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PUBLIC DISCLOSURE COPY

EXTENDED TO NOVEMBER 15, 2023

Return of Organization Exempt From Income Tax

Department of the Treasury

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.

OMB No. 1545-0047 Open to Public Inspection

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

A For the 2022 calendar year, or tax year beginning Check if applicable: C Name of organization D Employer identification number Address change AMARA LEGAL CENTER Name change Doing business as 46-3819394 Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final return/ termin-ated 1629 K STREET, NW 300 240-257-6492 City or town, state or province, country, and ZIP or foreign postal code 739,520. G Gross receipts \$ Amended return WASHINGTON, DC 20006 H(a) Is this a group return Applica-F Name and address of principal officer: CAROLINE ACKERMAN for subordinates? Yes X No pending SAME AS C ABOVE H(b) Are all subordinates included? Yes No I Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or If "No," attach a list. See instructions WWW.AMARALEGAL.ORG J Website: H(c) Group exemption number K Form of organization: X Corporation Trust Association L Year of formation: 2013 M State of legal domicile: DC Part I Summary Briefly describe the organization's mission or most significant activities; AMARA LEGAL CENTER PROVIDES FREE Governance LEGAL SERVICES TO INDIVIDUALS WHOSE RIGHTS HAVE BEEN VIOLATED WHILE $oldsymbol{ol{ol{ol}}}}}}}}}}}}}}}}}}}$ Number of voting members of the governing body (Part VI, line 1a) 12 4 Number of independent voting members of the governing body (Part VI, line 1b) 12 4 Activities & 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 12 5 6 Total number of volunteers (estimate if necessary) 19 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7b **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 577,416. 738,046. Program service revenue (Part VIII, line 2g) 1,460.0. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 5. 14. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 724. 0. 578.145. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 739,520. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 1,000. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 515,749. 572,735. 16a Professional fundraising fees (Part IX, column (A), line 11e) 8,400. 0. b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 69,724 162,859. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 593,873 736,594. -15,728. 19 Revenue less expenses. Subtract line 18 from line 12 2,926. or **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 194,080. 188,514. 21 Total liabilities (Part X, line 26) 36,311. 27,819. 22 Net assets or fund balances. Subtract line 21 from line 20 157,769. 160,695. 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. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. danotie. Sign CAROLINE ACKERMAN, EXECUTIVE DIRECTOR Here Type or print name and title Date 11/22/23 Print/Type preparer's name Preparer's signature lina Reagher Paid TINA PEACHER P01608826 Preparer Firm's name JM&M Firm's EIN 52-1853933 Firm's address 10500 LITTLE PATUXENT PARKWAY, SUITE 770 Use Only COLUMBIA, MD 21044 Phone no. 410 - 884 - 0220 May the IRS discuss this return with the preparer shown above? See instructions X Yes

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Pa	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	Ц
1	Briefly describe the organization's mission:	LIIIO GE
	AMARA LEGAL CENTER PROVIDES FREE LEGAL SERVICES TO INDIVIDUALS	
	RIGHTS HAVE BEEN VIOLATED WHILE INVOLVED IN COMMERCIAL SEX, WHI	STHEK
	THAT INVOLVEMENT WAS BY CHOICE, COERCION, OR CIRCUMSTANCE.	
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 X No
•	If "Yes," describe these new services on Schedule O.	Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	LYes LA_No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expression of the state of the sta	cpenses, and
4-	revenue, if any, for each program service reported. (Code:) (Expenses \$ 536,674 • including grants of \$ 1,000 •) (Revenue \$	1,460.)
4a	(Code:) (Expenses \$ 536,674. including grants of \$ 1,000.) (Revenue \$ AMARA LEGAL CENTER RUNS ONE PROGRAM THAT FOCUSES ON THREE AREAS	
	REPRESENTATION, POLICY ADVOCACY, AND ADVOCACY AND OUTREACH. AM	
	PROVIDES BRIEF LEGAL ADVICE, PARTIAL REPRESENTATION, AND FULL	11121
	REPRESENTATION FOR CIVIL LEGAL ISSUES SUCH AS CIVIL PROTECTION	ORDERS
	DIVORCE, CHILD CUSTODY AND SUPPORT, NAME CHANGES, LIVING WILLS	
	POWER OF ATTORNEY CASES. IN ADDITION TO CIVIL LEGAL SERVICES, A	
	LEGAL CENTER ALSO PROVIDES VICTIM-WITNESS ADVOCACY SERVICES, CI	
	DEFENSE, AND REPRESENTATION IN CRIMINAL RECORD SEALING, EXPUNG	
	AND VACATUR CASES.	
	<u></u>	
4b	(Code:) (Expenses \$)
4c	(Code:) (Expenses \$)
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ \text{including grants of \$} \text{) (Revenue \$} \text{Revenue \$} \text{TA})
4e	Total program service expenses 536,674.	- 000
		Form 990 (2022)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
•	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
Ū	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			l
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	14b		X
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		X
20-	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		X
20a b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		 ^ `
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
	• ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			

