### Form **990**

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 Open to Public

Inspection Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. and ending A For the 2023 calendar year, or tax year beginning D Employer identification number C Name of organization Check if applicable X Address AMERICAN LEGISLATIVE EXCHANGE COUNCIL 52-0140979 Name change Doing business as Initial return E Telephone number Room/suite Number and street (or P.O. box if mail is not delivered to street address) 703-373-0933 Final return/ 2733 CRYSTAL DRIVE, SUITE 1000 11,289,177. G Gross receipts \$ City or town, state or province, country, and ZIP or foreign postal code 22202 H(a) Is this a group return ARLINGTON, VA F Name and address of principal officer: MRS. LISA B. NELSON, for subordinates? ..... L Yes X No Applicapending H(b) Are all subordinates included? Yes SAME AS C ABOVE If "No," attach a list. See instructions Tax-exempt status: X 501(c)(3) 501(c) ( (insert no.) 4947(a)(1) or H(c) Group exemption number WWW.ALEC.ORG J Website: L Year of formation: 1975 M State of legal domicile: IL K Form of organization: X Corporation Trust Association Other Part I Summary Briefly describe the organization's mission or most significant activities: ASSIST STATE LEGISLATORS CONGRESS & THE PUBLIC BY SHARING RESEARCH AND EDUCATIONAL INFO. Governance  $oldsymbol{ol{ol}oldsymbol{ol}oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{ol}}}}}}}}}}}}}}}}}}}}}$ 2 23 Number of voting members of the governing body (Part VI, line 1a) 23 Number of independent voting members of the governing body (Part VI, line 1b) 4 40 Activities & 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 25 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, Part I, line 11 **Current Year Prior Year** 9,913,510. 9,054,508. Contributions and grants (Part VIII, line 1h) 1,352,081. Revenue 1,044,455. Program service revenue (Part VIII, line 2g) 9 22,704. 4,228. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 882. 1,013. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 11,289,177. 10,104,204. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 4,153,402. 4,106,262. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 225,700. 106,300. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 6,839,742. 5,267,794. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 9,480,356. 11,218,844. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 70,333. 623,848. Revenue less expenses. Subtract line 18 from line 12 **End of Year Beginning of Current Year** 5 8,863,770. 9,467,258. Total assets (Part X, line 16) 20 1,753,244. 2,427,065. 21 Total liabilities (Part X, line 26) 7,040,193. 7,110,526. 巨 Net assets or fund balances. Subtract line 21 from line 20 ..... 22 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 Use m. 12 muer Date Signature of officer Sign LISA BOWEN, CFO Here Type or print name and title PTIN Preparer's signature Print/Type preparer's name

AARON M. FOX

LLC

NW #850

P01365820

X Yes

Firm's EIN 88-1478669

Phone no. 202-227-4000

CBIZ ADVISORS,

WASHINGTON, DC 20036

Firm's address 1899 L STREET,

AARON M. FOX

Firm's name

Paid

Preparer

**Use Only** 

11/08/24

### Form **8868**

(Rev. January 2024)

# Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Taxpayer identification number (TIN) Name of exempt organization, employer, or other filer, see instructions. Type or Print 52-0140979 AMERICAN LEGISLATIVE EXCHANGE COUNCIL File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 2733 CRYSTAL DRIVE, SUITE 1000 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions ARLINGTON, VA 22202 01 Enter the Return Code for the return that this application is for (file a separate application for each return) Return Return Application Is For Application Is For Code Code 09 Form 4720 (other than individual) 01 Form 990 or Form 990-EZ 10 03 Form 5227 Form 4720 (individual) 11 Form 6069 04 Form 990-PF 12 05 Form 8870 Form 990-T (sec. 401(a) or 408(a) trust) 13 Form 5330 (individual) Form 990-T (trust other than above) 06 14 07 Form 5330 (other than individual) Form 990-T (corporation) Form 1041-A After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of LISA BOWEN, CFO 2733 CRYSTAL DRIVE, SUITE 1000 - ARLINGTON, VA 22202 Telephone No. 703-373-0933 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) . If this is for the whole group, check this box ..... If it is for part of the group, check this box ..... and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15, 20 24, to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 20 23 or \_\_\_\_\_ , 20 \_\_\_\_ , and ending \_\_\_ tax year beginning If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return 2 Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. 3a b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by 0. using EFTPS (Electronic Federal Tax Payment System), See instructions.

Par	t III   Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE AMERICAN LEGISLATIVE EXCHANGE COUNCIL (ALEC) IS A FORUM FOR
	STAKEHOLDERS TO EXCHANGE IDEAS AND DEVELOP POTENTIAL SOLUTIONS.
	ALEC'S MISSION IS TO ADVANCE AND PROMOTE THE JEFFERSONIAN PRINCIPLES OF LIMITED GOVERNMENT, FREE MARKETS AND FEDERALISM.
_	Did the organization undertake any significant program services during the year which were not listed on the
2	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
•	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	If "Yes," describe these changes on Schedule O.
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
4	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
	(Code: ) (Expenses \$ 3,592,549 • including grants of \$) (Revenue \$)
44	TASK FORCES - ALEC'S POLICY TASK FORCES PROVIDE A FORUM FOR LEGISLATORS
	AND THE PRIVATE SECTOR TO DISCUSS ISSUES, DEVELOP POLICIES, AND DRAFT
	MODEL POLICY WHICH SERVES AS A PUBLIC RESOURCE. THE TASK FORCES
	INCLUDE THE FOLLOWING: AMERICAN CITY COUNCIL EXCHANGE; CIVIL JUSTICE;
	COMMERCE, INSURANCE AND ECONOMIC DEVELOPMENT; COMMUNICATIONS AND
	TECHNOLOGY; CRIMINAL JUSTICE; EDUCATION AND WORKFORCE DEVELOPMENT;
	ENERGY, ENVIRONMENT AND AGRICULTURE; HEALTH AND HUMAN SERVICES;
	FEDERALISM AND INTERNATIONAL RELATIONS; TAX AND FISCAL POLICY; AND
	HOMELAND SECURITY. EACH TAX FORCE IS CO-CHAIRED BY A PUBLIC AND
	PRIVATE SECTOR MEMBER OF ALEC.
	4 060 607
4b	(Code:) (Expenses \$ 2,258,690 · including grants of \$) (Revenue \$ 1,262,687 · )
	CONFERENCES - ALEC HOLDS NATIONAL CONFERENCES, PROVIDING WORKSHOPS ON
	CURRENT ISSUES WITH LEADING EXPERTS, PUBLIC FIGURES AND ELECTED
	OFFICIALS. THE TWO NATIONAL CONFERENCES HELD IN 2023 WERE THE ANNUAL
	MEETING AND STATES AND NATIONAL POLICY SUMMIT MEETING.
_	(Code: ) (Expenses \$ 900,461. including grants of \$) (Revenue \$)
4c	PUBLIC AFFAIRS - ALEC CONDUCTS AN ON-GOING COMMUNICATIONS PROGRAM THAT
	INTEGRATES ALL DEPARTMENTS OF ALEC TO PROMOTE POLICIES BASED ON
	FREE-MARKET, LIMITED GOVERNMENT AND FEDERALISM AMONG ELECTED OFFICIALS
	AND THE PRIVATE SECTOR MEMBERS OF ALEC AND EDUCATES THE GENERAL PUBLIC
	ON ALEC'S INSTITUTIONAL GOALS AND OBJECTIVES.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 2,460,864. including grants of \$ ) (Revenue \$ 89,394.)
4e	Total program service expenses 9,212,564.
	Form <b>990</b> (2023)

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)?		, l	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	_	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	.	х	
	during the tax year? If "Yes," complete Schedule C, Part II	4	^	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		v
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	_	<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			х
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	_	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	_	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			х
	Schedule D, Part III	8	_	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			v
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			_ v
	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, VIII, IX, or X,			
	as applicable.			11.16
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
	Part VI	11a		
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	-	<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
ď	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	ادمما		x
	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		—
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446	х	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		-
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	100		x
	Schedule D, Parts XI and XII	12a		-
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	12b	х	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	13		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<del>                                     </del>
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
	or more? If "Yes," complete Schedule F, Parts I and IV	170		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	15		x
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	-13		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	16		x
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV			Ť
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17	X	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions			
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	18		x
	1c and 8a? If "Yes," complete Schedule G, Part II	-10		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? # "Yes,"	19		x
	complete Schedule G, Part III	20a		X
20a		20b		T
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21		x
	domestic government on Part IA, column (A), time 1: If Tes, complete Screedie I, Parts Farto II	-	200	

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Par	t IV Checklist of Required Schedules (continued)		. 1	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			х
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		х	
	Schedule J	23		
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			х
	Schedule K. If "No," go to line 25a	24a		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	-	
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	ا ا		
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			v
	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			37
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
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		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,	10		A
20	instructions for applicable filing thresholds, conditions, and exceptions):			
_	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
a	"Yes," complete Schedule L, Part IV	28a		X
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
0	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
C	"Yes," complete Schedule L, Part IV	28c		X_
~~	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
29	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
30		30		X
	contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
31				
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		x
	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
33		33		х
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	-		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34	x	0
	Part V, line 1	35a	X	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	- COA		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35b	x	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	300	+	<b>†</b>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	96	X	
	If "Yes," complete Schedule R, Part V, line 2	36	<del>  ^`</del>	-
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	x
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		x	
	Note: All Form 990 filers are required to complete Schedule O	38	1 A	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
	Î Î Ac		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	_		14.5
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	4		1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	2.2	77	
	(gambling) winnings to prize winners?	1c	X	1,0000
		Forn	n ssu	(2023)

