes," enter the name of the foreign country	-		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	L		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
¢	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a				
	any contributions that were not tax deductible as charitable contributions?	6a		X
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		_
h		7h		_
8	Sponsoring organizations maintaining donor advised funds, Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		_
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations, Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			100
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:		(W)	N. III VS
	Gross income from members or shareholders 11a		1	TE I
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	40-	HALLS	Delta.
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		0.0
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		4,33	2
	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.	134	200	
	Enter the amount of reserves the organization is required to maintain by the states in which the			
D	organization is ficensed to issue qualified health plans			
	Enter the amount of reserves on hand		11 3	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.		000	(C) VIII
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.	11111111	1	11_3
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.		2000	
-	n 195] Vollipate i onii 9000	C	000	(2024)

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

	Check if Schedule O contains a response or note to any line in this Part VI			[X]
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year1a			118
	If there are material differences in voting rights among members of the governing body, or if the governing		Ē (0)	
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
Ь	Enter the number of voting members included on line 1a, above, who are independent			H
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		X
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		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	11111		
a	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		[	
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent		37	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	100		
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	S W		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	EUT AL	-	v
	taxable entity during the year?	16a		<u> </u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	N/In	8,116	
	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		
	tion C. Disclosure	MD	163	WT
17	List the states with which a copy of this Form 990 is required to be filled AL, AR, CA, FL, GA, HI, IL, KS, KY			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only)	availa	old
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website W Upon request Other (explain on Schedule O)		. 1 . 4	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	s tinan	icial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Compass Professional, Inc 202-318-5050 300 Independence Ave. SE, Washington, DC 20003			
	Goo Gebodulo O for full liet of states	Corm	990 (	2024)
432008	12-10-24 See Schedule O for full fish of states	rorm	35U (	ZUZ4}

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

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

Check this box if neither the organization ne	or any related	orga	aniza	ation	COL	mpe	nsa	ted any current officer,	director, or trustee.	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	l (do	not c	Pos	ition	than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot	th an		compensation	amount of
	week	$\vdash$	cer an	dad	irecto	or/trus	stee)	from	from related	other
	(list any	흁						the	organizations	compensation
	hours for	E				pate	l	organization (W-2/1099-MISC/	(W-2/1099-MISC/	from the
	related organizations	l sag	랿	1.2	R	beus	l	1099-NEC)	1099-NEC)	organization and related
	below	를	jonal		훈	2 2	١.	10334450)	1	organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	10		organizationo
(1) Gene Hamilton	40.00	-	-	-	Ť	= =	片			
VP, General Counsel, Secretary	20.00	х		X				645,738.	120,000.	27,762.
(2) Stephen Miller	40.00					1	4			
President, Executive Director	- varos rossi	X		X		1		527,414.	0.	39,912.
(3) Daniel Epstein	40.00		6.		0					48.000
Lawyer		_		_	-	X		400,000.	0.	17,250.
(4) Ian Prior	40.00			1				040 040	400 000	45 405
Lawyer	20.00	5		_	$\vdash$	X	L	219,943.	120,000.	17,437.
(5) Reed Rubinstein	40.00	0						076 070		06 422
Lawyer	10.00	8			_	X	L	276,872.	0.	26,433.
(6) Lathika Mary Thomas	40.00					\		242 105	0.	0.4.2
Chief Development Officer	40.00	-		<u> </u>	H	X	⊢	243,195.	0.	843.
(7) Andrew Block Lawyer	40.00					x		207,369.	0.	10,972.
(8) Matt Whitaker	1.00	$\vdash$		_	H	-		201,303.	•	10,5720
Director	1.00	x						0.	0.	0.
(9) Russ Vought	1.00	Г				П				
Treasurer		X		X				0.	0.	0.
(10) Ed Corrigan	1.00					Г				_
Director		X				L	L	0.	0.	0.
(11) Blake Masters	1.00									
Director		X				L	L	0.	0.	0.
		┢		Т		┢				
		1			l					
O R. — 18.		Г								
		$\vdash$	$\vdash$	_	<u> </u>	<u> </u>	L			
- 14										
		$\vdash$	$\vdash$	-	$\vdash$	-	-			
3 - 3 - W. F						$\vdash$		5 (P.15068) 5		
%		1							_	

Form **990** (2024)