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Dest IV	Chaplist of Dom	ired Schedules (continued)
Partiv	Cilecklist of negu	ili eu Scheuules (continuea)

			V	N.
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			X
24.0	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
2 4 a	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24d		-
2 5a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			X
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?If	28b		
C	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	20		X
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	٥-:		
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		-
30	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Do	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pal	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		163	140
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

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022) AMARA LEGAL CENTER Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 12			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2 b	Х	
За	•		3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a				
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	, ,			37
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-			v
	any contributions that were not tax deductible as charitable contributions?		6a		Х
D	If "Yes," did the organization include with every solicitation an express statement that such contribut	-	Ch		
-	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).	vices provided to the paver?	70		Х
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser If "Yes," did the organization notify the donor of the value of the goods or services provided?		7a 7b		21
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		76		
С	to file Form 8282?	•	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri		7 f		X
g g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
			8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	 	12a		
	,	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		10-		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
h	Enter the amount of reserves the organization is required to maintain by the states in which the				
b	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
14a		100	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu.		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				
-	excess parachute payment(s) during the year?		15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t income?	16		Х
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

232005 12-13-22

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year la			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	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?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only) availa	able
	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	d finar	ncial	
	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			
	FRANCOISE WILSON - 240-257-6492			
	1629 K STREET, NW, 300, WASHINGTON, DC 20006			

Form **990** (2022)

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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.

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

- 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.

(A)	(B)	Γ		((C)			(D)	(E)	(F)
Name and title	Average hours per	box	not c , unle cer an	ss pe	more rson i	than is bot	h an	Reportable compensation	Reportable compensation	Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) CAROLINE ACKERMAN	40.00	1		x				70 644	0.	2 200
EXECUTIVE DIRECTOR AS OF 9/2022	40.00			Δ.				79,644.	0.	2,209.
(2) NATASHA THOMAS DEPUTY DIRECTOR AS OF 9/2022	40.00	1		x				67,057.	0.	2,126.
(3) CAROLE BERNARD	40.00			<u> </u>				07,037.	0.	2,120•
EXECUTIVE DIRECTOR UNTIL 7/2022	40.00	1		x				59,252.	0.	3,657.
(4) SAKALA RUTHERFORD	1.00							33,232.	•	3,037.
PRESIDENT	100	x		x				0.	0.	0.
(5) CYNTHIA FOX	1.00	 								
VICE PRESIDENT		X		x				0.	0.	0.
(6) BRITTANY MOBLEY	1.00									
SECRETARY		Х		Х				0.	0.	0.
(7) MATTHEW LANNAN	1.00									
TREASURER		Х		Х				0.	0.	0.
(8) RACHEL MARTIN	1.00									
DIRECTOR		Х						0.	0.	0.
(9) RACHEL AMENT	1.00									
DIRECTOR		Х						0.	0.	0.
(10) KATELYN CRAWFORD	1.00								_	_
DIRECTOR		Х						0.	0.	0.
(11) RADHA MOHAN	1.00	ļ							•	
DIRECTOR	1 00	Х						0.	0.	0.
(12) MARY BETH JACOBY	1.00	١,,							0	0
DIRECTOR	1 00	Х						0.	0.	0.
(13) SARAH ZALONIS	1.00	X						0.	0.	0.
OIRECTOR (14) GENETTA SMITH	1.00	^						0.	0.	0.
DIRECTOR	1.00	X						0.	0.	0.
(15) MANUEL VASQUEZ	1.00	122						0.	0.	
DIRECTOR	1.00	X						0.	0.	0.
		+								
		1								
		1								
		•	•		_					

Pa	rt VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
	(A)	(B)			•	C)			(D)	(E)			(F)	
	Name and title	Average hours per week	box	not c	ss pe	more erson	than is bot or/trus	h an	Reportable compensation from	Reportable compensatio from related		am	timate nount other	
		(list any hours for related	tee or director	rstee			ensated		the organization (W-2/1099-MISC/	organization: (W-2/1099-MIS 1099-NEC)		fr	pensa om the anizati	е
		organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-NEC)				d relate Inizatio	
			_											
			_											
			_						205,953.		0.		7,9	0.2
С	Subtotal Total from continuation sheets to Part V	II, Section A							205,953.		0.		7,9	0.
<u>a</u> 2	Total (add lines 1b and 1c) Total number of individuals (including but r compensation from the organization								·	l),000 of reportabl	• •		1,5	<u>, 26</u>
	compensation from the organization												Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	uch individual										3		Х
4	For any individual listed on line 1a, is the su and related organizations greater than \$15	0,000? <i>If</i> "Yes,	" co	mple	ete S	Sch	edul	e J t	for such individual			4		Х
5 —	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	•				•	•		ed organization or indiv			5		Х
	ction B. Independent Contractors			! -		4		4		\$100,000 of oom		-4: 6		
1	Complete this table for your five highest countries the organization. Report compensation for										iperis	alioni	rom	
	(A) Name and business	address	N	INC	Ξ				(B) Description of s	services	С	(C Comper	;) nsatio	n
2	Total number of independent contractors (not li	mite	d to	tho	se li	stec	d above) who received n	nore than				
	\$100,000 of compensation from the organi	zation					<u> </u>					Form 9	990 (°	2022

