

Return of Organization Exempt From Income Tax

Form 990

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2023

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning and ending
B Check if applicable:
C Name of organization: ELECTRONIC PRIVACY INFORMATION CENTER
D Employer identification number: ** - ***5921
E Telephone number: (202)483-1140
G Gross receipts \$: 5,805,226.
H(a) Is this a group return for subordinates? Yes [X] No
H(b) Are all subordinates included? Yes No
I Tax-exempt status: [X] 501(c)(3)
J Website: EPIC.ORG
K Form of organization: [X] Corporation
L Year of formation: 2001
M State of legal domicile: DC

Part I Summary
Table with columns: Activities & Governance, Revenue, Expenses, Net Assets or Fund Balances. Rows include mission statement, governance metrics, revenue breakdown, expenses, and net assets.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of officer: ALAN BUTLER, PRESIDENT
Date:
Print/Type preparer's name: OLIVIA A. HUTTON, CPA
Preparer's signature: OLIVIA A. HUTTON, CP
Date: 11/06/24
Check if self-employed:
PTIN: P00064585
Firm's name: YOUNT, HYDE & BARBOUR, PC
Firm's EIN: ** - ***9263
Firm's address: 702 KING FARM BOULEVARD, SUITE 610, ROCKVILLE, MD 20850
Phone no.: 301-917-3040

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: EPIC'S MISSION IS TO SECURE THE FUNDAMENTAL RIGHT TO PRIVACY IN THE DIGITAL AGE FOR ALL PEOPLE THROUGH ADVOCACY, RESEARCH, AND LITIGATION.

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 2,420,343. including grants of \$) (Revenue \$ 55,597.) EPIC WORKS TO SECURE THE COLLECTIVE HUMAN RIGHT TO PRIVACY IN THE DIGITAL AGE. WE SEEK TO ESTABLISH COMPREHENSIVE PROTECTIONS AGAINST THE UNCONSTRAINED COMMERCIAL EXTRACTION OF PERSONAL DATA BECAUSE PRIVACY IS ESSENTIAL TO A FUNCTIONING DEMOCRACY. EPIC ALSO PROMOTES ROBUST LIMITS ON AND OVERSIGHT OF SURVEILLANCE SYSTEMS. AND WE ADVOCATE FOR A HUMAN-RIGHTS BASED APPROACH TO AI POLICY THAT ENSURES NEW TECHNOLOGIES ARE SUBJECT TO DEMOCRATIC GOVERNANCE. OUR WORK TAKES THE FORM OF EDUCATION, ADVOCACY, AND LITIGATION CARRIED OUT IN THE PUBLIC INTEREST.

4b (Code:) (Expenses \$ 228,798. including grants of \$) (Revenue \$) EPIC OPEN GOVERNMENT PROJECT: PROMOTES GOVERNMENT TRANSPARENCY, PURSUES FREEDOM OF INFORMATION ACT LITIGATION, PUBLISHES LEADING OPEN GOVERNMENT MANUAL AND TRAINS LAW STUDENTS.

4c (Code:) (Expenses \$ 94,642. including grants of \$) (Revenue \$) EPIC INTERNET PUBLIC INTEREST OPPORTUNITIES PROGRAM: AN INTENSIVE INTERNSHIP FOR QUALIFIED STUDENTS AND RECENT GRADUATES WITH AN EMPHASIS ON LAW, PUBLIC POLICY, AND TECHNOLOGY.

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 2,743,783.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21, with sub-questions a-f for questions 11, 12, and 20. 'X' marks indicate 'Yes' responses for questions 1, 2, 4, 5, 6, 7, 8, 9, 10, 11a, 11b, 11e, 11f, 12a, 12b, 13, 14a, 14b, 15, 16, 17, 18, 19, 20a, 20b, and 21.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding organizational reporting and compliance.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096 and backup withholding rules.

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

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

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 13; 1b Enter the number of voting members included on line 1a... 12; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders? 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? X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X; b Each committee with authority to act on behalf of the governing body? X; 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 X

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X; b Other officers or key employees of the organization X; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed DC
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
THE ORGANIZATION - (202)483-1140
1519 NEW HAMPSHIRE AVE NW, WASHINGTON, DC 20036

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ALAN BUTLER PRESIDENT	40.00	X					229,992.	0.	35,666.	
(2) CAITRIONA FITZGERALD DEPUTY DIRECTOR	40.00				X		200,404.	0.	36,572.	
(3) JERAMIE SCOTT SENIOR COUNSEL/PROGRAM DIR	40.00				X		163,171.	0.	34,826.	
(4) JOHN DAVISSON SENIOR COUNSEL/PROGRAM DIR	40.00				X		154,003.	0.	17,888.	
(5) MEGAN IORIO SENIOR COUNSEL	40.00				X		136,500.	0.	34,499.	
(6) ENID ZHOU SENIOR COUNSEL	40.00				X		133,450.	0.	15,888.	
(7) SHOSHANA ZUBOFF CHAIR	0.00	X		X			0.	0.	0.	
(8) CHRISTOPHER WOLF SECRETARY	0.00	X		X			0.	0.	0.	
(9) JEFF JONAS TREASURER	0.00	X		X			0.	0.	0.	
(10) ARI WALDMAN CHAIR-ELECT	0.00	X		X			0.	0.	0.	
(11) CHRISTINE BORGMAN BOARD MEMBER	0.00	X					0.	0.	0.	
(12) HARRY LEWIS BOARD MEMBER	0.00	X					0.	0.	0.	
(13) SHERRY TURKLE BOARD MEMBER	0.00	X					0.	0.	0.	
(14) ANNA LYSYANSKAYA BOARD MEMBER	0.00	X					0.	0.	0.	
(15) ROGER MCNAMEE BOARD MEMBER	0.00	X					0.	0.	0.	
(16) LEN KENNEDY BOARD MEMBER	0.00	X					0.	0.	0.	
(17) ANNE WASHINGTON BOARD MEMBER	0.00	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) DANIELLE CITRON BOARD MEMBER	0.00	X						0.	0.	0.
1b Subtotal							1,017,520.	0.	175,339.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							1,017,520.	0.	175,339.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 8