Section A. Officers, Directors, Trus	tees, Key Em	ploy	rees	<u>, an</u>	a HI	gne	51 L	ompensated Employe	es (conunueu)				
(A)	(B)			-	C)			(D)	(E)			(F)	
Name and title	Average		not c		more	than		Reportable	Reportable	- 1		timate	
	hours per week					is bot eud/re		compensation	compensati		an	nount	
	(list any					Г	Ė	from the	from related organization	- 1	com	other pensa	
	hours for	diac				L		organization	(W-2/1099-MI			om th	
	related	8	agg.					(W-2/1099-MISC/	1099-NEC			anizat	
	organizations	H SE	la fr		2			1099-NEC)		- 1	an	d relat	ed
	(list any hours for related organizations below line)	Mdea	Institutional trustee	Officer	Kay amployee	Highest compensated employee	竇			- 1	orga	anizati	ons
2 8 5	iirie)	=	las	통	\$	운통	호			-	1		_
-						. 8				9	1		
			П							) *			
			Н										
			Н	- 72	-					$\dashv$			_
			Н						à	$\dashv$			
		L						.(22)					
			П			1		$\sim$					
		$\vdash$	Н	100		0	0			$\dashv$			
								2 520 524	240 0	00	1.4	0 6	00
1b Subtotal								2,520,531.	240,0	00	14	0,6	0.
c Total from continuation sheets to Part Vi		400	•	405	200			2,520,531.	240,0		1.4	0 6	
d Total (add lines 1b and 1c)											7.4	0,0	03.
2 Total number of individuals (including but n	ot limited to tr	1056	IISTE	a a	DOVE	e) Wr	10 F	eceived more than \$100	,uuu or reportat	НӨ			7
compensation from the organization		31										Yes	No
3 Did the organization list any former officer,	director trust	ee k	(AV 6	empl	love	e n	. hia	hest compensated emo	olovee on	Г	(X)		
line 1a? If "Yes," complete Schedule J for s								most componicated emp			3		Х
4 For any individual listed on line 1a, is the su												1	
and related organizations greater than \$150											4	X	
5 Did any person listed on line 1a receive or a	accrue compe	nsat	ion f	rom	any	unr	elat	ed organization or indiv	idual for services	;		100	Ĭ.,,
rendered to the organization? If "Yes," com	plete Schedul	e J f	or su	ich	pers	on ,					5		Х
Section B. Independent Contractors		_									04		
Complete this table for your five highest co the organization. Report compensation for										npensa	ation 1	rom	
the organization. Report compensation for	ine calendar y	ear	BITUI	ng v	ALLUI	Or W	T	(B)	year.		(0	2)	
Name and business	address							Description of s	ervices	G		, nsatio	n
Ashbrook Byrne Kresge LLO	3												
PO Box 8248, Cincinnati,	OH 4524	49					k	Outside Coun	sel	1	,18	2,9	36.
The Prosper Group								-11	****				
1051 Margate Dr, Greenwood								Marketing Se	rvices	1	<u>,15</u>	9,0	00.
Boyden Gray & Associates			L 1	.7t	h	St							4 -
NW STE 350, Washington, I	C 2000	5	_				_K	Outside Coun	sel		81	8,0	15.
Schaerr   Jaffe LLP			75.0	, ,	201	ነ ሰ ሳ	۱.	Outaida Cau-	551		ΔO	A 7	E 7
1717 K St NW STE 900, Was Cooper & Kirk, PLLC, 152	Men n.	l,	100 100 100 100 100 100 100 100 100 100	11	1 U L	<i>,</i> 0 0	+	Outside Coun	DCT		40	4,7	٠, د
Ave NW, Washington, DC 20	0036						_	Outside Coun			32	1,3	70.
2 Total number of independent contractors (i	_	ot li	mite	d to			sted	above) who received m	nore than				
\$100,000 of compensation from the organization	zation				12	2			10.000	No.			

\$100,000 of compensation from the organization

	IL V		nata ta anu lia	o in this Flort Mill			
_		Check if Schedule O contains a response or	note to any lin	(A) Total revenue	(B) Related or exempt	(C)	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts		a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-11 h Total. Add lines 1a-1f	31,464,833, 35,339,	31,464,833.		\Q	1
		E	Business Code				
Program Service Revenue	2	a b c d All other program service revenue					
_	15.000	g Total. Add lines 2a-2f					
	3 4 5	Investment income (including dividends, interest other similar amounts) Income from investment of tax-exempt bond pro Royalties		469,010.			469,010.
	6		(ii) Personal	0			
	7	c Rental income or (loss)  d Net rental income or (loss)  a Gross amount from sales of (i) Securities	(ll) Other				
venue		assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) 7a 7b 7b	)				
Other Revenue		d Net gain or (loss)  a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See					
	ı	Part IV, line 18 8a b Less: direct expenses 8b c Net income or (loss) from fundraising events					
	ļ	a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 9b					
	10	c Net income or (loss) from gaming activities a Gross sales of inventory, less returns and allowances b Less: cost of goods sold					
$\Box$		c Net income or (loss) from sales of inventory					
82		· -	usiness Code				41.121
Miscellaneous Revenue	11 a	·	900099	24,159. 15,000.			24,159. 15,000.
		с					
Ž,		d All other revenue					
_	_	e Total. Add lines 11a-11d		39,159.	0.	0.	509 160
	12	Total revenue. See instructions		31,973,002.	U,	υ,	508,169.