Form 990 (2023) AMERICAN LEGISLATIVE EXCHANGE COUNCIL
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	Contained to San Ling Care the San Line		Yes	No
•	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	17	37.1	
2a	filed for the calendar year ending with or within the year covered by this return	1 3	1000	3539
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
b	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
3a	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
b 4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
44	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
h	If "Yes," enter the name of the foreign country		16	
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	-19	3.00	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	_	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	1	1	
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			77
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	-	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		├─
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			v
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		х
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	1	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	+-	┢╇
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		_
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		T.
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8	-	-
	sponsoring organization have excess business holdings at any time during the year?	-		
9	Sponsoring organizations maintaining donor advised funds.	9a		
а	Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
b	Did the openiosing significant and significant			
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	111,33	100	147
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	5.1		1455
_ b		2.4	100	100
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders		1.2	150
a	Gross income from other sources. (Do not net amounts due or paid to other sources against	100		
D	amounts due or received from them.)	119		
12-	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
h	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		1 14	15.5
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note: See the instructions for additional information the organization must report on Schedule O.	10		
b	Enter the amount of reserves the organization is required to maintain by the states in which the		12	
	organization is licensed to issue qualified health plans	100	1	N X
С	Enter the amount of reserves on hand		-	77
14a				X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	+=	$\vdash$
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			x
	excess parachute payment(s) during the year?	15		1
	If "Yes," see the instructions and file Form 4720, Schedule N.	40		x
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		1
	If "Yes," complete Form 4720, Schedule O.			1
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities	17		
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.		00/	1,0000

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 1a 23	3	347	
	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	3	1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
-	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3	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
_	Did the organization have members or stockholders?	6	X	
6	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
/a	more members of the governing body?	7a	X	
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
D	persons other than the governing body?	7b		X
_	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			V D
8	The governing body?	8a	X	
a	Each committee with authority to act on behalf of the governing body?	8b		X
b	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
9	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sac	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
Sec	tion B. Folicies (This Section B requests information about policies not required by the information about		Yes	No
40-	Did the organization have local chapters, branches, or affiliates?	10a		X
10a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
D	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
44-	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
111	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
12a	the state of the s	12b		X
b	The state of the second service and experience of the policy? If "Vec " describe			
С		12c	X	
	on Schedule O how this was done	13	Х	
13	Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?	14	Х	
14	Did the organization have a written document retention and destruction policy:			100
15	Did the process for determining compensation of the following persons include a review and approval by independent	1000		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a	Х	
	The organization's CEO, Executive Director, or top management official	15b		Х
þ	Other officers or key employees of the organization	100		100
	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	16a		Х
	taxable entity during the year?	100		1563
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	16b		
_	exempt status with respect to such arrangements?	1 100		
Sec	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CA, CO, CT, FL, G	A.IL	.KS	, KY
17	List the states with which a copy of this Form 990 is required to be filled A. A. Handlicable 200, and 900.T (section 501(c))	3)s only	avail	able
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c))	-,, 1		
	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)	nd finar	ıcial	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	iiu iiiidi	iciai	
	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			
	LISA BOWEN, CFO - 703-373-0933			
	2733 CRYSTAL DRIVE, SUITE 1000, ARLINGTON, VA 22202			

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

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

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

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

						100	-	ed any current officer, di		(F)
(A)	(B)			(C Posi		1		(D)	<b>(E)</b> Reportable	Estimated
Name and title	Average		not cl	heck r	more	than c		Reportable compensation	compensation	amount of
	hours per week	offic	cer an	d a di	son i recto	s both r/trust	ee)	from	from related	other
	(list any	tor						the	organizations	compensation
	hours for	Individual trustee or director				pa		organization	(W-2/1099-MISC/	from the
	related	lee or	nstee			ensat		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	l trus	nstitutional trustee		Key employee	Highest compensated employee		1099-NEC)		and related
	below	ividua	titutio	Officer	етр (	hest	Former			organizations
	line)	<u>n</u>	lus	JJ.	Ke	声	Ğ			
(1) SPEAKER PHILIP GUNN	1.00				1				ا م	0.
DIRECTOR		X			_	_		0.	0.	0.
(1) LISA NELSON	39.00							400 040	ا م	0 524
CEO	1.00			X	_	_		433,318.	0.	9,534.
(2) LISA BOWEN	39.00									24 002
CFO	1.00			X		L	_	227,308.	0.	34,893.
(3) JONATHAN WILLIAMS	38.00									24 000
CHIEF ECONOMIST, EVP-POLICY	2.00			_	X	L	_	225,192.	0.	34,809.
(4) MARIE VULAJ	39.00							400 400		22 262
VP-PARTNERSHIPS & ENGAGEMENT	1.00	L			_	X	_	199,423.	0.	33,362.
(5) LEE SCHALK	39.00									07 176
VP - POLICY	1.00					X		161,539.	0.	27,176.
(6) COURTNEY COOK	40.00									25 004
VP - EVENTS						X		146,539.	0.	37,094.
(7) MICHAEL BOWMAN	22.00									16 405
SENIOR FELLOW - UNTIL 12/2023	18.00		_	_		X	_	144,000.	0.	16,495.
(8) AMY VARNER	40.00									4 000
DATABASE ADMINISTRATOR		_			_	X	L	109,036.	0.	4,003.
(9) REPRESENTATIVE DANIEL PEREZ	1.00									
CHAIR		X		X	_	_	L	0.	0.	0.
(10) SENATE PRESIDENT TY MASTERSON	1.00									
VICE CHAIR		X		X	_	_	上	0.	0.	0.
(11) SENATOR PATRICIA RUCKER	1.00									
TREASURER		X		X			L	0.	0.	0.
(12) SENATOR JIM DOTSON	1.00									
SECRETARY		X	L	X				0.	0.	0.
(13) SENATOR STUART ADAMS	1.00									
DIRECTOR		x						0.	0 -	0.
(14) SENATOR PHIL KING	1.00									
CEO APPOINTMENT		<u>  x</u>						0.	0.	0.
(15) SENATOR JIM BUCK	1.00									
DIRECTOR		x		L				0.	0.	0.
**	1.00									
(16) DELEGATE KATHY BYRON	1.00			1				0.	0.	0.

Form 990 (2023) AMERICA	N LEGISLA	TI	VE	E	XC	HA	NG	E COUNCIL	52-0140	9/9 Page 6
Part VII Section A. Officers, Directors, Tr	ustees, Key Emp	oloye	ees,	and	Hig	ghes	t Co	mpensated Employee	s (continued)	
(A) Name and title	(B) Average hours per week	(do box,		Pos neck i ss per	ition more rson i	l than o s both	one n an	(D) Reportable compensation from	(E) Reportable compensation from related	<b>(F)</b> Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(17) REPRESENTATIVE JOHN CARSON DIRECTOR	1.00	x						0.	0.	0.
(18) SENATOR JULIE DANIELS DIRECTOR	1.00	x						0 .	0.	0.
(19) REPRESENTATIVE SAGE DIXON DIRECTOR	1.00	x						0.	0.	0.
(21) REPRESENTATIVE SETH GROVE DIRECTOR	1.00	x						0.	0.	0.
(22) REPRESENTATIVE MATT HALL DIRECTOR	1.00	x						0.	0.	0.
(23) SENATOR JOSH HARKINS DIRECTOR	1.00	x						0.	0.	0.
(24) SENATOR DAN LAURSEN DIRECTOR	1.00	x						0.	0.	0.
(25) REPRESENTATIVE KIM MOSER DIRECTOR	1.00	x						0.	0.	0.
(26) REPRESENTATIVE SUSAN LYNN	1.00	x						0.	0.	0.
1b Subtotal  c Total from continuation sheets to Part								1,646,355.	0.	197,366.
d Total (add lines 1b and 1c)								1,646,355.	0.00 of reportable	197,366.

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

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

#### Section B. Independent Contractors

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

(A)  Name and business address	(B) Description of services	(C) Compensation
ONSERVICES LLC P.O. BOX 4458, HOUSTON, TX 77210	AV	445,369.
SALEM MEDIA, LLC P.O. BOX 206950, DALLAS, TX 75320	MEDIA PROMOTION	231,400.
LAFFER ASSOCIATES 103 MURPHY COURT, NASHVILLE, TN 37203	CONSULTING	134,685.
PROLIFIC LLC, 135 N. PENNSYLVANIA ST., #2500, INDIANAPOLIS, IN 46204	STRATEGIC PLANNING	130,380.
AMERICAN PHILANTHROPIC P.O. BOX 1480, HOCKESSIN, DE 19707	CONSULTING	112,050.
2 Total number of independent contractors (including but not limited to those \$100,000 of compensation from the organization 5	listed above) who received more than	200