			Check if Schedule O contains a resp	onse	or note to any lin	e in this Part VIII			
						(A)	(B)	(C)	_ (D)
						Total revenue	Related or exempt		Revenue excluded
							function revenue	business revenue	from tax under sections 512 - 514
σωl									000110110 012 011
ᆲ			Federated campaigns1a						
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b						
A,	•	С	Fundraising events1c						
후	(d	Related organizations 1d						
i,s	•	е	Government grants (contributions) 1e		379,073.				
is	1	f	All other contributions, gifts, grants, and						
돌림			similar amounts not included above 1f		358,973.				
<u></u>		a	Noncash contributions included in lines 1a-1f	\$	-				
S i		_	Total. Add lines 1a-1f			738,046.			
- 1		<u>''-</u>	Total Add lines 14 11		Business Code	70070200			
	_	_	EVENT SPONSORSHIPS		900099	1,460.	1,460.		
<u>ğ</u>	2 8		EVENT BIONDONDHIID		700077	1,400.	1,400.		
ne Z	,	b							
n S	•	С							
ev Sev	•	d							
Program Service Revenue	•	е							
<u> </u>	1	f	All other program service revenue						
	9	g	Total. Add lines 2a-2f			1,460.			
	3		Investment income (including dividends						
			other similar amounts)			14.			14.
	4		Income from investment of tax-exempt b						
	5			-					_
	3		Royalties		(ii) Personal				
	_			21	(II) Fersonal				
			Gross rents 6a						
	ı	b	Less: rental expenses 6b						
	•	С	Rental income or (loss) 6c						
	•	d	Net rental income or (loss)						
	7 a	а	Gross amount from sales of (i) Secur	ities	(ii) Other				
			assets other than inventory 7a						
	1	b	Less: cost or other basis						
e le			and sales expenses 7b						
len/		c	Gain or (loss) 7c						
Şe			Net gain or (loss)						
ther Revenue			Gross income from fundraising events (not						
チー	0 6	а							
0			including \$ of						
			contributions reported on line 1c). See						
			Part IV, line 18						
			Less: direct expenses						
			Net income or (loss) from fundraising ev						
	9 a	а	Gross income from gaming activities. Se	е					
			Part IV, line 19	9a					
	ı	b	Less: direct expenses	9b					
			Net income or (loss) from gaming activiti						
			Gross sales of inventory, less returns						
		_	and allowances	10a					
		h	Less: cost of goods sold						
					·				
$\overline{}$		U	Net income or (loss) from sales of invent	υгу	Business Code				
sn					Business Code				
ne ne	11 a								
Miscellaneous Revenue	ı	b							
3e		С			ļ				
Risi	(d	All other revenue						
		е	Total. Add lines 11a-11d	<u></u> .					
	12		Total revenue. See instructions			739,520.	1,460.	0.	14.

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).

D۵	Check if Schedule O contains a responsion tinclude amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	1 000	1 000		
	and domestic governments. See Part IV, line 21	1,000.	1,000.		
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,	212 042	175 170	25 042	10 000
	trustees, and key employees	213,943.	175,178.	25,942.	12,823
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	200 044	220 022	22 706	17 215
7	Other salaries and wages	290,044.	239,023.	33,706.	17,315
8	Pension plan accruals and contributions (include	_ ^=	F 364	1.00	450
	section 401(k) and 403(b) employer contributions)	5,975.	5,361.	162.	452
9	Other employee benefits	22,811.	14,974.	6,353.	1,484
10	Payroll taxes	39,962.	32,515.	5,145.	2,302
11	Fees for services (nonemployees):				
а	Management				
b	Legal	44 - 40			
С	Accounting	41,512.		41,512.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	72,746.	45,255.	15,291.	12,200
12	Advertising and promotion	8,663.		8,663.	
13	Office expenses	18,826.	11,323.	7,479.	24
14	Information technology				
15	Royalties				
16	Occupancy	1,210.	997.	141.	72
17	Travel	1,544.	1,532.	12.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,350.			1,350
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	5,280.	4,351.	614.	315
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 0.)				
а	DUES AND SUBSCRIPTIONS	7,896.	2,233.	5,463.	200
b	PROFESSIONAL DEVELOPMEN	3,532.	2,932.	600.	
c	LICENSES AND FEES	300.	-	300.	
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	736,594.	536,674.	151,383.	48,537
<u>26</u>	Joint costs. Complete this line only if the organization	,	,	- 1,	-,
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	oaasational sampaign and fundraising solicitation.				