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

	Check if Schedule O contains a response include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	75,000.			
2	Grants and other assistance to domestic individuals. See Part IV, line 22	,5,000	.5,0001		
_	Grants and other assistance to foreign				
3					
	organizations, foreign governments, and foreign				-
	individuals. See Part IV, lines 15 and 16			- 4	) `
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1,240,826.	868,578.	281,840.	90,40
	trustees, and key employees	1,240,020.	000,570.	201,040.	JU, 201
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	3,730,842.	2,895,480.	495,990.	339,37
7	Other salaries and wages	3,/30,042.	4,055,400.	433,330.	337,374
8	Pension plan accruals and contributions (include	100 046	100 220	10 200	11 21
	section 401(k) and 403(b) employer contributions)	129,846.		18,200.	11,31
9	Other employee benefits	164,308.		27,877.	14,13
0	Payroll taxes	286,478.	217,119.	44,567.	24,79
1	Fees for services (nonemployees):			1	
a	Management				4.5.5
b	Legal	4,986,738.		43,304.	10,500
¢	Accounting	97,964.		97,964.	
d	Lobbying		1		
e	Professional fundraising services. See Part IV, line 17	. "			
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,		6		
-	column (A), amount, list line 11g expenses on Sch O.)	1,194,796.	300,554.	61,694.	832,548
2	Advertising and promotion	2,349,167.	2,349,167.		
3	Office expenses	56,324.	35,787.	16,450.	4,087
4	Information technology	311,914.	236,396.	48,524.	26,994
5	Royalties	1.00			
6	Occupancy	217,757.	165,036.	33,876.	18,845
7	Travel	182,167.	138,062.	28,340.	15,765
8	Payments of travel or entertainment expenses	,			
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	68,683.	52,443.	10,435.	5,805
0					
:1	Payments to affiliates				
2	Depreciation, depletion, and amortization		- 1		
		70,848.	53,695.	11,022.	6,131
3	Other expenses, Itemize expenses not covered	1010101	3370331	11,000.	0/101
4	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A).	STATE OF THE REAL PROPERTY.	The state of the s		
	amount list line 24e expenses on Schedule 0.)  Books, Subscriptions, R	12,227.	9,267.	1,902.	1,058
<b>a</b>	Bank / credit card char	11,048.	7,015.	1,440.	2,593
D	Bank / Credit Card Char	11,040.	7,013.	1,440.	4,333
C					
d					
	All other expenses	15 106 000	12 FEO 150	1 222 425	1 /0/ 2/0
5	Total functional expenses. Add lines 1 through 24e	15,186,933.	12,559,159.	1,223,425.	1,404,349
6	Joint costs. Complete this line only if the organization		31		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Part )	Balance Sheet			<del></del>
	Check if Schedule O contains a response or note to any line in this Part X	(A)		(B)
		Beginning of year		End of year
7	Cash - non-interest-bearing	1,205,748.	. 1	1,755,633
2		9,523,014.	2	26,357,197
3	1.2	423,291.	3	
-   4		20182 Da W. W	4	
6			y 11	
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons	4	5	
e	Loans and other receivables from other disqualified persons (as defined			
	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
3   7	Notes and loans receivable, net	2,000,000.	<b>#7</b>	2,050,000
7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8			8	1
ະ   ຣ		15,309.	9_	22,994
10	a Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a			A THE RESERVE TO THE N
	b Less: accumulated depreciation 10b		10c	
11			11	
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets	11	14	7.12
15		1	15	
16	Total assets. Add lines 1 through 15 (must equal line 33)	13,167,362.	16	30,185,824.
17	Accounts payable and accrued expenses	371,180.	17	604,103.
18	Grants payable		18	
19			19_	
20	Tax-exempt bond liabilities		20	. —
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
g 22	Loans and other payables to any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
sepilides 22	controlled entity or family member of any of these persons		22	
<b>-</b>   23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D	484 444	25	504 400
26	Total liabilities. Add lines 17 through 25	371,180.	26	604,103.
,	Organizations that follow FASB ASC 958, check here		( )	
<u> </u>	and complete lines 27, 28, 32, and 33.			00 004 504
를 27	Net assets without donor restrictions	12,372,891.	27	29,281,721.
28		423,291.	28	300,000.
Š	Organizations that do not follow FASB ASC 958, check here	Title II V		
<u> </u>	and complete lines 29 through 33.		QUAL	
29			29	
g 30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund balances 25 30 31 32 32 33 33 33 33 33 33 33 33 33 33 33	NA.	10 800 100	31	00 504 504
g 32	Total net assets or fund balances	12,796,182.	32	29,581,721.
33	Total liabilities and net assets/fund balances	13,167,362.	33	30,185,824.

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

3a

X

### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

## Public Charity Status and Public Support

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

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

OMB No. 1545-0047

**Open to Public** Inspection

Employer identification number

86-2190372 America First Legal Foundation Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 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). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross Investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. J Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (iv) is the organization listed in your governing document? (II) EIN (v) Amount of monetary (ill) Type of organization (vI) Amount of other (I) Name of supported (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

Schedule A (Form 990) 2024 America First Legal Foundation 86-21903

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

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

Se	ction A. Public Support						
_	endar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	Gifts, grants, contributions, and	(4) 2020	(B) EGE )	(0) 2022	1,7,000	(4)	
•	membership fees received. (Do not						
	include any "unusual grants.")		6,388,442.	44,399,187.	9,419,317.	31,464,833.	91,671,779.
2	Tax revenues levied for the organ-	2-0-X = 2			100	-	
	ization's benefit and either paid to						1
	or expended on its behalf				9965	49	
3	The value of services or facilities		7-1				
	furnished by a governmental unit to		1				
	the organization without charge						
4	Total. Add lines 1 through 3		6,388,442.	44,399,187.	9,419,317.	31,464,833.	91,671,779.
5	The portion of total contributions		The second		-		
	by each person (other than a	S and a second	5 1 3 Y 1 1 5	Alle allum # 18		1	
	governmental unit or publicly	Sec. 12				1	
	supported organization) included			4000			
	on line 1 that exceeds 2% of the						
	amount shown on line 11,		1 10 1 = 1 10 8 1		2		
	column (f)				1		31,000,560.
6	Public support. Subtract line 5 from line 4.						60,671,219.
Se	ction B. Total Support	70	0 = 0.7 = 0.1	- 1	1.5		
Cale	endar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7	Amounts from line 4	2 200	6,388,442.	44,399,187.	9,419,317.	31,464,833.	91,671,779.
8	Gross income from interest,	1					
	dividends, payments received on		( )	)			
	securities loans, rents, royalties,		. 0				
	and income from similar sources			01.0	226,330.	469,010.	695,340.
9	Net income from unrelated business					N - 52 -	
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain	100				1285	
	or loss from the sale of capital						
	assets (Explain in Part VI.)				761.	39,159.	39,920.
11	Total support. Add lines 7 through 10						92,407,039.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third, 1	ourth, or fifth tax y	ear as a section 5	501(c)(3)	
	organization, check this box and stor					<u></u>	X
	ction C. Computation of Publ				-		
14	Public support percentage for 2024 (	line 6, column (f), d	livided by line 11, o	column (f))		14	
	Public support percentage from 2023					15	%
168	33 1/3% supp <b>ort test - 2024.</b> If the c						
	stop here. The organization qualifies	as a publicly supp	orted organization				
k	33 1/3% support test - 2023. If the						
	and stop here. The organization qual						
17ε	10% -facts-and-circumstances tes	-					
	and if the organization meets the fact						
	meets the facts-and-circumstances to				-		
Ŀ	10% -facts-and-circumstances tes						10% or
	more, and if the organization meets the				-		
	organization meets the facts-and-circ						
18	Private foundation. If the organization	<u>n did not check a</u>	box on line 13, 16a	<u>a, 16b, 17a, or 17b</u>	, check this box a		
						Schedule A	(Form 990) 2024