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	3,654,710.				
	g	Noncash contributions included in lines 1a-1f	1g	\$				
	h	Total. Add lines 1a-1f		3,654,710.				
Program Service Revenue	2 a	PROGRAM SERVICE FEES	Business Code					
			900099	55,000.	55,000.			
	b	PUBLICATION PROGRAM	900099	597.	597.			
	c							
	d							
	e							
	f	All other program service revenue						
g	Total. Add lines 2a-2f		55,597.					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		59,972.			59,972.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	6a	(i) Real				
				(ii) Personal				
	b	Less: rental expenses ...	6b					
	c	Rental income or (loss)	6c					
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities				
				(ii) Other				
					1,949,557.			
	b	Less: cost or other basis and sales expenses	7b	1,909,535.				
	c	Gain or (loss)	7c	40,022.				
	d	Net gain or (loss)		40,022.			40,022.	
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a		85,390.				
			b	Less: direct expenses	8b	79,188.		
			c	Net income or (loss) from fundraising events		6,202.		6,202.
9 a	Gross income from gaming activities. See Part IV, line 19	9a						
			b	Less: direct expenses	9b			
			c	Net income or (loss) from gaming activities				
10 a	Gross sales of inventory, less returns and allowances	10a						
			b	Less: cost of goods sold	10b			
			c	Net income or (loss) from sales of inventory				
Miscellaneous Revenue	11 a		Business Code					
	b							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d						
12	Total revenue. See instructions		3,816,503.	55,597.	0.	106,196.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	273,708.	164,226.	54,741.	54,741.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,799,747.	1,603,000.	126,792.	69,955.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	51,959.	46,703.	3,190.	2,066.
9 Other employee benefits	251,745.	223,143.	18,217.	10,385.
10 Payroll taxes	159,034.	137,543.	12,981.	8,510.
11 Fees for services (nonemployees):				
a Management				
b Legal	425.		425.	
c Accounting	94,747.	81,172.	8,109.	5,466.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	34,777.			34,777.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	35,603.	30,502.	3,047.	2,054.
12 Advertising and promotion				
13 Office expenses	44,712.	36,799.	5,891.	2,022.
14 Information technology				
15 Royalties				
16 Occupancy	34,874.	29,877.	2,985.	2,012.
17 Travel	13,637.	12,003.	181.	1,453.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	124,354.	40,932.	1,164.	82,258.
20 Interest	75,765.	64,910.	6,484.	4,371.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	163,617.	140,175.	14,003.	9,439.
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a DUES & SUBSCRIPTIONS	45,896.	39,320.	3,928.	2,648.
b PROPERTY TAXES	40,664.	34,838.	3,480.	2,346.
c COMMUNICATIONS	29,361.	25,154.	2,513.	1,694.
d PRINTING & REPRODUCTION	14,105.	12,084.	1,207.	814.
e All other expenses	21,987.	21,402.	349.	236.
25 Total functional expenses. Add lines 1 through 24e	3,310,717.	2,743,783.	269,687.	297,247.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	954,741.	2	712,981.
	3 Pledges and grants receivable, net	39,770.	3	131,279.
	4 Accounts receivable, net	4,214.	4	0.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	582.	9	603.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,448,157.		
	b Less: accumulated depreciation	10b 518,259.	10c	3,929,898.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	590,641.	12	1,392,061.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	33,760.	15	28,512.
16 Total assets. Add lines 1 through 15 (must equal line 33)	5,710,273.	16	6,195,334.	
Liabilities	17 Accounts payable and accrued expenses	42,368.	17	45,643.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	1,656,158.	23	1,578,265.
	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	847.	25	0.
	26 Total liabilities. Add lines 17 through 25	1,699,373.	26	1,623,908.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	4,010,900.	27	4,496,426.
	28 Net assets with donor restrictions		28	75,000.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	4,010,900.	32	4,571,426.
	33 Total liabilities and net assets/fund balances	5,710,273.	33	6,195,334.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,816,503.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,310,717.
3	Revenue less expenses. Subtract line 2 from line 1	3	505,786.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,010,900.
5	Net unrealized gains (losses) on investments	5	54,740.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	4,571,426.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?
- 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

	Yes	No
1		
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2023)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization: ELECTRONIC PRIVACY INFORMATION CENTER; Employer identification number: ** - *** 5921

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 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).
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
6 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).
8 A community trust described in section 170(b)(1)(A)(vi).
9 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.
10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions...
11 An organization organized and operated exclusively to test for public safety.
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).
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s)...
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s)...
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s)...
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated...
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row at the bottom.

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2130046.	2938656.	1608608.	2481609.	3660912.	12819831.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	2130046.	2938656.	1608608.	2481609.	3660912.	12819831.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						6051904.
6 Public support. Subtract line 5 from line 4.						6767927.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	2130046.	2938656.	1608608.	2481609.	3660912.	12819831.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	215,338.	38,379.	67,167.	36,735.	59,972.	417,591.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		25,000.				25,000.
11 Total support. Add lines 7 through 10						13262422.
12 Gross receipts from related activities, etc. (see instructions)					12	64,754.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	51.03	%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	52.33	%
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2023		
a	From 2018		
b	From 2019		
c	From 2020		
d	From 2021		
e	From 2022		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2023 distributable amount		
i	Carryover from 2018 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2023 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2023 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2024. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2019		
b	Excess from 2020		
c	Excess from 2021		
d	Excess from 2022		
e	Excess from 2023		