Pai	rt X	Balance Sheet				
		Check if Schedule O contains a response or not	e to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		86,370.	1	18,426.
	2	Savings and temporary cash investments		53,949.	2	53,963.
	3	Pledges and grants receivable, net		22,500.	3	30,000.
	4	Accounts receivable, net		28,167.	4	81,882.
	5	Loans and other receivables from any current or				
		trustee, key employee, creator or founder, subst	antial contributor, or 35%			
		controlled entity or family member of any of thes	se persons		5	
	6	Loans and other receivables from other disquali	fied persons (as defined			
		under section 4958(f)(1)), and persons described	d in section 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
⋖	9	Prepaid expenses and deferred charges		3,094.	9	2,162.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D				
	b	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 1		12		
	13	Investments - program-related. See Part IV, line	11		13	
	14	Intangible assets	0	14	0.001	
	15	Other assets. See Part IV, line 11		0.	15	2,081. 188,514.
	16	Total assets. Add lines 1 through 15 (must equa		194,080.	16	188,514.
	17	Accounts payable and accrued expenses	31,254.	17	27,819.	
	18	Grants payable		F 0F7	18	0
	19	Deferred revenue		5,057.	19	0.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete I			21	
ies	22	Loans and other payables to any current or form				
Liabilities		trustee, key employee, creator or founder, subst				
Lial		controlled entity or family member of any of these			22	
	23	Secured mortgages and notes payable to unrela			23	
	24	Unsecured notes and loans payable to unrelated			24	
	25	Other liabilities (including federal income tax, pa				
		parties, and other liabilities not included on lines			0E	
	26	of Schedule D Total liabilities. Add lines 17 through 25		36,311.	25 26	27,819.
	20	Organizations that follow FASB ASC 958, che	ck here X	30,311.	20	27,013.
es		and complete lines 27, 28, 32, and 33.	CR Here			
auc	27	Net assets without donor restrictions		140,269.	27	160,695.
Bala	28			17,500.	28	0.
I Pu	20	Organizations that do not follow FASB ASC 9		27,7000	20	0,
Ψ		and complete lines 29 through 33.	oo, check here			
ō	29	Capital stock or trust principal, or current funds			29	
ets	30	Paid-in or capital surplus, or land, building, or ed			30	
Ass	31	Retained earnings, endowment, accumulated in			31	
Net Assets or Fund Balances	32	Total net assets or fund balances		157,769.	32	160,695.
2	33			194,080.	33	188,514.
	_ 55				- 50	Form 990 (2022)

Pa	rt 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		9,5	
2	Total expenses (must equal Part IX, column (A), line 25)	2	73	6,5	94.
3	Revenue less expenses. Subtract line 2 from line 1	3		2,9	26.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	15	7,7	69.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	16	0,6	<u>95.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule				,,,
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			77	
b	Were the organization's financial statements audited by an independent accountant?			X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis				
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	o audit			
C	review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
30	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	iedul e C	· .		
Ja	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		x
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				 -
J	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				
	or addito, explain with on concedic o and describe any steps taken to undergo such addits			aan	(2022) [

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Open to Public

OMB No. 1545-0047

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

AMARA LEGAL CENTER

Inspection Employer identification number

46-3819394 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). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)) Total