Schedule A (Form 990) 2024 America First Legal Foundation
Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support				2.55		
Cale	endar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions.						
•	merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		182				1
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513					01	
4	Tax revenues levied for the organ-					0	
_	ization's benefit and either paid to				(	4	
	or expended on its behalf		8			)	
_	The value of services or facilities				/	10.00	
9					(/		
	furnished by a governmental unit to			3	$\Delta X /$		
_	the organization without charge	$\overline{}$			. 3		
	Total. Add lines 1 through 5						
7ε	Amounts included on lines 1, 2, and		į. O	. 1			
	3 received from disqualified persons				1	10 900 100	
t	Amounts included on lines 2 and 3 received from other than disqualified persons that				1		
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						N 1880 191 2
•	Add lines 7a and 7b			- 1			
8	Public support. (Subtract line 7c from line 5.)			1			
Sec	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9	Amounts from line 6	- 1					
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	70	2				
b	Unrelated business taxable income	< 1 1					
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b	- 10					
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
12	assets (Explain in Part VI.)						
	First 5 years, If the Form 990 is for the	l a croonization's fi	nt accord third	fourth or fifth toy	voor oc a coction f	01/o\/3\ organizati	on.
	check this box and stop here			iourui, or illuri tax	year as a section o	o r(c)(5) organizati	on,
	ction C. Computation of Publ						
	Public support percentage for 2024 (		-			15	<u>%</u>
	Public support percentage from 2023					16	<u>%</u>
Sec	ction D. Computation of Inve	stment Incom	e Percentage	_			
17	Investment income percentage for 20	24 (line 10c, colun	nn (f), divided by li	ne 13, column (f))		17	<u>%</u>
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2024. If the	organization did n	ot check the box	on line 14, and line	15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a	_					
b	33 1/3% support tests - 2023. If the						and
	line 18 is not more than 33 1/3%, che	-					
20	Private foundation. If the organization						
				, , , , , , , , , , , , , , , , , , , ,		Cabadula A	(Farm 000) 0004

### Part IV | Supporting Organizations

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

### Section A. All Supporting Organizations

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

		Yes	No
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	9c	100	
	10a		
	10b		
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Pa	rt IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			THE
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			2500
•	provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
	and of the fourth of the fourt	- 0	Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	100	
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in  Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations		10	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			9/103 100
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations		-	
	TOTAL TYPE OF CAPPER OF THE CA		Yes	No
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			110
1	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	- 7		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	-		-
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	- 5		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	$\square$	
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a		3333	
	significant voice in the organization's investment policies and in directing the use of the organization's		130	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	Anne		2 4
	supported organizations played in this regard.	3		
Sec	tion E, Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions	) <u>.</u>		
a	The organization satisfied the Activities Test, Complete line 2 below.	•		
ь	The state of the s			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
-	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	471.59	7 14	- X
- Cal	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			THE STATE OF
	how the organization was responsive to those supported organizations, and how the organization determined			
		2a	-	
	that these activities constituted substantially all of its activities.	28		-
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,		0.0	
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in	7-11-11		7.2
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			162
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	i m		31 .
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a	$\Box$	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	MIE		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated			
Check here if the organization satisfied the Integral			Part VI). See Instruction
All other Type III non-functionally integrated supp	orting organizations must comp	lete Sections A through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		-
6 Portion of operating expenses paid or incurred for production	luction or		
collection of gross income or for management, conserv	ation, or		
maintenance of property held for production of income	(see instructions) 6		< /
7 Other expenses (see instructions)	7	-	10
8 Adjusted Net Income (subtract lines 5, 6, and 7 from li	ne 4) 8	- 1	1
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use asse	ts (see		
instructions for short tax year or assets held for part of	year):		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	10		
d Total (add lines 1a, 1b, and 1c)	1d	1. 1	
e Discount claimed for blockage or other factors			THE TOTAL PROPERTY.
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use	assets 2		
3 Subtract line 2 from line 1d.	3	<u> </u>	
4 Cash deemed held for exempt use. Enter 0.015 of line 3	3 (for greater amount,		
see instructions).	. 4		
5 Net value of non-exempt-use assets (subtract line 4 from	m line 3) 5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7	<u> </u>	
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount	)		Current Year
1 Adjusted net income for prior year (from Section A, line	8, column A) 1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, li	ne 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, unle	ss subject to		
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization	s first as a non-functionally inter	grated Type III supporting on	ganization (see

Schedule A (Form 990) 2024

instructions).