Schedule A (Form 990) 2023

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization ELECTRONIC PRIVACY INFORMATION CENTER	Employer identification number ** - *** 5921
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures \$ _____
- 3 Volunteer hours for political campaign activities _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)	118,551.													
c Total lobbying expenditures (add lines 1a and 1b)	118,551.													
d Other exempt purpose expenditures	2,625,233.													
e Total exempt purpose expenditures (add lines 1c and 1d)	2,743,784.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	287,189.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000,</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000,</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000,</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000,</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000,</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	not over \$500,000,	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000,	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
not over \$500,000,	20% of the amount on line 1e.													
over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.													
over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.													
over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.													
over \$17,000,000,	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)	71,797.													
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount	254,095.	254,095.	278,979.	287,189.	1,074,358.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,611,537.
c Total lobbying expenditures	83,013.	77,314.	73,924.	118,551.	352,802.
d Grassroots nontaxable amount	63,524.	63,524.	69,745.	71,797.	268,590.
e Grassroots ceiling amount (150% of line 2d, column (e))					402,885.
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation...; 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

Table with 3 columns: Question, Yes, No. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid); 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?; 5 Taxable amount of lobbying and political expenditures. See instructions

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Blank lines for providing supplemental information as required by the instructions.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization ELECTRONIC PRIVACY INFORMATION CENTER Employer identification number ** - *** 5921

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number and acreage, number of easements on historic structures, and monitoring expenses. Includes a sub-table for 'Held at the End of the Tax Year' with rows 2a-2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures, and amounts required to be reported under FASB ASC 958.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2023

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations? | 3a(i) | |
| (ii) Related organizations? | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,339,779.		1,339,779.
b Buildings		2,810,248.	349,154.	2,461,094.
c Leasehold improvements				
d Equipment		32,899.	29,474.	3,425.
e Other		265,231.	139,631.	125,600.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				3,929,898.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) INVESTMENTS	1,392,061.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	1,392,061.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets

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

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

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(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 organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	3,871,243.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	54,740.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	54,740.
3	Subtract line 2e from line 1	3	3,816,503.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	3,816,503.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	3,310,717.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	3,310,717.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	3,310,717.

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

IN JUNE 2006, THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) RELEASED FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES. FOR THE YEAR ENDED DECEMBER 31, 2023, THE ORGANIZATION HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10 AND DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2023

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization

ELECTRONIC PRIVACY INFORMATION CENTER

Employer identification number

-*5921

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a [X] Mail solicitations
b [X] Internet and email solicitations
c [X] Phone solicitations
d [X] In-person solicitations
e [X] Solicitation of non-government grants
f [] Solicitation of government grants
g [] Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? [] Yes [X] No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

Table with 6 columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col. (i), (vi) Amount paid to (or retained by) organization. Includes entry for AMERICAN PHILANTHROPIC STRENGTHENING CIVIL SOCIETY - ASSISTS IN FUNDRAISING.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		CHAMPIONS OF FREEDOM AWAR (event type)	(event type)	NONE (total number)	
Revenue	1	Gross receipts	85,390.		85,390.
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)	85,390.		85,390.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	51,418.		51,418.
	7	Food and beverages			
	8	Entertainment	5,850.		5,850.
	9	Other direct expenses	21,920.		21,920.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			79,188.
11	Net income summary. Subtract line 10 from line 3, column (d)			6,202.	

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____
- c If "Yes," enter name and address of the third party:

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: AMERICAN PHILANTHROPIC STRENGTHENING CIVIL SOCIETY

(I) ADDRESS OF FUNDRAISER: 119 N. HIGH STREET, WEST CHESTER, PA 19380

Part IV Supplemental Information *(continued)*

Lined area for supplemental information.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

ELECTRONIC PRIVACY INFORMATION CENTER

Employer identification number

****-***5921**

Part I Questions Regarding Compensation

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

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

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

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

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

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

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

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

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

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

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

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

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

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

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

Schedule J (Form 990) 2023

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ALAN BUTLER PRESIDENT	(i)	229,992.	0.	0.	0.	35,666.	265,658.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CAITRIONA FITZGERALD DEPUTY DIRECTOR	(i)	200,404.	0.	0.	0.	36,572.	236,976.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JERAMIE SCOTT SENIOR COUNSEL/PROGRAM DIR	(i)	163,171.	0.	0.	0.	34,826.	197,997.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JOHN DAVISSON SENIOR COUNSEL/PROGRAM DIR	(i)	154,003.	0.	0.	0.	17,888.	171,891.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MEGAN IORIO SENIOR COUNSEL	(i)	136,500.	0.	0.	0.	34,499.	170,999.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

Multiple horizontal lines for providing supplemental information.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

ELECTRONIC PRIVACY INFORMATION CENTER

Employer identification number

-*5921

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

CIVIL LIBERTIES IN THE INFORMATION AGE.

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

"THE MEMBERS OF EPIC ARE DISTINGUISHED EXPERTS IN LAW, TECHNOLOGY, AND
PUBLIC POLICY."

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

"THE CORPORATION SHALL DESIGNATE AS MEMBERS, FOLLOWING NOMINATION BY THE
CURRENT MEMBERS AND A VOTE OF THE BOARD, DISTINGUISHED EXPERTS IN LAW,
TECHNOLOGY, AND PUBLIC POLICY."

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

THE ORGANIZATION'S OUTSIDE ACCOUNTANT GOES OVER THE 990 WITH A BOARD MEMBER
AND EXPLAINS ANY QUESTIONS OR CONCERNS WITH THAT BOARD MEMBER. THE 990 IS
THEN PROVIDED TO ALL OTHER BOARD MEMBERS FOR REVIEW BEFORE THE 990 IS
FILED.

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

THE EXECUTIVE DIRECTOR AND BOARD OF DIRECTORS REGULARLY DISCUSS THE
POTENTIAL FOR CONFLICTS OF INTEREST WITH THE EMPLOYEES.

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

THE BOARD OF DIRECTORS DETERMINES THE EXECUTIVE DIRECTOR'S SALARY

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

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Name of the organization

ELECTRONIC PRIVACY INFORMATION CENTER

Employer identification number

** - ***5921

ALL INFORMATION IS AVAILABLE UPON WRITTEN REQUEST.

FORM 990, PART XI, LINE 2C.