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

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

Sec	etion A. Public Support			•			
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and	,	()	()	()	. ,	
	membership fees received. (Do not						
	include any "unusual grants.")	715,331.	614,057.	595,165.	577,416.	738,046.	3240015.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	E4 E 004	64.4.055	505 465	555 446		224224
4	Total. Add lines 1 through 3	715,331.	614,057.	595,165.	577,416.	738,046.	3240015.
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)						2040045
	Public support. Subtract line 5 from line 4.						3240015.
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022 738,046.	(f) Total 3240015.
	Amounts from line 4	715,331.	614,057.	595,165.	577,416.	/38,046.	3240015.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	605	606	0.4	-	1.4	1 474
	and income from similar sources	685.	686.	84.	5.	14.	1,474.
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		202	1 500	724		2 644
	assets (Explain in Part VI.)		392.	1,528.	724.		2,644.
	Total support. Add lines 7 through 10		,				1,460.
	Gross receipts from related activities,					12	1,400.
13	First 5 years. If the Form 990 is for th	-	rst, second, third,	fourth, or fifth tax	year as a section t	001(c)(3)	
S00	organization, check this box and stop etion C. Computation of Publ		rcentage				<u></u>
	Public support percentage for 2022 (I			acluma (fl)		14	99.87 %
	Public support percentage from 2021					15	99.87 %
	33 1/3% support test - 2022. If the c						
iva	stop here. The organization qualifies						
h	33 1/3% support test - 2021. If the o						
	and stop here. The organization qual	•		,		,	
17a	10% -facts-and-circumstances tes						
174	and if the organization meets the fact	_					
	meets the facts-and-circumstances te		•	-	•	vi now the organiz	Lation
h	10% -facts-and-circumstances tes	-	•	* '	-	17a. and line 15 is	10% or
J	more, and if the organization meets the	_					. 5,0 0,
	organization meets the facts-and-circle				-		
18	Private foundation. If the organization				· · ·		
		ala not oncon a	22. 311 10 10, 100	-, ,	.,		(Form 000) 2022

Schedule A (Form 990) 2022

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

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

Se	ction A. Public Support	, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ŀ	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support			•	•	•	•
Cale	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	. ,		` '		, ,	
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital			1			
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for the	ne organization's f	irst, second, third.	fourth, or fifth tax	vear as a section	501(c)(3) organizat	ion.
-	check this box and stop here	•		,			,
Se	ction C. Computation of Publ						
	Public support percentage for 2022 (column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inve						
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
	a 33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box a						
ŀ	33 1/3% support tests - 2021. If the						
-	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

Part IV | Supporting Organizations

(Complete only if you checked a box 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

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

		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	ฮม		
	9с		
	10a		
	10b		
4	A /Ears	~ 000	0000

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations			
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	,		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported	1		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Seci	tion C. Type II Supporting Organizations		1	·
			Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	_		
	the supported organization(s). tion D. All Type III Supporting Organizations	_ 1		<u> </u>
000	tion b. All Type in Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		162	NO
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction	ns).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (se	e instructio	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	6.		
	these activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	0-		
	trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in Part VI. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		
L)	DIG THE OFGENERATION EXCLOSE A SUBSTAINAL GRAPE OF UNEQUOIDOVER THE DOLICIES, DIOGRAMS, SHO SCHVINES OF EACH			

Sche	dule A (Form 990) 2022 AMARA LEGAL CENTER			46-3819394 Page 6
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust o	n Nov. 20, 1970 (explain	in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	st comple	te Sections A through E.	
Sect	ion A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount	(A) Prior Year	(B) Current Year (optional)	
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			

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

Schedule A (Form 990) 2022

instructions).

emergency temporary reduction (see instructions).

6

Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022 (reason-			
	able cause required - explain in Part VI). See instructions.			
_3	Excess distributions carryover, if any, to 2022			
а	From 2017			
b	From 2018			
c	From 2019			
d	From 2020			
e	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i_	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
С	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2018			
b	Excess from 2019			
c	Excess from 2020			
d	Excess from 2021			
e	Excess from 2022			

Schedule A (Form 990) 2022

Part V	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)											
SCHE	DULE A,	PART	II,	LINE	10,	EXPL	ANATIO	N FOR	OTHER	INCOME:		
REIM	BURSEMEN'	Т										
2019	AMOUNT:	\$	392	•								
2020	AMOUNT:	\$	1,52	28.								
2021	AMOUNT:	\$	724	•								
2022	AMOUNT:	\$	0.									

Schedule B

Schedule of Contributors

OMB No. 1545-0047

990-PF.
test information.

Department of the Treasury Internal Revenue Service

Name of the organization

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

2022

Employer identification number

AMARA LEGAL CENTER 46-3819394 Organization type (check one): Filers of: Section: X = 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$______\$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

Name of organization Employer identification number

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Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
1		\$ 209,397. Person X Payroll On Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
2		\$ 169,086. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
3		\$ 220,260. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
4	Name, address, and ZIF + 4	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
		Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022) Page **3**

Name of organization

Employer identification number

AMARA LEGAL CENTER

46-3819394

	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<u> </u>	

Schedule B (Form 990) (2022) Page **4**

Name of organization **Employer identification number** 46-3819394 AMARA LEGAL CENTER Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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.