Sect	ion D - Distributions		- 17		Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	ns	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.		T. 2	7	- 1
8	Distributions to attentive supported organizations to which ti	he organization is responsive	9		1
	(provide details in Part VI). See instructions.	-		8	
9	Distributable amount for 2024 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2024	ns	(III) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6			1	
2	Underdistributions, if any, for years prior to 2024 (reason-		/ .		
	able cause required - explain in Part VI). See instructions.		5/ 0		
3	Excess distributions carryover, if any, to 2024				
а	From 2019			15,14.07	
b	From 2020			2444	
c	From 2021			Little E	
d	From 2022			11/1/1	
e	From 2023				1900
f	Total of lines 3a through 3e			1 2 1 1	2 E 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
9	Applied to under distributions of prior years		_ ====		
h	Applied to 2024 distributable amount				
i	Carryover from 2019 not applied (see instructions)			101	- 31.50
1	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		100000000000000000000000000000000000000		
4	Distributions for 2024 from Section D,				
	line 7: \$				- 3 W - SW
a	Applied to underdistributions of prior years		373-0723		
b	Applied to 2024 distributable amount	\$40 Kiroso		22.401	
С	Remainder. Subtract lines 4a and 4b from line 4.	(28.1	10.274.00		
5	Remaining underdistributions for years prior to 2024, if	DIEN ETESTINE		1.1	112
	any. Subtract lines 3g and 4a from fine 2. For result greater				THE TANKE ! TO ISSUE
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2024, Subtract lines 3h		Times Times	TIT	
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.		THE RESERVE		
7	Excess distributions carryover to 2025. Add lines 3j and 4c.				
8	Breakdown of line 7:			3355	
_	Excess from 2020				The second second
_	Excess from 2021		8 TM - 1777 - 21		TO SERVE TO SERVE TO
	Excess from 2022				
	Excess from 2023			LE	
	Excess from 2024				2011 ACC   2011   1

Schedule A (Form 990) 2024

Schedule A (Form 990) 2024	America Fi	rst Legal	Foundat	tion	86-2190372 Page 8
Part VI Supplemental	Information. Provide 1	he explanations re	guired by Part	II. line 10: P	art II, line 17a or 17b; Part III, line 12;
Part IV. Section A.	lines 1, 2, 3b, 3c, 4b, 4c, 5	ia. 6. 9a. 9b. 9c. 11	a. 11b. and 11	c: Part IV. S	ection B. lines 1 and 2: Part IV, Section C,
line 1; Part IV, Sect	ion D, lines 2 and 3; Part I 6 and 8: and Part V. Secti	V, Section E, lines 1	1c, 2a, 2b, 3a a 16. Also como	and 3b; Part lete this par	V, line 1; Part V, Section B, line 1e; Part V, tor any additional information.
(See instructions.)					
Schedule A, Part	II, Line 10,	Explanat	ion for	Other	Income:
Other Income					
2023 Amount: \$	761.		·		
2024 Amount: \$	24,159.				
Litigation Settl	ement				
2024 Amount: \$	15,000.	<u></u> ,			
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### **SCHEDULE D**

(Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** Name of the organization America First Legal Foundation 86-2190372

	organization answered "Yes" on Form 990, Part IV, line	6.		
_		(a) Donor advise	d funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			1
3	Aggregate value of grants from (during year)		., .	
4	Aggregate value at end of year		10311237	0.1
5	Did the organization inform all donors and donor advisors in w	riting that the assets he	eld in donor advi	sed funds
	are the organization's property, subject to the organization's e			
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?			Yes No
Pa	rt II Conservation Easements. Complete if the orga	anization answered "Ye	s" on Form 990,	Part V line 7.
1	Purpose(s) of conservation easements held by the organizatio	n (check all that apply).		
	Preservation of land for public use (for example, recreati	ion or education)	Preservation	a historically important land area
	Protection of natural habitat		Preservation	certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contrib	ution in the form	
	day of the tax year.		7	Held at the End of the Tax Yea
a	Total number of conservation easements			2a
b				2b
C	Number of conservation easements on a certified historic structure	cture included on line 2	а	2c
d	Number of conservation easements included on line 2c acquir	ed after July 25, 2006,	and not	
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	asod, extinguished, or	terminated by th	e organization during the tax
	year	· V		
4	Number of states where property subject to conservation vase			
5	Does the organization have a written policy regarding the period		tion, handling of	
	violations, and enforcement of the conservation easements it is			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violations, ar	nd enforcing cor	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and en	forcing conserva	ation easements during the year
	Dan and a standard and a standard and a			7-1/41/D1/5
8	Does each conservation easement reported on line 2d above s and section 170(h)(4)(B)(ii)?			Dyes Da
9	In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnot			
	organization's accounting to conservation easements.	nte to the organization s	ili lai iciai statei i	ients that describes the
Pa	rt III Organizations Maintaining Collections of	Art. Historical Tre	asures, or C	ther Similar Assets.
	Complete if the organization answered "Yes" on Form 9		,	
1a	If the organization elected, as permitted under FASB ASC 958		enue statement	and balance sheet works
-	of art, historical treasures, or other similar assets held for publi			
	service provide in Part XIII the text of the footnote to its finance			
Ь	If the organization elected, as permitted under FASB ASC 958			
_	art, historical treasures, or other similar assets held for public e	•		
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	If the organization received or held works of art, historical treas			
	-			V 7 F1 - 11 - 1
	the following amounts required to be reported under FASB AS	C 958 relating to these	items:	
а	the following amounts required to be reported under FASB AS Revenue included on Form 990, Part VIII, line 1			\$