THE ORGANIZATION'S BOARD OF DIRECTORS HAS RESPONSIBILITY FOR THE OVERSIGHT OF THE COMPILATION OF ITS FINANCIAL STATEMENTS AND THE SELECTION OF THE INDEPENDENT ACCOUNTANT.

2023 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	BUILDINGS														
45	BUILDING:NEW HAMPSHIRE AVENUE	06/26/19	SL	30.00		16	2,009,669.				2,009,669.	240,044.		66,989.	307,033.
60	BUILDING IMPROVEMENTS	12/31/21	SL	30.00		16	200,544.				200,544.	3,899.		6,685.	10,584.
	* 990 PAGE 10 TOTAL BUILDINGS						2,210,213.				2,210,213.	243,943.		73,674.	317,617.
	FURNITURE & FIXTURES														
41	SIGN	10/04/19	SL	5.00		16	1,265.				1,265.	886.		253.	1,139.
42	SIGN	12/17/19	SL	5.00		16	930.				930.	651.		187.	838.
	* 990 PAGE 10 TOTAL FURNITURE & FIXTURES						2,195.				2,195.	1,537.		440.	1,977.
	MACHINERY & EQUIPMENT														
30	APPLE	01/11/17	SL	5.00		16	4,084.				4,084.	4,084.		0.	4,084.
31	APPLE	01/13/17	SL	5.00		16	1,597.				1,597.	1,597.		0.	1,597.
32	APPLE	01/13/17	SL	5.00		16	1,597.				1,597.	1,597.		0.	1,597.
33	APPLE	07/24/17	SL	5.00		16	1,498.				1,498.	1,498.		0.	1,498.
34	APPLE	11/27/17	SL	5.00		16	1,215.				1,215.	1,215.		0.	1,215.
35	APPLE	01/13/18	SL	5.00		16	1,299.				1,299.	1,169.		130.	1,299.
36	APPLE	01/13/18	SL	5.00		16	1,299.				1,299.	1,169.		130.	1,299.
37	APPLE	06/02/18	SL	5.00		16	1,774.				1,774.	1,597.		177.	1,774.
38	APPLE	08/28/18	SL	5.00		16	6,415.				6,415.	5,774.		642.	6,416.

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
39	APPLE	05/09/19	SL	5.00		16	1,510.				1,510.	1,057.		302.	1,359.
40	AMAZON	07/23/19	SL	5.00		16	2,001.				2,001.	1,401.		400.	1,801.
43	MACBOOK	12/31/19	SL	5.00		16	1,169.				1,169.	817.		234.	1,051.
46	APPLE	02/07/20	SL	5.00		16	526.				526.	307.		105.	412.
47	TELENETWORK EQUIPMENT	06/15/20	SL	5.00		16	280.				280.	141.		56.	197.
48	APPLE	06/17/20	SL	5.00		16	1,801.				1,801.	901.		360.	1,261.
49	TELENETWORK EQUIPMENT	08/05/20	SL	5.00		16	1,657.				1,657.	800.		331.	1,131.
50	APPLE	09/09/21	SL	5.00		16	3,177.				3,177.	848.		635.	1,483.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT						32,899.				32,899.	25,972.		3,502.	29,474.
	LAND														
44	LAND: NEW HAMPSHIRE AVENUE	06/26/19	SL	.000		16	1,339,779.				1,339,779.			0.	
	* 990 PAGE 10 TOTAL LAND						1,339,779.				1,339,779.	0.		0.	0.
	OTHER														
51	WEBSITE	05/06/21	SL	3.00		16	9,626.				9,626.	4,012.		3,209.	7,221.
52	WEBSITE	06/03/21	SL	3.00		16	12,082.				12,082.	5,034.		4,027.	9,061.
53	WEBSITE	08/06/21	SL	3.00		16	15,982.				15,982.	6,658.		5,328.	11,986.
54	WEBSITE	08/10/21	SL	3.00		16	21,358.				21,358.	8,898.		7,119.	16,017.
55	WEBSITE	09/08/21	SL	3.00		16	21,658.				21,658.	9,023.		7,219.	16,242.

328111 04-01-23

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2023 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
56	WEBSITE	10/04/21	SL	3.00		16	29,139.				29,139.	12,141.		9,713.	21,854.
57	WEBSITE	11/09/21	SL	3.00		16	32,670.				32,670.	13,612.		10,890.	24,502.
58	WEBSITE	12/03/21	SL	3.00		16	2,020.				2,020.	841.		673.	1,514.
59	WEBSITE	12/09/21	SL	3.00		16	4,689.				4,689.	1,954.		1,563.	3,517.
61	TESSERA RECEPTION DESK	06/01/22	SL	7.00		16	2,878.				2,878.	240.		411.	651.
62	HOBSEN LOUNGE CHAIR, WOOD FRAME (11)	06/01/22	SL	7.00		16	13,610.				13,610.	1,134.		1,944.	3,078.
63	HOBSEN OTTOMAN (5)	06/01/22	SL	7.00		16	2,764.				2,764.	230.		395.	625.
64	WYRE OCCASIONAL TABLE, TRAPEZOID (8)	06/01/22	SL	7.00		16	3,476.				3,476.	290.		497.	787.
65	KASURA LOW BACK CHAIR, METAL BASE (3)	06/01/22	SL	7.00		16	3,724.				3,724.	310.		532.	842.
66	ROO ROUND SIDE TABLE (2)	06/01/22	SL	7.00		16	1,098.				1,098.	91.		157.	248.
67	PHILLY BANQUETTE	06/01/22	SL	7.00		16	8,022.				8,022.	668.		1,146.	1,814.
68	NNTEEN20 ROUND TABLE, LOW PROFILE BASE (2)	06/01/22	SL	7.00		16	854.				854.	71.		122.	193.
69	BISTRO SIDE CHAIR, WOOD BACK (2)	06/01/22	SL	7.00		16	1,339.				1,339.	112.		191.	303.
70	HETA BAR HEIGHT TABLE	06/01/22	SL	7.00		16	1,712.				1,712.	143.		244.	387.
71	KNOT LOUNGE CHAIR (2)	06/01/22	SL	7.00		16	3,352.				3,352.	279.		479.	758.
72	KNOT SIDE TABLE	06/01/22	SL	7.00		16	367.				367.	31.		52.	83.
73	KNOT SIDE ARM CHAIR (4)	06/01/22	SL	7.00		16	3,901.				3,901.	325.		557.	882.
74	JANUS CAF ROUND TABLE, ALUMINUM TOP	06/01/22	SL	7.00		16	951.				951.	79.		136.	215.