								E COUNCIL	52-014	0313
Part VII Section A. Officers, Directors, Tru	stees, Key En	nplo	yee	s, ar	nd H	ighe	est (	Compensated Employe	es (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average			Posi	ition			Reportable	Reportable	Estimated
	hours	(cl	heck	ati t	that	appl	y)	compensation	compensation	amount of
	per							from	from related	other
	week					yee		the	organizations	compensation
	(list any	ctor				읦		organization	(W-2/1099-MISC)	from the
	hours for	r dire	_			e pa		(W-2/1099-MISC)		organization
	related	lee o	nstee			ensa				and related
	organizations	1 frus	Institutional trustee		Key employee	Highest compensated employee				organizations
	below	vidua	itutio	JB:	emp	hest	Former			
	(list any hours for related organizations below line)	Indi	Inst	Officer	Key	Hig	For			
(27) REPRESENTATIVE JASON SAINE	1.00									
DIRECTOR		Х						0.	0.	0.
(28) REPRESENTATIVE BILL SEITZ	1.00									
DIRECTOR		x						0.	0.	0.
(29) REPRESENTATIVE TJ SHOPE	1.00						П			
DIRECTOR		X						0.	0.	0.
(30) SENATOR TREY STEWART	1.00					$\vdash$				
	1.00	x						0.	0.	0.
DIRECTOR	1.00	A	$\vdash$		-	-		J.		
(31) SPEAKER PRO TEMPORE JOHN WILLS	1.00	x						0.	0.	0.
DIRECTOR		^	$\vdash$	-	_	-	H	0.	0.	
		_	├-	_	_	_	_			
		_	_	_	_	_	_			
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		1								
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		1								
		<u> </u>	1	_	<u></u>	_	_			<b>-</b>
										1
Total to Part VII, Section A, line 1c										

the later	(6)1) post	a. 1:10 / 1.1 0	and the same of	no in this Port \/III			507/55/8508 (855/8
		Check if Schedule O contains a response	inse or note to any i	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
							366110113 3 12 3 14
र र	1 a	Federated campaigns1a			45000	The same	
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues1b		14 15 ch y-12			
2	С	Fundraising events					
LA E	d						
2 4	e	C					
Sign	f	All other contributions, gifts, grants, and					
iğ a	'	similar amounts not included above 11	9,913,510				
<b>E</b> B		603 · ·			e = n/ 33/1/	Street Substi	
E D	g	S 35,7040 Oct. 1904	D	9,913,510.			
ÖR	h	Total. Add lines 1a-1f	I 2				
			Business Code		1 262 687		
g	2 a		900099	1,262,687.			
Σď	b	MEMBERSHIP DUES	900099	89,394.	89,394.	-	
Sel	С						
ES	d						
Pag	е						
Program Service Revenue	f	All other program service revenue					
==		Total. Add lines 2a-2f	3310-5-	1,352,081.			
$\neg$	3	Investment income (including dividends, i					
	3	i.		22,704.			22,704.
		Income from investment of tax-exempt be					
	4						
	5	Royalties (f) Rea				PHONE STREET	
			(ii) r ersonar				
	6 a	ONCO-CAROLINA INCO-CAROLINA IN			The store		
	b	Less: rental expenses 6b				A TOTAL	
	c	Rental income or (loss)					
	c	Net rental income or (loss)					
	7 a	Gross amount from sales of (i) Securi	ties (ii) Other	5 V - 4" - W		100000000000000000000000000000000000000	1 1 1 1 2 2 2
		assets other than inventory 7a					
	b	Less: cost or other basis		10 N 3 - 17 Hz			
ا يو		and sales expenses7b		7 J 5 C **		The second	
Revenue	_	Gain or (loss) 7c					
Š		Net gain or (loss)					
ē.		Gross income from fundraising events (not					
	B a		1 1				5 L J C T N
ᅙ		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
		Less: direct expenses	8b				
		Net income or (loss) from fundraising eve		man subset to			Me s Car
	9 a	Gross income from gaming activities. See	The San Co.	A STATE OF THE PARTY OF THE PAR			AND THE RESERVE
		Part IV, line 19	9a				
	b	Less: direct expenses	9b				
	c	: Net income or (loss) from gaming activities	s				
		Gross sales of inventory, less returns		VALUE TO STATE	The state of the s		
		and allowances	10a		San Dille	9 1	
		Less: cost of goods sold	1 1			STATE OF THE STATE OF	
		Net income or (loss) from sales of inventor					
		1400 modifie of floody from edites of inventor	Business Cod				
2	4.4	OTHER	900099	882			882
9	11 a						
Miscellaneous Revenue	Ł		<del>-  </del>				
Sev	C			-			
Mis	•	All other revenue		882			
_		Total. Add lines 11a-11d				. 0.	23,586
	12	Total revenue. See instructions		11,289,177	1,332,001	• 1	23,500

Part IX Statement of Functional Expenses

	TIX Statement of Functional Expense		arganizations must com	plete column (A)	
Section	on 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All other	organizations must com	piete column (Ay.	
	Check if Schedule O contains a response include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic			118,700	
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign			The Control of the Co	
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	065 054	461,004.	446,480.	57,570.
	trustees, and key employees	965,054.	401,004.	440,400.	3773701
6	Compensation not included above to disqualified			ľ	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	2,597,979.	2,192,180.	216,791.	189,008.
7	Other salaries and wages	2,331,313.	2,152,1001	2207.521	
8	Pension plan accruals and contributions (include	79,750.	66,941.	6,463.	6,346.
_	section 401(k) and 403(b) employer contributions)	259,456.	206,585.	30,988.	21,883.
9	Other employee benefits	251,163.	188,374.	45,101.	17,688.
10	Payroll taxes Fees for services (nonemployees):	231,1031	200/01-1		
11					
	Management	43,787.	32,840.	7,863.	3,084.
b	Legal	82,799.	62,100.	14,868.	5,831.
	AccountingLobbying				
d e	Professional fundraising services. See Part IV, line 17	225,700.			225,700.
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A), amount, list line 11g expenses on Sch 0.)	626,547.	542,182.	28,230.	56,135.
12	Advertising and promotion	272,200.	272,200.		
13	Office expenses	517,290.	359,149.	24,133.	134,008.
14	Information technology	159,449.	119,592.	28,629.	11,228.
15	Royalties				
16	Occupancy	390,093.	292,561.	70,061.	27,471.
17	Travel	325,245.	317,652.	6,114.	1,479.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1,021,462.	930,781.	90,681.	1 505
19	Conferences, conventions, and meetings	2,098,053.	2,016,596.	79,930.	1,527.
20	Interest	859.	645.	154.	60.
21	Payments to affiliates		100 500	24 262	9,437.
22	Depreciation, depletion, and amortization	134,001.	100,502.	24,062.	3,481.
23	Insurance	77,136.	64,779.	8,876.	3,401.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	AUDIO VISUAL RENTAL	606,239.	606,239.		
a b	SUBSCRIPTIONS/RESEARCH	195,185.	187,437.	2,407.	5,341.
C	DUES/MEMBERSHIPS	136,563.	133,878.	2,599.	86.
d	BAD DEBT	85,350.		85,350.	
	All other expenses	67,484.	58,347.	5,584.	3,553.
25	Total functional expenses. Add lines 1 through 24e	11,218,844.	9,212,564.	1,225,364.	780,916.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
-					Form 990 (2023)

Par	tΧ	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	2,132,797.	1	2,544,291.
	2	Savings and temporary cash investments	4,688,103.	2	2,792,659.
	3	Pledges and grants receivable, net	1,306,163.	3	2,304,181.
	4	Accounts receivable, net	507,217.	4	609,995.
	5	Loans and other receivables from any current or former officer, director,		1	
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
	_	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
(n	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	131,239.	9	165,465.
	10a	Land, buildings, and equipment: cost or other			
		hasis Complete Part VI of Schedule D 1.750,074.	Tree (1)		400.000
	ь	Less: accumulated depreciation 10b 1,642,335.	173,332.	10c	107,739.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	T00 100	14	220 440
	15	Other assets. See Part IV, line 11	528,407.	15	339,440.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	9,467,258.	16	8,863,770.
	17	Accounts payable and accrued expenses	1,462,377.		1,353,938.
	18	Grants payable	173,481.	18	199,188.
	19	Deferred revenue	1/3,401.	19	199,100.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to any current or former officer, director,			
ij		trustee, key employee, creator or founder, substantial contributor, or 35%		22	
Liabilities		controlled entity or family member of any of these persons		23	
_	23	Secured mortgages and notes payable to unrelated third parties		24	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	791,207.	25	200,118.
		of Schedule D	2,427,065.		1,753,244.
-	26	Total liabilities, Add lines 17 through 25			
ທູ		Organizations that follow i ries records, sweether		Call Inc.	
2		and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions	4,808,322.	27	5,019,409.
ala	27	Net assets with donor restrictions  Net assets with donor restrictions	2,231,871.	28	2,091,117.
В	28	Organizations that do not follow FASB ASC 958, check here			
뒫		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
\ss	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	7,040,193.	32	7,110,526.
Z	33	Total liabilities and net assets/fund balances	9,467,258.	33	8,863,770.
	00	Total rigoritios and not according to the same large.			Form 990 (2023)

Par	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1 2 3 4 5 6 7 8	Check if Schedule O contains a response or note to any line in this Part XI  Total revenue (must equal Part VIII, column (A), line 12)  Total expenses (must equal Part IX, column (A), line 25)  Revenue less expenses. Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))  Net unrealized gains (losses) on investments  Donated services and use of facilities  Investment expenses  Prior period adjustments  Other changes in net assets or fund balances (explain on Schedule O)	1 2 3 4 5 6 7 8	11,289 11,218	3,84 0,33	44. 33.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		711	) E	26
	column (B))	10	7,11	J , 5.	20.
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	***********		Yes	No
1 2a	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  Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		- 2a		X
b	separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:		2b	X	
	Separate basis  K 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 review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain on School As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	edule O.	0-		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why on Schedule O and describe any steps taken to undergo such audits	red audit	3b	990	(2023)

#### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

AMERICAN LEGISLATIVE EXCHANGE COUNCIL

Inspection
Employer identification number

52-0140979

Pa	rt I	Reason for Public C	Charity Status.	(All organizations must co	mplete th	is part.) Se	ee instructions.	
		ization is not a private found						
	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).)						
	H	A hospital or a cooperative				(b)(1)(A)(iii	i).	
3	H	A medical research organiza	ation operated in cor	niunction with a hospital	described	in section	n 170(b)(1)(A)(iii). Enter	the hospital's name,
4	ш		ation operated in cor	nanonon with a noopital	3000000		( - )( - )( - )( - )	
		city, and state: An organization operated for	who bonest of a col	logo or university owned	or operate	nd by a go	vernmental unit describe	d in
5	Ш	_		lege of university owned	oi operate	d by a go	Verringrital drift decorio	<b></b>
		section 170(b)(1)(A)(iv). (C				0/1-1/41/41/41/	. A	
6		A federal, state, or local gov						while described in
7	X	An organization that normal		ntial part of its support fro	om a gove	rnmentai t	unit or from the general p	oublic described in
		section 170(b)(1)(A)(vi). (Co						
8	Ш	A community trust describe				_		
9	Ш	An agricultural research org	anization described	in section 170(b)(1)(A)(i	x) operate	d in conju	nction with a land-grant	college
		or university or a non-land-g	rant college of agric	ulture (see instructions). I	Enter the r	name, city,	and state of the college	or
		university:						
10		An organization that normal	lly receives (1) more	than 33 1/3% of its supp	ort from co	ontribution	is, membership fees, and	l gross receipts from
		activities related to its exem	pt functions, subjec	t to certain exceptions; a	nd (2) no r	nore than	33 1/3% of its support fr	om gross investment
		income and unrelated busin	ess taxable income	(less section 511 tax) fro	m busines	ses acquii	red by the organization a	fter June 30, 1975.
		See section 509(a)(2). (Cor	mplete Part III.)					
11		An organization organized a	and operated exclusi	vely to test for public saf	ety.See s	section 50	9(a)(4).	
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform th	ne function	ns of, or to carry out the	purposes of one or
		more publicly supported org	ganizations describe	d in section 509(a)(1) o	section 5	509(a)(2).	See <b>section 509(a)(3).</b> C	heck the box on
		lines 12a through 12d that	describes the type o	f supporting organization	and comp	olete lines	12e, 12f, and 12g.	
а		Type I. A supporting orga	nization operated, s	upervised, or controlled l	y its supp	orted orga	anization(s), typically by (	giving
		the supported organization	on(s) the power to re	gularly appoint or elect a	majority o	f the direc	tors or trustees of the su	pporting
		organization. You must o						
b		Type II. A supporting orga			on with its	s supporte	d organization(s), by hav	ing
~		control or management of	f the supporting orga	anization vested in the sa	me persor	ns that co	ntrol or manage the supp	oorted
		organization(s). You mus			·			
c		Type III functionally inte			n connect	ion with, a	and functionally integrate	d with,
·		its supported organization						
d		Type III non-functionally	integrated. A SUDD	orting organization oper	ated in cor	nnection w	ith its supported organiz	zation(s)
	-	that is not functionally int	egrated. The organiz	ration generally must sati	sfv a distri	bution rec	uirement and an attentiv	/eness
		requirement (see instructi						
е		Check this box if the orga						
-	_	functionally integrated, or						202
	Ente	er the number of supported o						
	Prov	vide the following information	about the supporte					
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
_				doove (add indicatione)				
_								
Tota	al							

332021 12-21-23

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

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

Sec	tion A. Public Support						870
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	8117686.	7730325.	8505229.	9054508.	9913510.	43321258.
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						
4	Total. Add lines 1 through 3	8117686.	7730325.	8505229.	9054508.	9913510.	43321258.
	The portion of total contributions						
Ü	by each person (other than a						l.
	governmental unit or publicly	erin rescuisión					
	supported organization) included					DE LES STATES	
	on line 1 that exceeds 2% of the	1 2 1 2 1			TAME SUCT	31-121-	
	amount shown on line 11.						
	column (f)				1 5 5 5		3859140.
6	Public support. Subtract line 5 from line 4.		ALC: HOLDER				39462118.
	etion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	8117686.	7730325.	8505229.	9054508.	9913510.	43321258.
	Gross income from interest,	01270001					
8							
	dividends, payments received on						
	securities loans, rents, royalties,	14,631.	8,339.	27,280.	4,228.	22,704.	77,182.
_	and income from similar sources	14,031.	0,333.	27,2001			
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		133.	237,777.	1,013.	882.	239,805.
	assets (Explain in Part VI.)		155.	231,1111	1,013.	51 52 A   2 L L S	43638245.
	Total support. Add lines 7 through 10					12 4	,752,766.
12	Gross receipts from related activities,	etc. (see instruction	ons)	faculty or fifth town			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
13	First 5 years. If the Form 990 is for the						
0	organization, check this box and stop	here Der	centage				
	ction C. Computation of Publi			l (6)		14	90.43 %
	Public support percentage for 2023 (I					15	89.70 %
15	Public support percentage from 2022	Schedule A, Part	II, line 14		14 is 22 1/204 or m		
16a	33 1/3% support test - 2023. If the						
	stop here. The organization qualifies	as a publicly supp	orted organization		Line 15 in 22 1/20/	or more shock th	11646649,1111066666666
b	33 1/3% support test - 2022. If the						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation	40.40105		
17a	10% -facts-and-circumstances test	: - 2023. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	ion more,
	and if the organization meets the fact						
	meets the facts-and-circumstances te	est. The organization	on qualifies as a pu	iblicly supported o	organization	47 - 45 -	
b	10% -facts-and-circumstances test	- 2022. If the org	janization did not o	check a box on line	e 13, 16a, 16b, or	1/a, and line 15 is	10% Of
	more, and if the organization meets the	ne facts-and-circun	nstances test, che	ck this box and s	top here. Explain i	n Part VI how the	
	organization meets the facts-and-circle	umstances test. Th	ne organization qua	alifies as a publicly	supported organi	zation	
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b	b, check this box a	nd see instruction	15
						Schedule A	\ (Form 990) 2023

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

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

Sec	ction A. Public Support		-				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services 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						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
_	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	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						
11	Net income from unrelated business						
•	activities not included on line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
-	or loss from the sale of capital						
12	assets (Explain in Part VI.)						
14	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 5	501(c)(3) organization	on,
14	check this box and stop here						
Sei	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2023 (			column (fl)		15	%
	Public support percentage from 2022					16	%
Sec	ction D. Computation of Inves	stment Incom	e Percentage		× × × × × × × × × × × × × × × × × × ×		
	Investment income percentage for 2			ine 13, column (f))		17	%
	Investment income percentage from					18	%
10	33 1/3% support tests - 2023. If the	organization did	not check the box	on line 14. and lin	e 15 is more than		7 is not
192	more than 33 1/3%, check this box a	nd ston here The	e organization qual	ifies as a publicly	supported organization	ation	
	33 1/3% support tests - 2022. If the	organization did	not check a box or	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%.	and
	line 18 is not more than 33 1/3%, che	ck this box and e	ton here. The orga	anization qualifies	as a publicly supp	orted organization	
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a. or 19b. check t	this box and see in	structions	227
_20	Filvate Iounidation. If the organization	AL GIO LICE GLICON B					

#### 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)
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If* "Yes," *provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- B 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.
- 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
		SVII.S
1		
2		La Million
25	EV.	
3a		
3b		
3c		
4a	100	SA SELL
4b		
	1 8	
4c		
2010		
The same		
F-		
5a		
5b		-
5c	147.1	
633		
6		
7		
8		
9a		
157		
9b		i ir se
9c		
	- 5	100
10a		
10h	1.18	
10b dule A (For	m 000	1/ 2022

Par	t IV Supporting Organizations (continued)		Lavor
		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	9 1	
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and	Marie Contract	
	11c below, the governing body of a supported organization?	a	-
	A family member of a person described on line 11a above?	b	-
	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.	С	
Sect	ion 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 <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the		
_	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  Did the organization operate for the benefit of any supported organization other than the supported		
2	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		1
			1
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		
Cast	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations		
Seci	ion C. Type ii Supporting Organizations	Yes	No
	and the state of the directors	10	110
	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	- 1	1
	or management of the supporting organization was vested in the same persons that controlled or managed		-
	the supported organization(s).		
Sect	tion D. All Type III Supporting Organizations	Yes	No
		163	INO
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		13-11
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		43,000
	organization's governing documents in effect on the date of notification, to the extent not providedly provided.		1 -
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	I III CO	
	the organization maintained a close and continuous working relationship with the supported organization(s).		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a		
	significant voice in the organization's investment policies and in directing the use of the organization's		138
	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	1
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 year (see instructions).		
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 (see instru	tions).	
2	Activities Test. Answer lines 2a and 2b below.	Ye	s No
_ a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		
	those supported organizations and explain how these activities directly furthered their exempt purposes,		
	how the organization was responsive to those supported organizations, and how the organization determined	11 / 10	
	that these activities constituted substantially all of its activities.	а	
h	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,		
D	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in		5
			N N
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	ь	
_	these activities but for the organization's involvement.	. I P	
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		1/
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	a	
	trustees of each of the supported organizations: If Yes or No provide details in the supported organizations.	ns T	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	ь	
	OF ITS SUPPORTED OF CONTROL OF "Yes" describe in Fart VI the role played by the Organization in this regard.		

of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

Sche	dule A (Form 990) 2023 AMERICAN LEGISLATIVE EXC	CHANG		52-0140979 Page 6
Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Organ	lizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust on	Nov. 20, 1970 ( explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	complete	Sections A through E.	(D) 0
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		
_	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors	VI TO		
	(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		
	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		1
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			40
-	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ly integrat	ted Type III supporting org	anization (see

Schedule A (Form 990) 2023

instructions).