Sche	dule D (Form 990) (Rev. 12-2024) Americ	a First Le	gal Founda	ation		90372	
	t III Organizations Maintaining C						ea)
3	Using the organization's acquisition, access	ion, and other record	ls, check any of the	e following that mak	e significant use of its	5	
	collection items (check all that apply).						
а	Public exhibition	d		change program			
þ	Scholarly research	е	Other				
C	Preservation for future generations						
4	Provide a description of the organization's c	ollections and explai	n how they further	the organization's e	xempt purpose in Pa	rt XIII.	
5	During the year, did the organization solicit of	or receive donations	of art, historical tre	asures, or other sim	ilar assets	_	
	to be sold to raise funds rather than to be m					Yes	No.
Pai	t IV Escrow and Custodial Arran	-	te if the organizatio	on answered "Yes" o	on Form 990, Part IV,	line 🖣 or	
_	reported an amount on Form 990, Pa				4		
1a	Is the organization an agent, trustee, custod		, , , , , , , , , , , , , , , , , , ,			1	
	on Form 990, Part X?					Yes	☐ No
þ	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:			-	
						Amount	
C	Beginning balance				1c		
d	Additions during the year						
e	Distributions during the year		***************************************		10		
f	Ending balance				1f		
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or o	custodial account lia	bility?	Yes	U No
	If "Yes," explain the arrangement in Part XIII.						<u> </u>
Pai	1 V Endowment Funds Complete if		wered "Yes" on Fo	orm 990, Pare to line	10.		
		(a) Current year	(b) Prior year	Two years back	(d) Three years back	(e) Four y	ears back
1a	Beginning of year balance		-				
b	Contributions						
C	Net investment earnings, gains, and losses			)			
d	Grants or scholarships		0	1			
•	Other expenditures for facilities						
	and programs						
f	Administrative expenses						
g	End of year balance		V				
2	Provide the estimated percentage of the cur	rent year end balanc	(line 1g, column (	(a)) held as:			
а	Board designated or quasi-endowment		%				
b	Permanent endowment	1/4					
C	Term endowment	4					
	The percentages on lines 2a, 2b, and 2 sho	ould squal 100%.					
3a	Are there endowment funds not in the post		ation that are held	and administered fo	r the		
	organization by:	V				Y	es No
	(i) Unrelated organizations?					3a(i)	
ь	If "Yes" on line 3a(ii), are the related organiza						
4	Describe in Part XIII the Intended uses of the					-	
Pai	t VI Land, Buildings, and Equipm						
	Complete in the organization answere	d "Yes" on Form 990	), Part IV, line 11a.	See Form 990, Part	X, line 10.		
	Description of property	(a) Cost or o	ther (b) Cos	t or other (c)	Accumulated	(d) Book	/alue
		basis (investr	nent) basis	(other)	lepreciation		
1a	Lago						
ь	Buildings						
C	Leasehold improvements		0				
d	Equipment						
	Other	V					
	Add lines 1s through 1e (Column (d) must a		X. line 10c. colum	n (B))			0.

Investments - Other Securities  Complete if the organization answered "Yes" o	n Form 990. Part IV. line	e 11b. See Form 990. Part X. line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		Constant Street
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)	: V	
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		
Part VIII Investments - Program Related.  Complete if the organization answered "Yes" o	n Form 990 Part IV line	a 11c See Form 990 Part Viline 13
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)	977 8	V 4
(3)		
(4)		
(5)	1000	
(6)		
(7)	-	
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		
Part IX Other Assets		44 LO . 5. 11 000 Pu4W lbs 45
Complete if the organization answered "Yes" o	n Form 990, Part IV, line escription	(b) Book value
(1)	SS Priori	(5) 5551, 74135
(2)	-	
(3)	$\overline{}$	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)	P-07-P-	
Total. (Column (b) must equal Form 990, Part X, line 15, col.	(B))	
Part X Other Liabilities  Complete if the organization answered "Yes" or	n Form 990. Part IV. line	a 11e or 11f. See Form 990. Part X. line 25.
1. (a) Description of liability	, , , , , , , , , , , , , , , , , , , ,	(b) Book value
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total, (Column (b) must equal Form 990, Part X, line 25, col.	(B))	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

28

Schedule I (Form 990) (Rev. 12-2024) 2 | Employer identification number 86-2190372 Open to Public To Advance the Rule of OMB No. 1545-0047 Inspection (h) Purpose of grant or assistance law in the States X Yes 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 Does the organization maintain records the ubstrating the amount of the grants or assistance, the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Go to www.irs.gov/Form990 for instructions and the latest information. Grants and Other Assistance to Organizations, 0 (e) Amount of assistance noncash Describe in Part IV the organization's procedure, for mankering the use of grant funds in the United States. Attach to Form 990. recipient that received more than \$5,000. Part II can be dublicated if additional space is needed. 15 000 (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Legal Foundation (c) IRC section (if applicat 501(c)(4) For Paperwork Reduction Act Notice, see the Instructions for Form 990, Enter total number of other organizations listed in the line 1 table 46-5130903 (b) EIN criteria used to award the grants or assistance FIEB General Information on Grants and 1 (a) Name and address of organization America 1747 Pennsylvania Avenue, NW Rule of Law Defense Fund or government Washington, DC 20006 Name of the organization Department of the Treasury (Rev. December 2024) Internal Revenue Service SCHEDULE 1 (Form 990) Part Part II

86-2190372

Page 2

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

Schedule I (Form 990) (Rev. 12-2024) (f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Grantee shall, upon request from AFL, provide AFL with copies of documents Supplemental Information, Provide the information required in Part I, line 2; Part III, column (by and any other additional information. accounts. (d) Amount of non-cash assistance books, records, and (c) Amount of cash grant (b) Number of recipients relevant to this Agreement, including (a) Type of grant of assistance Part I, Line 2: 432102 01-18-25 Part IV