328111 04-01-23

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
75	LIGOURI CONFERENCE TABLE, LAMINATE TOP	06/01/22	SL	7.00		16	8,074.				8,074.	673.		1,153.	1,826.
76	CLASSIC MID-BACK CONFERENCE CHAIR, WITH CASTERS (16)	06/01/22	SL	7.00		16	6,667.				6,667.	555.		952.	1,507.
77	IGNITION 2.0 CHAIR, REACTIVE BACK, SYNC-TILT, SEAT SLIDE	06/01/22	SL	7.00		16	9,082.				9,082.	757.		1,297.	2,054.
78	DAY-TO-DAY DESK, ADJUSTABLE, MOBILE BOX/FILE (17)	06/01/22	SL	7.00		16	17,450.				17,450.	1,454.		2,493.	3,947.
79	L-DESK, ADJUSTABLE AND FIXED HEIGHT (2)	06/01/22	SL	7.00		16	4,257.				4,257.	355.		608.	963.
80	DAY-TO-DAY FIXED HEIGHT TABLE	06/01/22	SL	7.00		16	592.				592.	49.		85.	134.
81	IGNITIONSIDE CHAIR, FIXED ARM, REACTIVE BACK	06/01/22	SL	7.00		16	291.				291.	24.		41.	65.
82	DAY-TO-DAY ROUND TABLE, 3MM EDGE, STEEL X BASE	06/01/22	SL	7.00		16	264.				264.	22.		38.	60.
83	CALIBRATE LAMINATE STORAGE CABINET, 2 DOORS (7)	06/01/22	SL	7.00		16	2,732.				2,732.	228.		390.	618.
84	CALIBRATE LAMINATE STORAGE CABINET, 2 DOORS	06/01/22	SL	7.00		16	406.				406.	34.		58.	92.
85	CALIBRATE 2 DOOR CABINET	06/01/22	SL	7.00		16	551.				551.	46.		79.	125.
86	CALIBRATE 2 DRAWER LATERAL	06/01/22	SL	7.00		16	587.				587.	49.		84.	133.
87	CALIBRATE 4 DRAWER LATERAL	06/01/22	SL	7.00		16	945.				945.	79.		135.	214.
88	CALIBRATE WARDROBE TOWER	06/01/22	SL	7.00		16	831.				831.	69.		119.	188.
89	GS8 SINGLE MONITOR ARM, CLAMP, GROMMET MOUNT (20)	06/01/22	SL	7.00		16	3,200.				3,200.	267.		457.	724.
90	SECLUSIONG2 CONVENIENCE OUTLET, POWER/USB CHARGER (2)	06/01/22	SL	7.00		16	3,639.				3,639.	303.		520.	823.
91	V-SERIES KEYBOARD TRAY FOR SIT/STAND DESK (2)	06/01/22	SL	7.00		16	645.				645.	54.		92.	146.
92	SHAW RUG, SERGED, NON-SLIP BACKING (12 X 9)	06/01/22	SL	7.00		16	1,645.				1,645.	137.		235.	372.

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(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
93	SHAW RUG, SERGED, NON-SLIP BACKING (12 X 12)	06/01/22	SL	7.00		16	2,140.				2,140.	178.		306.	484.
94	POWER TRACK, 6 POWER OUTLETS AND ADA LOW-RISE RAMP (3)	06/01/22	SL	7.00		16	1,766.				1,766.	147.		252.	399.
95	BILLING ON RENOVATIONS: DIAMOND GENERAL CONTRACTORS	12/31/22	SL	30.00		16	583,995.				583,995.	11,355.		19,466.	30,821.
96	SET UP IMPROVEMENTS: WINGHAT HUGHES	12/31/22	SL	30.00		16	9,088.				9,088.	177.		303.	480.
97	DECKED OUT LANDSCAPE	11/02/23	SL	30.00		16	3,435.				3,435.			116.	116.
98	DECKED OUT LANDSCAPE	11/16/23	SL	30.00		16	3,517.				3,517.			120.	120.
	* 990 PAGE 10 TOTAL OTHER						863,071.				863,071.	83,188.		86,003.	169,191.
	* GRAND TOTAL 990 PAGE 10 DEPR						4,448,157.				4,448,157.	354,640.		163,619.	518,259.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						4,441,205.			0.	4,441,205.	354,640.			518,023.
	ACQUISITIONS						6,952.			0.	6,952.	0.			236.
	DISPOSITIONS/RETIRED						0.			0.	0.	0.			0.
	ENDING BALANCE						4,448,157.			0.	4,448,157.	354,640.			518,259.
	ENDING ACCUM DEPR											518,259.			
	ENDING BOOK VALUE											3,929,898.			