Schedule A (Form 990) 2023

a Excess from 2019 b Excess from 2020 c Excess from 2021 d Excess from 2022 e Excess from 2023

#### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

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

OMB No. 1545-0047

2023

Schedule B (Form 990) (2023)

AMERICAN LEGISLATIVE EXCHANGE COUNCIL

Employer identification number

52-0140979

Organization type (check one): Section: Filers of: 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 501(c)(3) exempt private foundation Form 990-PF 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 X 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) filling 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).

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

Employer identification number

### AMERICAN LEGISLATIVE EXCHANGE COUNCIL

52-0140979

Part I					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1		\$\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	Name, address, and En 1 1	\$\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3_	Training, Secured St.	\$\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
4	Name, add 635, and En 11	\$300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
5		\$\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
6		\$\$	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)		

Employer identification number

### AMERICAN LEGISLATIVE EXCHANGE COUNCIL

52-0140979

Part I	Contributors (see instructions). Use duplicate copies of Part 1 if additional	u space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

### AMERICAN LEGISLATIVE EXCHANGE COUNCIL

52-0140979

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	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
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u></u>		
			0
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<del>-</del>		
	<del>1</del>		
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	*		
- 1		\$	
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
Part I			

Name of organization

Employer identification number

LEGISLATIVE EXCHANG sively religious, charitable, etc., contribut any one contributor. Complete columns (a sting Part III, enter the total of exclusively religious,	ions to organizations described in sec	v For organiza	), (8), or (10) that total more than \$1,000 for the yeations				
and the state of the contract of the state o	charitable, etc., contributions of \$1,000 or le	ss for the year.	. (Enter this info. once.)				
duplicate copies of Part III if additional	space is needed.						
(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
	(e) Transfer of gift						
Transferee's name, address, a	and ZIP + 4	Relation	onship of transferor to transferee				
(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
(e) Transfer of gift							
Transferee's name, address, a	and ZIP + 4	Relation	onship of transferor to transferee				
(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
	(e) Transfer of gif	l					
Transferee's name, address, and ZIP + 4		Relati	onship of transferor to transferee				
(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
	(e) Transfer of gif	t					
	(b) Purpose of gift  Transferee's name, address, a  (b) Purpose of gift  Transferee's name, address, a  (b) Purpose of gift  Transferee's name, address, a	(b) Purpose of gift  (c) Use of gift  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  (b) Purpose of gift  (c) Use of gift  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  (b) Purpose of gift  (c) Use of gift  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  (b) Purpose of gift  (c) Use of gift  (d) Use of gift	(b) Purpose of gift  (c) Use of gift  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  (e) Transfer of gift  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relati  (b) Purpose of gift  (c) Use of gift  (c) Use of gift  Transferee's name, address, and ZIP + 4  Relati  (e) Transfer of gift  Relati				

#### SCHEDULE C (Form 990)

**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.

2023
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

	Section 501(c)(4), (5), or (6) organizati	ions: Complete Part III.			
Nan	ne of organization				oyer identification number
	AMERICAL	N LEGISLATIVE EXCH	LANGE COUNCI	<u> </u>	52-0140979
Pa	art I-A Complete if the org	anization is exempt under	section 501(c) or	is a section 527 org	janization.
2	Provide a description of the organization Political campaign activity expenditor Volunteer hours for political campaign	ures gn activities		\$	
Pa	art I-B   Complete if the org	anization is exempt under	section 501(c)(3)	•	
1	Enter the amount of any excise tax i	incurred by the organization under	section 4955	\$	
2	Enter the amount of any excise tax i	incurred by organization managers	under section 4955	\$	
3	If the organization incurred a section	n 4955 tax, did it file Form 4720 for	this year?	***************************************	Yes No
4a	Was a correction made?	***************************************			Yes No
b	If "Yes," describe in Part IV.				(0)
		anization is exempt under			
1	Enter the amount directly expended	l by the filing organization for section	on 527 exempt function	n activities\$	
2	Enter the amount of the filing organi				
	exempt function activities			\$	
3	Total exempt function expenditures				
	line 17b			5	Yes No
4	Did the filing organization file Form	1120-POL for this year?			K(K)K
5	Enter the names, addresses, and er	nployer identification number (EIN)	of all section 527 point	ical organizations to which	a the illing organization
	made payments. For each organizate contributions received that were pro	tion listed, enter the amount paid to	om the filing organizat	ization, such as a senarate	e segregated fund or a
	political action committee (PAC). If a	omptiy and directly delivered to a s	eparate political organi e information in Part IV		oogroguisa isiis si s
			(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(C) EIN	filing organization's	contributions received and
	741		ı	funds. If none, enter -0	promptly and directly
					delivered to a separate political organization.
					If none, enter -0
-					
-					

Sch	nedule C (Form 990) 2023	MERICAN LEG	ISLATIVE EXC	HANGE COUN	CIL 52-0	140979 Page 2
	art II-A Complete if the organization 501(h)).	nization is exem	pt under section 5	01(c)(3) and file	d Form 5768 (ele	ction under
Δ		ion belongs to an affilia	ated group (and list in Pa	art IV each affiliated	group member's name	, address, EIN,
^		of excess lobbying ex				
В	Check if the filing organizati	ion checked box A and	"limited control" provis	ions apply.		
	Limits	s on Lobbying Expend itures" means amoun	ditures		(a) Filing organization's totals	(b) Affiliated group totals
1	a Total lobbying expenditures to influe	ence public opinion (gr	assroots lobbying)		0.	
	b Total lobbying expenditures to influe				0.	
	c Total lobbying expenditures (add lin				0.	
	d Other exempt purpose expenditures				10,993,144.	
	e Total exempt purpose expenditures				10,993,144.	
	f Lobbying nontaxable amount. Enter				699,657.	
	If the amount on line 1e, column (a) or	T. T. L. C.	ying nontaxable amou			
	not over \$500,000,		ne amount on line 1e.			
	over \$500,000 but not over \$1,000,	000, \$100,000	) plus 15% of the excess	over \$500,000.		
	over \$1,000,000 but not over \$1,50	0,000, \$175,000	) plus 10% of the excess			
	over \$1,500,000 but not over \$17,0		\$225,000 plus 5% of the excess over \$1,500,000.			
	over \$17,000,000,	\$1,000,0	00.		454 644	
	g Grassroots nontaxable amount (enter 25% of line 1f)				174,914.	
	h Subtract line 1g from line 1a. If zero	or less, enter -0-			0.	
	i Subtract line 1f from line 1c. If zero	or less, enter -0			0.	
	j If there is an amount other than zero	o on either line 1h or lii	ne 1i, did the organizatio	on file Form 4720	r	¬., ¬.
_	reporting section 4911 tax for this y	/ear?				Yes No
	(Some organizations th	at made a section 50 See the separa	te instructions for lines	ve to complete all o s 2a through 2f.)	of the five columns be	elow.
_		Lobbying Expen	ditures During 4-Year	Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) Total
	a Lobbying nontaxable amount	505,209.	575,948.	618,703.	699,657.	2,399,517.
_	b Lobbying ceiling amount (150% of line 2a, column(e))					3,599,276.
_	c Total lobbying expenditures					
	d Grassroots nontaxable amount	126,302.	143,987.	154,676.	174,914.	599,879.
	e Grassroots ceiling amount (150% of line 2d, column (e))					899,819.

f Grassroots lobbying expenditures

## Schedule C (Form 990) 2023 AMERICAN LEGISLATIVE EXCHANGE COUNCIL 52-01409 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)	
the lobbying activity.	Yes	No	Amo	unt
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:	E YEL	100		
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912		5 4/1		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	2010	103		
If the filing examination incurred a section 4912 tay, did it file Form 4720 for this year?				
art III-A Complete if the organization is exempt under section 501(c)(4), section 5	601(c)(5)	, or sec	tion	
501(c)(6).			V 1	NI.
			Yes	N
Were substantially all (90% or more) dues received nondeductible by members?		. 1		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 5	rior year?	3	tion	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No	o" OR (b	) Part I	II-A, line	3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Ne answered "Yes."  1 Dues, assessments and similar amounts from members	o" OR (b	) Part I	II-A, line	3, is
answered "Yes."	o" OR (b	) Part I	II-A, line	3, is
answered "Yes."  1 Dues, assessments and similar amounts from members	o" OR (b	) Part I	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	o" OR (b	) Part I	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	o" OR (b	1 2a 2b	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total	o" OR (b	2a 2b 2c	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	o" OR (b	1 2a 2b 2c	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	o" OR (b	1 2a 2b 2c	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	o" OR (b	2a 2b 2c 3	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	o" OR (b	2a 2b 2c 3	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions	o" OR (b	2a 2b 2c 3	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions	o" OR (b	2a 2b 2c 3 4 5	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  art IV Supplemental Information  ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list)	o" OR (b	2a 2b 2c 3 4 5	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions	o" OR (b	2a 2b 2c 3 4 5	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  art IV Supplemental Information  ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list)	o" OR (b	2a 2b 2c 3 4 5	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  art IV Supplemental Information  ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list)	o" OR (b	2a 2b 2c 3 4 5	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  art IV Supplemental Information  ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list)	o" OR (b	2a 2b 2c 3 4 5	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  art IV Supplemental Information  ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list)	o" OR (b	2a 2b 2c 3 4 5	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  art IV Supplemental Information  ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list)	o" OR (b	2a 2b 2c 3 4 5	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  art IV Supplemental Information  ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list)	o" OR (b	2a 2b 2c 3 4 5	II-A, line	3, is
answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  art IV Supplemental Information  ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list)	o" OR (b	2a 2b 2c 3 4 5	II-A, line	3, is

#### **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 **Open to Public** Inspection

Name of the organization

AMERICAN LEGISLATIVE EXCHANGE COUNCIL

Employer identification number 52-0140979

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, line						
_		(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year						
_	Aggregate value of contributions to (during year)						
2	Aggregate value of grants from (during year)						
3	Aggregate value at end of year						
4	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advi	ised funds				
5	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No				
_	Did the organization inform all grantees, donors, and donor ac	tyisors in writing that grant funds can be	e used only				
6	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	e conferring				
Par							
- Care	Purpose(s) of conservation easements held by the organization						
1	Preservation of land for public use (for example, recreat		of a historically important land area				
	Protection of natural habitat		of a certified historic structure				
		17000110410111					
_	Preservation of open space  Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form	of a conservation easement on the last				
2	day of the tax year.	ed Conservation Contribution in the form	Held at the End of the Tax Year				
	•		2a				
a	Total number of conservation easements						
b		nature included on line 22					
С	Number of conservation easements on a certified historic stru		20				
d	Number of conservation easements included on line 2c acqui		2d				
	on a historic structure listed in the National Register  Number of conservation easements modified, transferred, rele	and extinguished or terminated by th					
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	ie organization during the tax				
	year	tis located					
4	Number of states where property subject to conservation eas	ement is located	<del>-</del> : f				
5	Does the organization have a written policy regarding the peri		W     M-				
	violations, and enforcement of the conservation easements it	holds?					
6	Staff and volunteer hours devoted to monitoring, inspecting, I	nandling of violations, and emorcing co	riservation easements during the your				
		the state of the s	ration casements during the year				
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserv	Ation easements during the year				
		is a state of a chief 170	(In)(A)(D)(i)				
8	Does each conservation easement reported on line 2d above						
	and section 170(h)(4)(B)(ii)?						
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expens	se statement and				
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial stater	ments that describes the				
	organization's accounting for conservation easements.  TIII Organizations Maintaining Collections of	Art Historical Treasures or C	Other Similar Assets.				
Pa			Allo, Girina Adda (a)				
_	Complete if the organization answered "Yes" on Form		and balance sheet works				
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement	furtherance of public				
	of art, historical treasures, or other similar assets held for pub	ilic exhibition, education, or research in	jurinerance of public				
	service, provide in Part XIII the text of the footnote to its finan	icial statements that describes these ite	ems.				
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and	balance sneet works of				
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in ful	rtherance of public service,				
	provide the following amounts relating to these items.		Φ.				
	(i) Revenue included on Form 990, Part VIII, line 1						
	(ii) Assets included in Form 990, Part X		\$				
2	If the organization received or held works of art, historical treat		sial gain, provide				
	the following amounts required to be reported under FASB A	SC 958 relating to these items:					
а	Revenue included on Form 990, Part VIII, line 1		\$				
b	Assets included in Form 990, Part X		\$				

Part	adio = // citil con/	N LEGISLAT:	IVE EXCHAN	GE COUNCIL	ser Similar Asse	ts (contin		age Z
	Using the organization's acquisition, accessi							
	collection items (check all that apply).	on, and other record	o, o, 100/1 a.r.y o. a.r.		- 3			
а	Public exhibition	d	Loan or exc	hange program				
b	Scholarly research	e		3 1 3				
C	Preservation for future generations							
	Provide a description of the organization's co	ollections and explain	how they further t	ne organization's e	xempt purpose in Pai	t XIII.		
5 [	During the year, did the organization solicit of	r receive donations	of art. historical trea	sures, or other sim	ilar assets			
	to be sold to raise funds rather than to be m					Yes		No
Part		gements Comple	te if the organizatio	n answered "Yes"	on Form 990, Part IV,	line 9, or		
	reported an amount on Form 990, Pa		g					
12	Is the organization an agent, trustee, custod		diary for contribution	ns or other assets r	not included			
	on Form 990, Part X?					Yes		No
h l	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:		Accounts:			
ים	it res, explain the arrangement in the account	and dompions the let				Amoun	t	
	Beginning balance				1c			
	Additions during the year							
	Distributions during the year							
	Ending balance							
f t	Did the organization include an amount on F	orm 990 Part X line	21 for escrow or c	ustodial account lia	ability?	Yes		No
2a L	If "Yes," explain the arrangement in Part XIII.	Check here if the ev	planation has been	provided in Part X				] _
Part		the organization and	swered "Yes" on Fo	rm 990, Part IV, lin	e 10.			
		(a) Current year	(b) Prior year	(c) Two years bac	k (d) Three years bac	k (e) Four	years	back
40 [	Beginning of year balance							
	Contributions							
	Net investment earnings, gains, and losses							
	Grants or scholarships							
	Other expenditures for facilities							
	·							
	and programs  Administrative expenses							
	End of year balance Provide the estimated percentage of the cur	ront year and halanc	e (line 1a. column (s	n)) held as:		_		
			%	,, noid doi				
	Board designated or quasi-endowment	%	<b>—</b> ′°					
	Permanent endowment							
-	Term endowment	-7"						
	The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse		ation that are held a	nd administered fo	r the			
		ssion of the organiza	ation that are neid a	ila garriiriistoroa ra		3	Yes	No
	organization by:					3a(i)		
	(i) Unrelated organizations?							
. (	(ii) Related organizations?  If "Yes" on line 3a(ii), are the related organizations.	rtione listed as requi	ad on Schedule R?					
	Describe in Part XIII the intended uses of the							
Part			willerit lulius.					
rait	Complete if the organization answere		Part IV. line 11a.	See Form 990. Par	t X, line 10.			
-		(a) Cost or o			) Accumulated	(d) Boo	k valu	
	Description of property	basis (investi		(other)	depreciation	(-)		-
	1		Sault	T <sub>2</sub> II				
	Land	7/00						
	Buildings	VANCE OF THE PROPERTY OF THE P		22,792.	889,427.	3	3.3	65.
	Leasehold improvements	XXX-0.00		96,152.	562,997.			55.
	Equipment			31,130.	189,911.			19.
_	Add lines 1a through 1e. (Column (d) must e			- 60-20 c	203,3220			39.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))

Schedule D (Form 990) 2023

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	000 110
(2) LEASE LIABILITY - OPERATING	200,118.
(3)	
(4)	
(4) (5) (6)	
(6)	
(7)	
(8)	
(9)  Total, (Column (b) must equal Form 990, Part X, line 25, col. (B))	200,118.

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

Schedule D	(1 01111 000) 2020				
Part XI	Reconciliation of	Revenue per	Audited Financial	Statements With Revenue per	Return

che	dule D (Form 990) 2023 AMERICAN LEGISLATIVE EXCHAN	GE CO	UNCIL :		J1409/9	Page 4
	t XI Reconciliation of Revenue per Audited Financial Statemen	ts With	Revenue per Ret	urn		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				11 100	400
1	Total revenue, gains, and other support per audited financial statements			1	11,429,	177.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a				
	Donated services and use of facilities	2b		1184		
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d	140,000.		4.40	
е	Add lines 2a through 2d			2e	140,	
3	Subtract line 2e from line 1			3	11,289,	177.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			1.50		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		20		
	Other (Describe in Part XIII.)	4b		O de		_
	Add lines 4a and 4b			4c		0.
=	Total revenue Add lines 3 and 4c (This must equal Form 990 Part I line 12)			5	11,289,	<u> 177.</u>
Pai	t XII Reconciliation of Expenses per Audited Financial Stateme	nts Witl	n Expenses per R	eturi	n	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			_1	11,385,	<u>513.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
	Other losses	2c				
	Other (Describe in Part XIII.)		166,669.			
	Add lines 2a through 2d			2e		669.
3	Subtract line 2e from line 1			3	11,218,	844.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		4,000,000,000			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
	Other (Describe in Part XIII.)					
	Add lines 4a and 4b		en-cheroscopica de la companya de l	4c		0 .
	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	11,218,	844.
Pa	t XIII Supplemental Information					
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I	V. lines 1b	and 2b; Part V, line 4	Part :	X, line 2; Part XI	,
700	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit	ional info	mation.			
nes	20 and 40, and Part Air, lines 20 and 40. Also complete time part to provide any desir					
_						
) <u>N</u> T	T X, LINE 2:					
A	II A, DING 2.					
rut	ORGANIZATION REVIEWS AND ASSESSES ALL ACT	IVITI	ES ANNUALLY	TO	IDENTIF	Υ
. 111	ONGANIZATION REVIEWS 1213 113525525 1115					
<b>NT3</b>	CHANGES IN THE SCOPE OF THE ACTIVITIES AN	D REV	ENUE SOURCE	SA	ND THE T	'AX_
7TA .	CIMIGID IN THE DOOLS OF THE HOLLY IN					
ו קיו	ATMENT THEREOF TO IDENTIFY ANY UNCERTAINTY	IN I	NCOME TAX.	FO	R THE	
. 1/1	MINUMI INDICATE TO IDENTIFY TO THE PROPERTY OF					

YEARS ENDED DECEMBER 31, 2023 AND 2022, MANAGEMENT DID NOT IDENTIFY ANY UNCERTAINTY IN INCOME TAX REQUIRING RECOGNITION OR DISCLOSURE IN THESE CONSOLIDATED FINANCIAL STATEMENTS.

#### PART XI, LINE 2D - OTHER ADJUSTMENTS:

REVENUE OF ENTITIES OTHER THAN THE ORGANIZATION INCLUDED IN THE

CONSOLIDATED AUDITED FINANCIAL STATEMENTS, NET OF

ELIMINATION ENTRIES.

140,000.

Schedule D (Form 990) 2023 AMERICAN LEGISLATIVE EXCHANGE COUNCIL  Part XIII   Supplemental Information (continued)	52-0140979	Page 5
Part XIII Supplemental information (continued)		
A THE SECOND AND THE		
PART XII, LINE 2D - OTHER ADJUSTMENTS:	mur	
EXPENSES OF ENTITIES OTHER THAN THE ORGANIZATION INCLUDED IN	THE	
CONSOLIDATED AUDITED FINANCIAL STATEMENTS, NET OF		
ELIMINATION ENTRIES.	166,6	669.
		<del>-</del>

#### **SCHEDULE G** (Form 990)

### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

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

Employer identification number

AMERICA	N LEGISLATIVE EXCHA	ANGI	CC	UNCIL	52-0140	979		
Part I Fundraising Activities	Complete if the organization answe				ine 17. Form 990-EZ	filers are not		
required to complete this par  1 Indicate whether the organization rais  a X Mail solicitations	sed funds through any of the followin	g activ	ities. (	Check all that apply.				
b X Internet and email solicitations f Solicitation of government grants c X Phone solicitations g Special fundraising events								
d X In-person solicitations  2 a Did the organization have a written of	or oral agreement with any individual	(includ	ling of	ficers, directors, trus	tees, or X Yes	□No		
key employees listed in Form 990, F b If "Yes," list the 10 highest paid indi compensated at least \$5,000 by the		rofession ant to	onal fi agreei	undraising services? ments under which th		-		
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	ustody itrol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization		
THE LS GROUP - 3030 K STREET, NW, PH201, WASHINGTON, DC	GALA EVENT FUNDRAISING	Yes	No X	991,250.	67,500.	923,750.		
PRECISION MARKETING, INC 2503D N HARRISON ST., PMB	DIRECT MAIL CAMPAIGN ASSISTANCE		х	122,182.	48,000.	74,182.		
AMERICAN PHILANTHROPIC - 119 N. HIGH STREET, WEST CHESTER,	RESEARCH POTENTIAL DONORS		х	0	103,950.	-103,950.		
RED ROAD CONSULTING - 2760W TRADE AVE, APT A, MIAMI, FL	CONSULTING		х	0.	6,250.	-6,250.		
Total				1,113,432.		887,732.		
List all states in which the organization or licensing.								
AK, AL, AR, AZ, CA, CO, CT, OH, OK, OR, PA, RI, SC, TN,	FL,GA,IL,KS,KY,LA,l UT,VA,WA,WI,WV	MA,N	AD,I	ME,MI,MN,MS	S,NC,ND,NH,	NU, MM, NY		
•								

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (c) Other events (a) Event #1 (b) Event #2 (d) Total events (add col. (a) through col. (c)) (total number) (event type) (event type) 1 Gross receipts \_\_\_\_\_ 2 Less: Contributions 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages ..... 8 Entertainment 9 Other direct expenses ..... 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (add (b) Pull tabs/instant (c) Other gaming (a) Bingo col. (a) through col. (c)) bingo/progressive bingo Revenue 1 Gross revenue . 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes No 6 Volunteer labor ..... 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? b If "Yes," explain: \_

Sch	edule G (Form 990) 2023 AMERICAN LEGISLATIVE EXCHANGE COUNCIL 52-0140979 Page 3
11	
12	
12	to administer charitable gaming? Yes No Indicate the percentage of gaming activity conducted in:
	The organization's facility
	An outside facility %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name
45.	Address  Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Ves No
152	
k	olf "Yes," enter the amount of gaming revenue received by the organization \$ and the amount
	of gaming revenue retained by the third party \$
(	: If "Yes," enter name and address of the third party:
	Name
	Address
16	Gaming manager information:
	Name ,
	Gaming manager compensation \$
	Description of services provided
	Director/officer Employee Independent contractor
	Mandatory distributions:
ź	s the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
Ŀ	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the
D-	organization's own exempt activities during the tax year \$ Int IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b,
1 6	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.
sc	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:
— / T	) NAME OF FUNDRAISER: THE LS GROUP
(1	
<u>(I</u>	) ADDRESS OF FUNDRAISER: 3030 K STREET, NW, PH201, WASHINGTON, DC 20007
	) NAME OF FUNDRAISER: PRECISION MARKETING, INC.
<u>(I</u>	
25	03D N HARRISON ST., PMB #16, ARLINGTON, VA 22207

## **SCHEDULE J** (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

OMB No. 1545-0047

Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

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

Employer identification number 52-0140979 AMERICAN LEGISLATIVE EXCHANGE COUNCIL

**Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Housing allowance or residence for personal use First-class or charter travel Payments for business use of personal residence X Travel for companions Health or social club dues or initiation fees Tax indemnification and gross-up payments Personal services (such as maid, chauffeur, chef) Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or X reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, X trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Written employment contract Compensation committee Independent compensation consultant X Compensation survey or study X Approval by the board or compensation committee X Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? 4b Participate in or receive payment from a supplemental nonqualified retirement plan? X Participate in or receive payment from an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: X 5a a The organization? X 5b Any related organization? If "Yes" on line 5a or 5b, describe in Part III. 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? 6b b Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments X 7 not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the X initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

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

Regulations section 53.4958-6(c)?

Schedule J (Form 990) 2023

Page 2

AMERICAN LEGISLATIVE EXCHANGE COUNCIL Schedule J (Form 990) 2023

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

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

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

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	2 and/or 1099-MISC compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) LISA NELSON	Ξ	328,388.	104,718.	212.	9,150.	384.	442,852.	0.
CEO	: 🗉	0	0	0	0	.0	0.	0
(2) LISA BOWEN	€	207,308.	20,000.	0.	9,092.	25,801.	262,201.	0
CFO		0	0.	.0	0.		0	0
(3) JONATHAN WILLIAMS	Ξ	205,192.	20,000.	0	9,008.	25,801.	260,001.	
CHIEF ECONOMIST, EVP-POLICY		0	• 0	0.			.0	
(4) MARIE VULAJ	ε	184,423.	15,000.	.0	7,977.	25,385.	232,785.	
VP-PARTNERSHIPS & ENGAGEMENT	: 3	0	0.	* 0		.0		
(5) LEE SCHALK	E	151,539.	10,000.	* 0	6,462.	20,714.	188	
ı	: €		0	0	0	• 0		
_	€	136,53	10,000.	0	5,862.	31,232.	183,63	0
- 1	9	0	0	0	0	• 0	• 0	0
	3	144,000.	0	0	5,760.	10,735.	160,495.	
SENIOR FELLOW - UNTIL 12/2023			0	0	• 0	.0	0	
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## **SCHEDULE 0** (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number

OMB No. 1545-0047

Name of the organization 52-0140979 AMERICAN LEGISLATIVE EXCHANGE COUNCIL FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: STATE OUTREACH INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. EXPENSES \$ 1,285,210. SPECIAL EVENT INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. EXPENSES \$ 616,656. MEMBERSHIP **REVENUE \$ 89,394.** INCLUDING GRANTS OF \$ 0. EXPENSES \$ 558,998. FORM 990, PART VI, SECTION A, LINE 6: IN ACCORDANCE WITH THE BYLAWS OF ALEC, FULL MEMBERSHIP SHALL BE OPEN TO PERSONS DEDICATED TO THE PRESERVATION OF INDIVIDUAL LIBERTY, BASIC AMERICAN VALUES AND INSTITUTIONS, PRODUCTIVE FREE ENTERPRISE, AND LIMITED REPRESENTATIVE GOVERNMENT, WHO SUPPORT THE PURPOSES OF ALEC, AND WHO SERVE, OR FORMERLY SERVED, AS MEMBERS OF A STATE OR TERRITORIAL LEGISLATURE, UNITED STATES CONGRESS OR SIMILAR BODIES OUTSIDE THE UNITED STATES. FORM 990, PART VI, SECTION A, LINE 7A: DIRECTORS ARE ELECTED EACH DECEMBER. THE BOARD SHALL CONSIST OF 23 MEMBERS OF WHICH 18 DIRECTORS ARE NOMINATED AND ELECTED BY THE BOARD OF DIRECTORS. THREE DIRECTORS SHALL BE NOMINATED BY THE BOARD OF DIRECTORS FROM A LIST OF SIX NOMINEES SUPPLIED BY THE STATE CHAIR, ONE OF WHOM SHALL BE THE CHAIR OF THE STATE CHAIRS. TWO DIRECTORS SHALL BE ELECTED BY THE BOARD OF DIRECTORS

FROM A LIST OF FOUR NOMINEES SUPPLIED BY THE TASK FORCE CHAIRS, ALL FOUR OF

Employer identification number 52-0140979

FORM 990, PART VI, SECTION A, LINE 8B:

ALEC DOES NOT MAINTAIN MINUTES FOR ALL COMMITTEES, BUT DECISIONS ARE TAKEN
TO THE FULL BOARD FOR APPROVAL AND ARE DOCUMENTED.

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

THE CFO REVIEWS ALEC'S FORM 990. SUCH REVIEW TAKES PLACE UPON RECEIPT OF

THE DRAFT FORM 990 RECEIVED FROM THE INDEPENDENT PUBLIC ACCOUNTING FIRM WHO

CONDUCTS THE FINANCIAL STATEMENT AUDIT OF ALEC. THE REVIEW INVOLVES

COMPARISON OF FINANCIAL DATA IN THE FORM 990 WITH THE AUDITED FINANCIAL

STATEMENTS AND REVIEW OF ALL NARRATIVE INFORMATION FOR ACCURACY AND

COMPLETENESS. THE CEO OF ALEC THEN REVIEWS THE FORM 990. PRIOR TO FILING,

THE PUBLIC DISCLOSURE COPY OF THE FORM 990 IS PROVIDED TO THE FULL BOARD OF

ALEC.

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

ALEC HAS A WRITTEN CONFLICT OF INTEREST POLICY. ACTUAL OR PERCEIVED

CONFLICTS ARE ADDRESSED BY THE BOARD ON A CASE BY CASE BASIS. WHILE

ANNUALLY ASKED TO SIGN THE WRITTEN CONFLICT OF INTEREST POLICY FORM, NOT

ALL BOARD MEMBERS RETURNED A SIGNED COPY.

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

ALEC COMPARES CURRENT SALARY RATES WITH OTHER NON-PROFITS BY REVIEWING

VARIOUS FEDERAL FORM 990'S AND THE ASAE COMPENSATION SURVEY TO ENSURE THE

RATES ARE COMPETITIVE. THE BOARD OF DIRECTORS REVIEWS AND APPROVES THE

COMPENSATION OF THE CEO. THE CEO APPROVES THE COMPENSATION OF ALL OTHER

EMPLOYEES, INCLUDING KEY EMPLOYEES. THROUGH THE ANNUAL BUDGET PROCESS,

BOARD APPROVAL OF OVERALL SALARY EXPENSE IS OBTAINED.

Name of the organization  AMERICAN LEGISLATIVE EXCHANGE COUNCIL	52-0140979
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
AK, AL, AR, AZ, CA, CO, CT, FL, GA, IL, KS, KY, LA, MA, MD, ME, MI, MN, MS, N	
OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WI,WV	
OII, OR, OR, III, III, OI, VII, III, III, III, III	
FORM 990, PART VI, SECTION C, LINE 19:	
ALEC MAKES THESE DOCUMENTS AVAILABLE UPON REQUEST.	

SCHEDULE R (Form 990) Name of the organization

Department of the Treasury Internal Revenue Service

## Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

2023

OMB No. 1545-0047

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

AMERICAN LEGISLATIVE EXCHANGE COUNCIL

Open to Public Inspection

Employer identification number 52-0140979

Schedule R (Form 990) 2023 (g) Section 512(b)(13) controlled No entity? Direct controlling Yes × Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. EXCHANGE COUNCIL Direct controlling entity LEGISLATIVE MERICAN End-of-year assets e status (if section Public charity 501(c)(3)) <u>e</u> Total income Exempt Code Ē section DISTRICT OF COLUMBIA 501(C)(4) ਉ Legal domicile (state or Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Legal domicile (state or foreign country) foreign country) EDUCATE THE PUBLIC & GOV'T POLICY MAKERS BY PROVIDING NONPARTISAN RESEARCH Primary activity Primary activity Name, address, and EIN (if applicable) JEFFERSONIAN PROJECT - 46-2233126 Name, address, and EIN of related organization 2733 CRYSTAL DRIVE, SUITE 1000 of disregarded entity ARLINGTON, VA 22202 Part Part II

Page 2 52-0140979

Schedule R (Form 990) 2023 AMERICAN LEGISLATIVE EXCHANGE COUNCIL

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

Sections 512-514)  Noration or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 3. year.  (b)  (c)  (d)  (d)  (d)  (e)  (f)  (c)  (c)  (c)  (c)  (c)  (c)  (c	(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax unde		(f) Share of total income	(g) Share of end-of-year assets		rtionate ons?	(i) Code V-UBI amount in box 20 of Schedule		General or Percentage managing ownership
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, becauss (c) (d) (d) (e) (f) (d) (e) (d) (e) (d) (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e			foreign country)		sections 5	12-514)		Dood		S.	K-1 (Form 106		
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, becaus (catate or controlling Type of entity (Coopp, Soop, Income assets or trust)													
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, becauss (c) (d) (e) (d) (d) (e) (d) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e	Τ												
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, becauss (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d													
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, becauss (c) (d) (e) (f) (g) (Goorp, Scorp, country) (C corp., Scorp, or trust) (C corp., Scorp, income assets													
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, becauss (c) (d) (e) (f) (g) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g													
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, becauss the organization answered "Yes" on Form 990, Part IV, line 34, because the controlling (corp. Scorp, scorp, scorp, country)  Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because the country of the corp. Scorp, scorp, income assets or trust)  Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because the country of the													
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, becauss (c) (d) (d) (e) (f) (d) (e) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d													
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, becauss (C) (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f													
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, becauss (c)  (d)  (d)  (e)  (e)  (f)  (g)  (income entity  (corp., S corp, s corp, income entity  or trust)  (contry)													
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, becauss  (c) (d) (e) (f) (g) (Goorp, Scorp, Income assets or trust)  Country)													
Primary activity   Legal domicile   Direct controlling   Type of entity   Share of total   Share of income   Share of country	ted Org as a con	anizations Taxable a	as a Corpo	1 17	omplete if th	ne organization	າ answered "	Yes" on Forr	n 990, Par	t IV, line 3,	4, because it ha	ad one or	more related
Primary activity Legal domicile Direct controlling Type of entity (C corp., S corp., Income end-of-year country)  Or frust)  assets  assets  assets				(a)	(0)	(p)		(e)	£	-		Ξ	
	and El nizatior	Z	Prim		egal domicile (state or foreign country)	Direct controll entity		of entity p, S corp, trust)	Share of 1 incom			Percentaç ownershi	512(b contro entiti
										+			
										1			

Page 3

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

				_	1
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		:	9	Yes No	اه
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	with one or more rela	ted organizations listed ir	Parts II-IV?		1.
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity					آړ
<b>b</b> Gift, grant, or capital contribution to related organization(s)			100000000000000000000000000000000000000	1b X	ا آہ
<u>(S)</u>	8 5	ALCOS		1c X	ا آل
	3			X bt	الم
				٠ X	١
e Loans or loan guarantees by related organization(s)	22.00				
				**	
f Dividends from related organization(s)				ļ	I.
g Sale of assets to related organization(s)			***************************************		۱.
h Purchase of assets from related organization(s)	***************************************			4	. آب
i Exchange of assets with related organization(s)		***************************************	***************************************		ال
j Lease of facilities, equipment, or other assets to related organization(s)		***************************************	***************************************	1j	ایر
k Lease of facilities, equipment, or other assets from related organization(s)					٠١٨
I Performance of services or membership or fundraising solicitations for related organization(s)	lization(s)			<	٠١٨
	ization(s)				٠١٨
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)	***************************************		•	اب
o Sharing of paid employees with related organization(s)				10	
				Y	>
p Reimbursement paid to related organization(s) for expenses				Þ	اہ
q Reimbursement paid by related organization(s) for expenses		***************************************		<b>4</b>	
				×	×
s Other transfer of cash or property from related organization(s)	th etalomoo term or	r bereved adjuding and a	elationships and transaction thresholds.		
2 If the answer to any of the above is if es, see the instructions of information of w	in and complete in	The state of the s			1
<b>(a)</b> Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	volved	
TEPPERSONTAN PROTECT	0	124,107.	FAIR VALUE		
(2) JEFFERSONIAN PROJECT	OI.	20,786.	FAIR VALUE		
					1
(4)					
(9)					Ĩ
(6) 332163 09-28-23			Schedule	Schedule R (Form 990) 2023	023

Page 4

AMERICAN LEGISLATIVE EXCHANGE COUNCIL Schedule R (Form 990) 2023 Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

General or Percentage managing ownership partner?				
General or managing partner?				
bisproper- Unate lunate amount in box 20 malocations? of Schedule K-1  Ves No (Form 1065)				
(h) spropor- lionate ocations?				
当 <b>制</b> 文				
(g) Share of end-of-year assets				
(f) Share of total income				
Are all partners sec. 501 (c)(3) orgs.?				
(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)				
(c) Legal domicile (state or foreign country)				
<b>(b)</b> Primary activity				
(a) Name, address, and EIN of entity				

Schedule R	(Form 990) 2023	AMERICAN	LEGISLATIVE	EXCHANGE	COUNCIL	52-0140979	Page 5
Part VII	(Form 990) 2023 Supplemental Infor	mation					
	Provide additional informa	ation for responses	to questions on Schedu	ule R. See instruct	ions.		
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<u> </u>							