OMB No. 1545-0047 Open to Public Inspection

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 5	01(c)(4), (5), or (6) organiza	tions: Complete Part III.					
Nan	ne of orga					Empl	oyer identificatior	
			EGAL CENTER				46-38193	94
Pa	art I-A	Complete if the org	anization is exempt und	der section 501(c)	or is a section 5	27 o	rganization.	
2	Political	campaign activity expendit	ation's direct and indirect politi ures gn activities					
Pa	art I-B	Complete if the org	anization is exempt und	der section 501(c)	(3).			
1	Enter the	e amount of any excise tax	incurred by the organization un	der section 4955	• •	\$		
			incurred by organization manag					
			n 4955 tax, did it file Form 4720					No No
4a	Was a co	orrection made?					Yes	☐ No
		describe in Part IV.						
			anization is exempt und		•		<u> </u>	
1	Enter the	e amount directly expended	by the filing organization for se	ection 527 exempt func	tion activities	\$		
2		0 0	ization's funds contributed to o	· ·				
						\$		
3			. Add lines 1 and 2. Enter here		•	•		
			4400 DOL 6 H : 0					□ No
4			1120-POL for this year?					
5			nployer identification number (E tion listed, enter the amount pa	•	~			
			omptly and directly delivered to					
		·	additional space is needed, pro			•	3 3	
		(a) Name	(b) Address	(c) EIN	(d) Amount paid	from	(e) Amount of	oolitical
		(a) Hamo	(b) / (a a c c c	(9) =	filing organization		contributions rec	eived and
					funds. If none, ent	er -0	promptly and of delivered to a s	
							political organi	
							If none, ente	er -0

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

Schedule C (Form 990) 2022

LHA

232041 11-08-22

Part II-A Complete if the org section 501(h)).	janization is exer	npt under sectio	n 501(c)(3) and fil	ed Form 5768 (el	ection under		
	tion belongs to an affil	iated group (and list in	Part IV each affiliated	aroun member's nam	e address FIN		
• •	re of excess lobbying		ii ait iv each aililiated	group member 3 nam	e, address, Liiv,		
	tion checked box A ar		ovisions apply.				
Limi	ts on Lobbying Exper ditures" means amou	nditures	,	(a) Filing organization's totals	(b) Affiliated group totals		
1a Total lobbying expenditures to influ	uence public opinion (grassroots lobbying)					
b Total lobbying expenditures to influ	uence a legislative boo	ly (direct lobbying)					
c Total lobbying expenditures (add l	ines 1a and 1b)						
d Other exempt purpose expenditure				699,257.			
e Total exempt purpose expenditure				699,257.			
f Lobbying nontaxable amount. Ent		following table in bot	h columns.	129,889.			
If the amount on line 1e, column (a) o	` '	bying nontaxable am					
Not over \$500,000		the amount on line 1e.					
Over \$500,000 but not over \$1,00	· · · · · · · · · · · · · · · · · · ·	0 plus 15% of the exc					
Over \$1,000,000 but not over \$1,5		0 plus 10% of the exc					
Over \$1,500,000 but not over \$17		0 plus 5% of the exce	ss over \$1,500,000.				
Over \$17,000,000	\$1,000,0	000.					
g Grassroots nontaxable amount (er	oter 25% of line 1f)			32,472.			
h Subtract line 1g from line 1a. If zer	0.						
i Subtract line 1f from line 1c. If zero	0.						
j If there is an amount other than ze	,	line 1i, did the organiz					
reporting section 4911 tax for this	•			[Yes No		
(Some organizations t	hat made a section 5	raging Period Under 01(h) election do not ate instructions for li	have to complete all	of the five columns b	elow.		
	Lobbying Exper	ditures During 4-Yea	ar Averaging Period	•			
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total		
2a Lobbying nontaxable amount	110,410.	109,356.	108,498.	129,889.	458,153.		
b Lobbying ceiling amount (150% of line 2a, column(e))					687,230.		
(150% of life 2a, column(e))					007,230.		
c Total lobbying expenditures	918.				918.		
d Grassroots nontaxable amount	27,603.	27,339.	27,125.	32,472.	114,539.		
e Grassroots ceiling amount							
(150% of line 2d, column (e))					171,809.		
f Grassroots lobbying expenditures							

Schedule C (Form 990) 2022

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)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description)	(b)	
of th	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? \dots				
С	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
_	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	on 501(c)(5) or se	ection	
ı u	501(c)(6).	011 00 1(0)(o,, or sc		
				Yes	No
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?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from t t III-B Complete if the organization is exempt under section 501(c)(4), secti				
1 2	answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)		1		
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
С	Total				
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 ex-	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	oolitical			
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Pa	t IV Supplemental Information				
Prov	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	o list); Part II-	A, lines 1	and 2 (See	
instr	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