2023 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - ELECTRONIC PRIVACY INFORMATION CENTER

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	BUILDINGS											
45	BUILDING:NEW HAMSPHIRE AVENUE	062619	SL	30.00	16	2009669.			2009669.	240,044.		66,989.
60	BUILDING IMPROVEMENTS	123121	SL	30.00	16	200,544.			200,544.	3,899.		6,685.
	* 990 PAGE 10 TOTAL BUILDINGS					2210213.		0.	2210213.	243,943.		73,674.
	FURNITURE & FIXTURES											
41	SIGN	100419	SL	5.00	16	1,265.			1,265.	886.		253.
42	SIGN	121719	SL	5.00	16	930.			930.	651.		187.
	* 990 PAGE 10 TOTAL FURNITURE & FIXTURE					2,195.		0.	2,195.	1,537.		440.
	MACHINERY & EQUIPMENT											
30	APPLE	011117	SL	5.00	16	4,084.			4,084.	4,084.		0.
31	APPLE	011317	SL	5.00	16	1,597.			1,597.	1,597.		0.
32	APPLE	011317	SL	5.00	16	1,597.			1,597.	1,597.		0.
33	APPLE	072417	SL	5.00	16	1,498.			1,498.	1,498.		0.
34	APPLE	112717	SL	5.00	16	1,215.			1,215.	1,215.		0.
35	APPLE	011318	SL	5.00	16	1,299.			1,299.	1,169.		130.
36	APPLE	011318	SL	5.00	16	1,299.			1,299.	1,169.		130.
37	APPLE	060218	SL	5.00	16	1,774.			1,774.	1,597.		177.
38	APPLE	082818	SL	5.00	16	6,415.			6,415.	5,774.		642.

2023 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - ELECTRONIC PRIVACY INFORMATION CENTER

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
39	APPLE	050919	SL	5.00	16	1,510.			1,510.	1,057.		302.
40	AMAZON	072319	SL	5.00	16	2,001.			2,001.	1,401.		400.
43	MACBOOK	123119	SL	5.00	16	1,169.			1,169.	817.		234.
46	APPLE	020720	SL	5.00	16	526.			526.	307.		105.
47	TELENETWORK EQUIPMENT	061520	SL	5.00	16	280.			280.	141.		56.
48	APPLE	061720	SL	5.00	16	1,801.			1,801.	901.		360.
49	TELENETWORK EQUIPMENT	080520	SL	5.00	16	1,657.			1,657.	800.		331.
50	APPLE	090921	SL	5.00	16	3,177.			3,177.	848.		635.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPME					32,899.		0.	32,899.	25,972.		3,502.
	LAND											
44	LAND: NEW HAMPSHIRE AVENUE	062619	SL	.000	16	1339779.			1339779.			0.
	* 990 PAGE 10 TOTAL LAND					1339779.		0.	1339779.	0.		0.
	OTHER											
51	WEBSITE	050621	SL	3.00	16	9,626.			9,626.	4,012.		3,209.
52	WEBSITE	060321	SL	3.00	16	12,082.			12,082.	5,034.		4,027.
53	WEBSITE	080621	SL	3.00	16	15,982.			15,982.	6,658.		5,328.
54	WEBSITE	081021	SL	3.00	16	21,358.			21,358.	8,898.		7,119.
55	WEBSITE	090821	SL	3.00	16	21,658.			21,658.	9,023.		7,219.

2023 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - ELECTRONIC PRIVACY INFORMATION CENTER

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
56	WEBSITE	100421	SL	3.00	16	29,139.			29,139.	12,141.		9,713.
57	WEBSITE	110921	SL	3.00	16	32,670.			32,670.	13,612.		10,890.
58	WEBSITE	120321	SL	3.00	16	2,020.			2,020.	841.		673.
59	WEBSITE	120921	SL	3.00	16	4,689.			4,689.	1,954.		1,563.
61	TESSERA RECEPTION DESK	060122	SL	7.00	16	2,878.			2,878.	240.		411.
62	HOBSEN LOUNGE CHAIR, WOOD FRAME (060122	SL	7.00	16	13,610.			13,610.	1,134.		1,944.
63	HOBSEN OTTOMAN (5) WYRE OCCASIONAL	060122	SL	7.00	16	2,764.			2,764.	230.		395.
64	TABLE, TRAPEZOID (8 KASURA LOW BACK	060122	SL	7.00	16	3,476.			3,476.	290.		497.
65	CHAIR, METAL BASE (060122	SL	7.00	16	3,724.			3,724.	310.		532.
66	ROO ROUND SIDE TABLE (2)	060122	SL	7.00	16	1,098.			1,098.	91.		157.
67	PHILLY BANQUETTE NNTEN20 ROUND	060122	SL	7.00	16	8,022.			8,022.	668.		1,146.
68	TABLE, LOW PROFILE BISTRO SIDE CHAIR,	060122	SL	7.00	16	854.			854.	71.		122.
69	WOOD BACK (2) HETA BAR HEIGHT	060122	SL	7.00	16	1,339.			1,339.	112.		191.
70	TABLE KNOT LOUNGE CHAIR	060122	SL	7.00	16	1,712.			1,712.	143.		244.
71	(2)	060122	SL	7.00	16	3,352.			3,352.	279.		479.
72	KNOT SIDE TABLE KNOT SIDE ARM CHAIR	060122	SL	7.00	16	367.			367.	31.		52.
73	(4) JANUS CAF ROUND	060122	SL	7.00	16	3,901.			3,901.	325.		557.
74	TABLE, ALUMINUM TOP	060122	SL	7.00	16	951.			951.	79.		136.

2023 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - ELECTRONIC PRIVACY INFORMATION CENTER