#### SCHEDULE J (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

## **Compensation Information**

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

America First Legal Foundation

Employer identification number 86-2190372

Pa	art I 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.	1		
	First-class or charter travel Housing allowance or residence for personal use	1		
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees	3		
	Discretionary spending account Personal services (such as maid, chauffeur, pher)			
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				J.
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 117	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	11 1		
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study		DU.	
	Form 990 of other organizations  X 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		X
	Participate in or receive payment from a supplemental nonqualified reprement plan?	4b		X
	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		201	
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		3773	
5	For persons listed on Form 990, Part VII, section 1, line 1a, did the organization pay or accrue any compensation		100	
	contingent on the revenues of:			
a	The organization?	5a		X
	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Par III.	400		
6	For persons listed on Form 990, Part VII, Section A, line 1a, dld the organization pay or accrue any compensation			
	contingent on the net earlings of			
а	The organization?	6a		X
Ь	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.		9.1	14-14
7	For persons sided on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		3	
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	-4		4
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) (Rev. 12-2024)

Page 2

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

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

	4							
)	1	(B) Breakdown of W-	O.	and/or 1099-NEC	and/or 1099-MISC and/or 1099-NEC (C) Retirement and compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title	7	# Base	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Gene Hamilton	€	520 738.	125,000.	0	17,250.	10,512.	673,500.	0
VP, General Counsel, Secretary	€	120,000	0.	0 •			120,000.	0.
(2) Stephen Miller	(3)	452,338.	75,000.	16.	17,250.	22,662.	567,326.	0
President, Executive Director	Ξ	II	0	0.	0.	0.		0.
(3) Daniel Epstein	ω	400,000	.0 ~ //		17,250.	0	417,250.	0
Lawyer	Œ		0.		0.	0		0.
(4) Ian Prior	(i)	219,563.		380.	0	17,437.	237,380.	0
Lawyer	⊞	-	70	0.	0	0	-	0
(5) Reed Rubinstein	Θ	276,552.		32	14,443.	11,990.	303,305.	0
Lawyer	8	0		0.	0	0	0	0
(6) Lathika Mary Thomas	ε	27,548.	215,647	0.	827.	16.	244,038.	0
Chief Development Officer	€	0		0	0	0	0	0
(7) Andrew Block	ε	199,044.	8,000.	335.	10,016.	926	218,341.	0.
Lawyer	€	0.	0 •	0	0.	* 0	0	0
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Schedule J (Form 990) (Rev. 12-2024)

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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.	
Schedule J, Part L, B(i):		
Gene Hamilton received \$150,000 during FY 2024, which was an adjustment		
for the past three years of compensation which the board believed was		
below market.		
	0.000	
Stephen Miller received SIOW, 000 during FY 2024, which was an		
Stephen Miller received \$170,000 during FY 2024, which was an adjustment for the past three years of compensation which the board	15-1-1001	- 0
believed was below market.		
	- 4 - 53s	
Schedule J, Part II, B(ii):		
Gene Hamilton received \$125,000 bonus during FY 2024. \$25,000 is		
related to 2023 performance and \$100,000 is related to 2024	1100 100 100 100 100 100 100 100 100 10	
performance.	250	
	- 37	
Stephen Miller received \$75,000 bonus during FY 2024. \$25,000 is		
related to 2023 performance and \$50,000 is related to 2024 performance.		
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#### SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

### **Noncash Contributions**

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

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization

America First Legal Foundation

Employer identification number 86-2190372

Types of Property Part I (d) (a) (c) Noncash contribution Number of Method of determining Check if contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art - Works of art Art - Historical treasures Art - Fractional interests Books and publications Clothing and household goods Cars and other vehicles Boats and planes ..... Intellectual property 8 .FMV Securities - Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous Qualified conservation contribution -13 Historic structures Qualified conservation contribution - Other... 14 Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 Collectibles 18 Food inventory 19 Drugs and medical supplies \_\_\_\_\_ 20 21 Taxidermy 22 Historical artifacts Scientific specimens 23 24 Archeological artifacts 25 Other 26 Other Other 28 Other Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 Yes No 30a During the year, of the aganization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at heart years from the date of the initial contribution, and which isn't required to be used for X exempt authorses or the entire holding period? 30a b If "Yes," describe the arrangement in Part II. X Does to organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? X 32a b If "Yes," describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