AMARA LEGAL CENTER

Employer identification number 46-3819394

Par	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the					
	organization answered "Yes" on Form 990, Part IV, lir	(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year	(a) Zeriei davisea idinae	(a) i ando and onto decedino			
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	d funds			
3	are the organization's property, subject to the organization's	-				
6	Did the organization inform all grantees, donors, and donor a					
Ü	for charitable purposes and not for the benefit of the donor of					
Par						
1	Purpose(s) of conservation easements held by the organizat		,			
·	Preservation of land for public use (for example, recrea		historically important land area			
	Protection of natural habitat		certified historic structure			
	Preservation of open space	, , , , , , , , , , , , , , , , ,				
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of	f a conservation easement on the last			
	day of the tax year.		Held at the End of the Tax Year			
а	Total number of conservation easements		2a			
	Total acreage restricted by conservation easements					
	Number of conservation easements on a certified historic str					
	Number of conservation easements included in (c) acquired					
	historic structure listed in the National Register		2d			
3	Number of conservation easements modified, transferred, re					
	year	, , ,				
4	Number of states where property subject to conservation ea	sement is located				
5	Does the organization have a written policy regarding the pe					
	violations, and enforcement of the conservation easements i		Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,					
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	on easements during the year			
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h	n)(4)(B)(i)			
	and section 170(h)(4)(B)(ii)?		Yes No			
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense s	statement and			
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial statemer	nts that describes the			
	organization's accounting for conservation easements.					
Par	t III Organizations Maintaining Collections o		her Similar Assets.			
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.				
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement an	id balance sheet works			
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in furt	therance of public			
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.					
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and ba	alance sheet works of			
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	erance of public service,			
	provide the following amounts relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1		\$			
			_			
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial (gain, provide			
	the following amounts required to be reported under FASB A	ASC 958 relating to these items:				
а	Revenue included on Form 990, Part VIII, line 1		\$			
b	Assets included in Form 990, Part X		\$			
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2022			

232051 09-01-22

Pai	t III Organizations Maintaining C	Collections of A	rt, Hist	torical Tı	reasures,	or Othe	r Simila	ır Asse	t s (contii	nued)	
3	Using the organization's acquisition, access	ion, and other record	ls, checl	k any of the	following th	at make s	ignificant ı	use of its			
	collection items (check all that apply):										
а	Public exhibition	d		Loan or exc	change progr	ram					
b	Scholarly research	е									
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	nev further t	the organizat	ion's exer	npt purpo	se in Par	t XIII.		
5	During the year, did the organization solicit of	=		•	_						
	to be sold to raise funds rather than to be m		-						Yes		No
Pai	t IV Escrow and Custodial Arran										
	reported an amount on Form 990, Pa	-		9				,,	,		
1a	Is the organization an agent, trustee, custod		diary for	contributio	ns or other a	ssets not	included				
	on Form 990, Part X?		•						Yes		No
b	If "Yes," explain the arrangement in Part XIII										
-		and complete are							Amount		
c	Beginning balance						1c				
	Additions during the year										
	Distributions during the year										
f	Ending balance										
	Did the organization include an amount on F								Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Pai											
	21 2 Indemnet Lander complete	(a) Current year		rior year	(c) Two yea			ears back	(e) Four	vears	back
10	Beginning of year balance	(a) cament year	(~):	,	(0)	,	()		(0)	J	
	Contributions										
	Net investment earnings, gains, and losses										
	Grants or scholarships										
е	Other expenditures for facilities										
	and programs					+					
	Administrative expenses				1						
_	End of year balance			. ,							
2	Provide the estimated percentage of the cur			g, column (a)) held as:						
	Board designated or quasi-endowment		_%								
	Permanent endowment	%									
С		%									
	The percentages on lines 2a, 2b, and 2c sho	·									
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	and administ	ered for th	ne		1	· I	
	organization by:									Yes	No
	(i) Unrelated organizations										
	(ii) Related organizations										
b	If "Yes" on line 3a(ii), are the related organization				?				3b		
4	Describe in Part XIII the intended uses of the		owment	funds.							
Pai	t VI Land, Buildings, and Equipm										
	Complete if the organization answere	d "Yes" on Form 990	D, Part IN			1					
	Description of property	(a) Cost or o		` ,	t or other		cumulate	d	(d) Boo	k value	Э
		basis (investr	ment)	basis	(other)	dep	reciation				
	Land										
	Buildings										
С	Leasehold improvements										
d	Equipment										
e	Other										
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X. colur	nn (B). line	10c.)						0.