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
75	LIGOURI CONFERENCE TABLE, LAMINATE TOP	060122	SL	7.00	16	8,074.			8,074.	673.		1,153.
76	CLASSIC MID-BACK CONFERENCE CHAIR, W	060122	SL	7.00	16	6,667.			6,667.	555.		952.
77	IGNITION 2.0 CHAIR, REACTIVE BACK, SYNC	060122	SL	7.00	16	9,082.			9,082.	757.		1,297.
78	DAY-TO-DAY DESK, ADJUSTABLE, MOBILE	060122	SL	7.00	16	17,450.			17,450.	1,454.		2,493.
79	L-DESK, ADJUSTABLE AND FIXED HEIGHT (2	060122	SL	7.00	16	4,257.			4,257.	355.		608.
80	DAY-TO-DAY FIXED HEIGHT TABLE	060122	SL	7.00	16	592.			592.	49.		85.
81	IGNITIONSIDE CHAIR, FIXED ARM, REACTIVE	060122	SL	7.00	16	291.			291.	24.		41.
82	DAY-TO-DAY ROUND TABLE, 3MM EDGE, ST	060122	SL	7.00	16	264.			264.	22.		38.
83	CALIBRATE LAMINATE STORAGE CABINET, 2	060122	SL	7.00	16	2,732.			2,732.	228.		390.
84	CALIBRATE LAMINATE STORAGE CABINET, 2	060122	SL	7.00	16	406.			406.	34.		58.
85	CALIBRATE 2 DOOR CABINET	060122	SL	7.00	16	551.			551.	46.		79.
86	CALIBRATE 2 DRAWER LATERAL	060122	SL	7.00	16	587.			587.	49.		84.
87	CALIBRATE 4 DRAWER LATERAL	060122	SL	7.00	16	945.			945.	79.		135.
88	CALIBRATE WARDROBE TOWER	060122	SL	7.00	16	831.			831.	69.		119.
89	GS8 SINGLE MONITOR ARM, CLAMP, GROMMET	060122	SL	7.00	16	3,200.			3,200.	267.		457.
90	SECLUSIONG2 CONVENIENCE OUTLET,	060122	SL	7.00	16	3,639.			3,639.	303.		520.
91	V-SERIES KEYBOARD TRAY FOR SIT/STAND	060122	SL	7.00	16	645.			645.	54.		92.
92	SHAW RUG, SERGED, NON-SLIP BACKING (1	060122	SL	7.00	16	1,645.			1,645.	137.		235.

2023 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - ELECTRONIC PRIVACY INFORMATION CENTER

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
93	SHAW RUG, SERGED, NON-SLIP BACKING (1060122	060122	SL	7.00	16	2,140.			2,140.	178.		306.
94	POWER TRACK, 6 POWER OUTLETS AND A BILLING ON	060122	SL	7.00	16	1,766.			1,766.	147.		252.
95	RENOVATIONS: DIAMON SET UP	123122	SL	30.00	16	583,995.			583,995.	11,355.		19,466.
96	IMPROVEMENTS: WINGH DECKED OUT	123122	SL	30.00	16	9,088.			9,088.	177.		303.
97	LANDSCAPE DECKED OUT	110223	SL	30.00	16	3,435.			3,435.			116.
98	LANDSCAPE	111623	SL	30.00	16	3,517.			3,517.			120.
	* 990 PAGE 10 TOTAL OTHER					863,071.		0.	863,071.	83,188.		86,003.
	* GRAND TOTAL 990 PAGE 10 DEPR					4448157.		0.	4448157.	354,640.		163,619.
	CURRENT YEAR ACTIVITY											
	BEGINNING BALANCE					4441205.		0.	4441205.	354,640.		
	ACQUISITIONS					6,952.		0.	6,952.	0.		
	DISPOSITIONS					0.		0.	0.	0.		
	ENDING BALANCE					4448157.		0.	4448157.	354,640.		

2024 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

ELECTRONIC PRIVACY INFORMATION CENTER

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	BUILDINGS								
45	BUILDING:NEW HAMPSHIRE AVENUE	062619	SL	30.00	2009669.		2009669.	307,033.	66,989.
60	BUILDING IMPROVEMENTS	123121	SL	30.00	200,544.		200,544.	10,584.	6,685.
	* 990 PAGE 10 TOTAL BUILDINGS				2210213.		2210213.	317,617.	73,674.
	FURNITURE & FIXTURES								
41	SIGN	100419	SL	5.00	1,265.		1,265.	1,139.	126.
42	SIGN	121719	SL	5.00	930.		930.	838.	92.
	* 990 PAGE 10 TOTAL FURNITURE & FIXTURES				2,195.		2,195.	1,977.	218.
	MACHINERY & EQUIPMENT								
30	APPLE	011117	SL	5.00	4,084.		4,084.	4,084.	0.
31	APPLE	011317	SL	5.00	1,597.		1,597.	1,597.	0.
32	APPLE	011317	SL	5.00	1,597.		1,597.	1,597.	0.
33	APPLE	072417	SL	5.00	1,498.		1,498.	1,498.	0.
34	APPLE	112717	SL	5.00	1,215.		1,215.	1,215.	0.
35	APPLE	011318	SL	5.00	1,299.		1,299.	1,299.	0.
36	APPLE	011318	SL	5.00	1,299.		1,299.	1,299.	0.
37	APPLE	060218	SL	5.00	1,774.		1,774.	1,774.	0.
38	APPLE	082818	SL	5.00	6,415.		6,415.	6,416.	-1.
39	APPLE	050919	SL	5.00	1,510.		1,510.	1,359.	151.
40	AMAZON	072319	SL	5.00	2,001.		2,001.	1,801.	200.
43	MACBOOK	123119	SL	5.00	1,169.		1,169.	1,051.	118.
46	APPLE	020720	SL	5.00	526.		526.	412.	105.
47	TELENETWORK EQUIPMENT	061520	SL	5.00	280.		280.	197.	56.
48	APPLE	061720	SL	5.00	1,801.		1,801.	1,261.	360.
49	TELENETWORK EQUIPMENT	080520	SL	5.00	1,657.		1,657.	1,131.	331.
50	APPLE	090921	SL	5.00	3,177.		3,177.	1,483.	635.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT				32,899.		32,899.	29,474.	1,955.
	LAND								
44	LAND: NEW HAMPSHIRE AVENUE	062619	SL	.000	1339779.		1339779.		0.
	* 990 PAGE 10 TOTAL LAND				1339779.		1339779.	0.	0.
	OTHER								
51	WEBSITE	050621	SL	3.00	9,626.		9,626.	7,221.	2,405.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

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ELECTRONIC PRIVACY INFORMATION CENTER