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

Schedule M (Form 990) 2024

Schedule M	(Form 990) 2024	America	First	Legal	Foundation	86-2190372	Page 2
Part II	Supplemental is reporting in Part this part for any ac	Information I, column (b), the	l- Provide the number of the number of the terms of the t	e informatio f contributio	Foundation n required by Part I, lines 30t ns, the number of Items rece	o, 32b, and 33, and whether the organizatived, or a combination of both. Also com	ition plete
	this part for any ac	TOTAL STATE					
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#### **SCHEDULE 0** (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization  America First Legal Foundation	86-2190372
Form 990, Part VI, Section A, line 8b:	00 2130072
There are no committees with authority to act on behalf o	f the governing
body.	
Form 990, Part VI, Section B, line 11b:	
The Board reviews a copy of the 990 prior to filing.	
House 000 Pout MT Continu D Time 12c.	$\rightarrow$
Form 990, Part VI, Section B, Line 12c: The organization regularly and consistently monitors and	an femore
compliance with the conflict of interest policy. Officers	and directors are
required to disclose conflicts of interest.	***************************************
	1
Form 990, Part VI, Section B, Line 15:	
Show comparable data to similar organizations and vote to	approve
compensation by independent directors.	
Form 990, Part VI, Line 17, List of States receiving copy	of Ross 000.
AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NH, NM, NY, NC,	
VA, WV, WI	ND,OK,FR,KI,BC,IN
VIII/WY/WZ	
Form 990, Part VI, Section C, Line 19:	4.29WG
Foundation makes these documents available to the public	upon request.
Form 990, Part XII, line 2c	majatant adah
The organization's oversight process of audit has been coprior years.	nsistent with
prior years.	* =
	**
	#2.50m
	V V V
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Schedule R (Form 990) (Rev. 1-2025) (g) Section 512(b)(13) ŝ OMB No. 1545-0047 Employer identification number Open to Public Inspection controlled entlty? Direct controlling Yes × 86-2190372 ear ear Form 990, Part IV, line 34, because it had one or more related tax-exempt entity Legal Foundation Direct controlling America First End-of-year assets (e) status (if section Public charity 501(c)(3)) Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Total income Related Organizations and Unrelated Partnerships Exempt Code চ Go to www.irs.gov/Form990 for instructions and the latest information. section (c)(4) Ē mplete if the organization answered "Yes" on Form 990, Part IV, line 33, Legal domicile (state or Legal domicile state or foreign country) foreign country! Attach to Form 990. Identification of Related Tax-Exempt Organizations. Complete if the organization answered organizations during the tax year. Delaware America First Legal Foundation Primary activity Primary activity 9 social Welfare For Paperwork Reduction Act Notice, see the Instructions for Form 990. Name, address, and EIN (if applicable) Identification of Disregarded Entit Citizens for Sanity - 88-2968375 Name, address, and EIN of related organization of disregarded entity 300 Independence Ave SE washington, DC 20003 Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Rev. January 2025) (Form 990) Part II Part

Schedule R (Form 990) (Rev. 1-2025) America First Legal Foundation

86-2190372

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

(a) (b) (b)	(c)	6	(6)	9	(0)	(4)	9	9	3
s, and EIN Prima janization	Legal domicile (state or foreign county)	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share	Share of end-of-year assets	Disproportionate allocations?	Soof S	General or managing partner?	Perc
8									*
	C	<							
		15							
			()						
Part IV Identification of Related Organizations Taxable as a Corporation or Trust organizations treated as a corporation or trust during the tax year.	as a Corpor ing the tax ye		Complete if the outaniz	the opparization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related	ss* on Form 990,	Part IV, line	34, because it ha	d one or n	nore related
(a) Name, address, and EIN of related organization	Primar	(b) Primary activity	(c) Cineci of State or State or Enforce or E	comparing Type of entity (C corp. S corp. or trust)		Share of total income	(9) Share of end-of-year assets	(h) Percentage ownership	Section 512(b)(13) controlled entity7
				5×				1	
					(		1000		
					9	~			
						5	1		
432162 10-23-24			38				Schedule R (Form 990) (Rev. 1-2025)	rn 990) (F	lev. 1-2025)

86-2190372

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

Note: Complete line 1 if any entity is disted in Parts II, III, or IV of this schedule.					Yes No
During the tax year, did the organizations and of the following transactions with one or more related organizations listed in Parts IHV?	tions with one or more re	lated organizations listed in Par	ts IHV?		
Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	ntity			<del>1</del> 8	
Giff, grant, or capital contribution to related opportunits)				<b>a</b>	×
S				2	×
Loans or loan quarantees to or for related organization(s)		· · · · · · · · · · · · · · · · · · ·		70	×
280				<del>-</del>	Н
Dividends from related organization(s)				*	
Sale of assets to related organization(s)		经存储 计可以存储 医甲状腺素 计连续存储 计连续存储 医克里氏病 医医氏结束 医医皮肤炎 医皮肤蛋白 医医皮肤炎		ę	t
Purchase of assets from related organization(s)				£	H
Exchance of assets with related organization(s)				¥	$^{\dagger}$
Lease of facilities, equipment, or other assets to related organization(s)				=	Н
lease of facilities equipment or other secals from related organizational	0			è	
Performance of services or membership or fundraising solicitations for related	orbanization(s)			=	×
Performance of services or membership or fundraising solicitations by related of	Organization(s)			Ę	r
Sharing of facilities, equipment, mailing lists, or other assets with related organiza	ization(s)			ŧ	
Sharing of paid employees with related organization(s)				10	×
Reimbursement paid to related organization(s) for expenses				9	×
Reimbursement paid by related organization(s) for expenses	)			19	Н
Other transfer of cash or property to related organization(s)				+	
Other transfer of cash or property from related organization(s)		1		18	9 1
If the answer to any of the above is "Yes," see the instructions for information on who must complete this li	on who must complete the	op geligding to	vered relationships and transaction thresholds.	2	
(a) Name of related organization	(b) Transaction type (a-s)	Amount implied	(d) Method of determining amount involved	paylox	
			5		
			12		
			1		
	39		Schedule R (Form 990) (Rev. 1-202	990) (Re	

Page 4

Schedule R (Form 990) (Rev. 1-2025)

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

organization. See incructions regarding exclusion for certain investment partnerships.	address, and EIN Remark activity (state or foreign country)  (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		2
that was not a related organization. S	(a) Name, address, and EIN of entity				

edule R (Form 990) (Rev. 1-2025) America First Legal Foundation	86-2190372 Page
edule R (Form 990) (Rev. 1-2025) America First Legal Foundation  art VII Supplemental Information	
Provide additional information for responses to questions on Schedule R. See instructions.	<u> </u>
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