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 AMARA LEGAL	CENTER	46	5-3819394 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" of			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.		-	
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990. Part IV. line	e 11d. See Form 990. Part X. line 15.	
	escription		(b) Book value
(1)			(-,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8) (9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)		
Part X Other Liabilities.	10.)		
Complete if the organization answered "Yes" of	on Form 990 Part IV line	a 11e or 11f See Form 990 Part X line 2	5
(a) Description of lightity	7111 OIIII 990, 1 art IV, IIII	e Tre of Tri. See Form 990, Fart X, line 2	(b) Book value
			(S) DOOK VAIGE
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2022

(8)

Schedule	D (Form 990) 2022 AMARA LEGAL CENTER			46-3	819394 Page
Part X	·		Revenue per R	leturn.	<u> </u>
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12				760 760
	al revenue, gains, and other support per audited financial statements			1	769,760
	ounts included on line 1 but not on Form 990, Part VIII, line 12:	ا ء ا			
	unrealized gains (losses) on investments		30,240.	-	
	nated services and use of facilities		30,240.	-	
	coveries of prior year grants			-	
	er (Describe in Part XIII.)			-	30,240
	d lines 2a through 2d			2e 3	739,520
	otract line 2e from line 1			3	755,520
	ounts included on Form 990, Part VIII, line 12, but not on line 1:	امدا			
	estment expenses not included on Form 990, Part VIII, line 7b			-	
	er (Describe in Part XIII.) d lines 4a and 4b			10	0
	d lines 4a and 4b al revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			4c 5	739,520
	II Reconciliation of Expenses per Audited Financial State			_	-
. u	Complete if the organization answered "Yes" on Form 990, Part IV, line 12		. Expended per	Hotal	•••
1 To	al expenses and losses per audited financial statements			1	766,834
	ounts included on line 1 but not on Form 990, Part IX, line 25:			•	,
	nated services and use of facilities	2a	30,240.		
	or year adjustments	··· —	,	-	
	er losses			-	
	er (Describe in Part XIII.)			-	
	d lines 2a through 2d			2e	30,240
	otract line 2e from line 1			3	736,594
	ounts included on Form 990, Part IX, line 25, but not on line 1:				, , , , , , , , , , , , , , , , , , ,
	estment expenses not included on Form 990, Part VIII, line 7b	4a			
	er (Describe in Part XIII.)				
	d lines 4a and 4b			4c	0
	al expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	736,594
	Supplemental Information.				•
	ne descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ac			4; Part X	, line 2; Part XI,
PART	X, LINE 2:				
AMARA	LEGAL CENTER RECOGNIZES THE EFFECT OF	INCOME	TAX POSIT	IONS	ONLY IF
rhosi	POSITIONS ARE MORE LIKELY THAN NOT OF	BEING	SUSTAINED.	AMA	RA LEGAL
CENTI	R BELIEVES THAT IT HAS APPROPRIATE SUP	PORT FO	R ANY TAX	POSI	TIONS
[AKE]	I, AND AS SUCH, DOES NOT HAVE ANY UNCER	TAIN TA	X POSITION	S TH	AT ARE
MATE	CIAL TO THE FINANCIAL STATEMENTS.				

Schedule D (Form 990) 2022

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

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.

QMB No. 1545-0047
2022
Open to Public Inspection

Name of the organization

AMARA LEGAL CENTER

Employer identification number 46-3819394

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

INVOLVED IN COMMERCIAL SEX, WHETHER THAT INVOLVEMENT WAS BY CHOICE,

COERCION, OR CIRCUMSTANCE.

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

FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR, DEPUTY DIRECTOR AND
TREASURER. THE 990 IS THEN PROVIDED TO THE BOARD OF DIRECTORS PRIOR TO
FILING WITH THE IRS.

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

ANNUALLY, AT OUR FIRST QUARTER MEETING, EACH BOARD MEMBER IS REQUESTED TO

SIGN THE CONFLICTS OF INTEREST AND WHISTLEBLOWER POLICIES. NEW BOARD

MEMBERS ARE ASKED TO SIGN THESE POLICIES WHEN ONBOARDED.

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

THE HIRING COMMITTEE OF THE BOARD OF DIRECTORS, IN COMPLIANCE WITH THE

AMARA LEGAL CENTER'S COMPENSATION POLICY, REVIEWED COMPARABLE SALARY

INFORMATION FROM THE 990'S OF SIMILAR ORGANIZATIONS. USING THIS

INFORMATION, THE COMMITTEE RECOMMENDED A SALARY FOR THE EXECUTIVE DIRECTOR

TO THE FULL BOARD, WHICH VOTED TO ADOPT THE SALARY. THE LAST COMPENSATION

REVIEW OCCURRED IN JULY 2022.

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

GOVERNING DOCUMENTS AND THE CONFLICTS OF INTEREST POLICY ARE NOT MADE

AVAILABLE TO THE PUBLIC. HOWEVER, FINANCIAL INFORMATION IS MADE AVAILABLE

ON THE AMARA LEGAL CENTER WEBSITE.

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

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022	Page 2
Name of the organization AMARA LEGAL CENTER	Employer identification number 46-3819394
FORM 990, PART XII, LINE 2C	
THE ORGANIZATION DID NOT CHANGE ITS OVERSIGHT OR SELECTIO	N PROCESS
DURING THE TAX YEAR.	