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
52	WEBSITE	060321	SL	3.00	12,082.		12,082.	9,061.	3,021.
53	WEBSITE	080621	SL	3.00	15,982.		15,982.	11,986.	3,996.
54	WEBSITE	081021	SL	3.00	21,358.		21,358.	16,017.	5,341.
55	WEBSITE	090821	SL	3.00	21,658.		21,658.	16,242.	5,416.
56	WEBSITE	100421	SL	3.00	29,139.		29,139.	21,854.	7,285.
57	WEBSITE	110921	SL	3.00	32,670.		32,670.	24,502.	8,168.
58	WEBSITE	120321	SL	3.00	2,020.		2,020.	1,514.	506.
59	WEBSITE	120921	SL	3.00	4,689.		4,689.	3,517.	1,172.
61	TESSERA RECEPTION DESK	060122	SL	7.00	2,878.		2,878.	651.	411.
62	HOBSEN LOUNGE CHAIR, WOOD FRAME (11)	060122	SL	7.00	13,610.		13,610.	3,078.	1,944.
63	HOBSEN OTTOMAN (5)	060122	SL	7.00	2,764.		2,764.	625.	395.
64	WYRE OCCASIONAL TABLE, TRAPEZOID (8) KASURA LOW BACK CHAIR, METAL BASE	060122	SL	7.00	3,476.		3,476.	787.	497.
65	(3)	060122	SL	7.00	3,724.		3,724.	842.	532.
66	ROO ROUND SIDE TABLE (2)	060122	SL	7.00	1,098.		1,098.	248.	157.
67	PHILLY BANQUETTE NNTEN20 ROUND TABLE, LOW PROFILE	060122	SL	7.00	8,022.		8,022.	1,814.	1,146.
68	BASE (2)	060122	SL	7.00	854.		854.	193.	122.
69	BISTRO SIDE CHAIR, WOOD BACK (2)	060122	SL	7.00	1,339.		1,339.	303.	191.
70	HETA BAR HEIGHT TABLE	060122	SL	7.00	1,712.		1,712.	387.	245.
71	KNOT LOUNGE CHAIR (2)	060122	SL	7.00	3,352.		3,352.	758.	479.
72	KNOT SIDE TABLE	060122	SL	7.00	367.		367.	83.	52.
73	KNOT SIDE ARM CHAIR (4)	060122	SL	7.00	3,901.		3,901.	882.	557.
74	JANUS CAF ROUND TABLE, ALUMINUM TOP LIGOURI CONFERENCE TABLE, LAMINATE	060122	SL	7.00	951.		951.	215.	136.
75	TOP	060122	SL	7.00	8,074.		8,074.	1,826.	1,153.
76	CLASSIC MID-BACK CONFERENCE CHAIR, WITH CASTERS (16)	060122	SL	7.00	6,667.		6,667.	1,507.	952.
77	IGNITION 2.0 CHAIR, REACTIVE BACK, SYNC-TILT, SEAT SLIDE (23)	060122	SL	7.00	9,082.		9,082.	2,054.	1,297.
78	DAY-TO-DAY DESK, ADJUSTABLE, MOBILE BOX/FILE (17)	060122	SL	7.00	17,450.		17,450.	3,947.	2,493.
79	L-DESK, ADJUSTABLE AND FIXED HEIGHT (2)	060122	SL	7.00	4,257.		4,257.	963.	608.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2024 DEPRECIATION AND AMORTIZATION REPORT

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ELECTRONIC PRIVACY INFORMATION CENTER

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
80	DAY-TO-DAY FIXED HEIGHT TABLE IGNITIONSIDE CHAIR, FIXED ARM,	060122	SL	7.00	592.		592.	134.	85.
81	REACTIVE BACK	060122	SL	7.00	291.		291.	65.	42.
82	DAY-TO-DAY ROUND TABLE, 3MM EDGE, STEEL X BASE	060122	SL	7.00	264.		264.	60.	38.
83	CALIBRATE LAMINATE STORAGE CABINET, 2 DOORS (7)	060122	SL	7.00	2,732.		2,732.	618.	390.
84	CALIBRATE LAMINATE STORAGE CABINET, 2 DOORS	060122	SL	7.00	406.		406.	92.	58.
85	CALIBRATE 2 DOOR CABINET	060122	SL	7.00	551.		551.	125.	79.
86	CALIBRATE 2 DRAWER LATERAL	060122	SL	7.00	587.		587.	133.	84.
87	CALIBRATE 4 DRAWER LATERAL	060122	SL	7.00	945.		945.	214.	135.
88	CALIBRATE WARDROBE TOWER	060122	SL	7.00	831.		831.	188.	119.
89	GS8 SINGLE MONITOR ARM, CLAMP, GROMMET MOUNT (20)	060122	SL	7.00	3,200.		3,200.	724.	457.
90	SECLUSIONG2 CONVENIENCE OUTLET, POWER/USB CHARGER (20)	060122	SL	7.00	3,639.		3,639.	823.	520.
91	V-SERIES KEYBOARD TRAY FOR SIT/STAND DESK (2)	060122	SL	7.00	645.		645.	146.	92.
92	SHAW RUG, SERGED, NON-SLIP BACKING (12 X 9)	060122	SL	7.00	1,645.		1,645.	372.	235.
93	SHAW RUG, SERGED, NON-SLIP BACKING (12 X 12)	060122	SL	7.00	2,140.		2,140.	484.	306.
94	POWER TRACK, 6 POWER OUTLETS AND ADA LOW-RISE RAMP (3)	060122	SL	7.00	1,766.		1,766.	399.	252.
95	BILLING ON RENOVATIONS: DIAMOND GENERAL CONTRACTORS	123122	SL	30.00	583,995.		583,995.	30,821.	19,467.
96	SET UP IMPROVEMENTS: WINGHAT HUGHES	123122	SL	30.00	9,088.		9,088.	480.	303.
97	DECKED OUT LANDSCAPE	110223	SL	30.00	3,435.		3,435.	116.	115.
98	DECKED OUT LANDSCAPE	111623	SL	30.00	3,517.		3,517.	120.	117.
	* 990 PAGE 10 TOTAL OTHER				863,071.		863,071.	169,191.	73,571.
	* GRAND TOTAL 990 PAGE 10 DEPR				4448157.		4448157.	518,259.	149,418.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone