** PUBLIC DISCLOSURE COPY **

_{Form} 990

Return of Organization Exempt From Income Tax

Open to Public

rnal Revenue Service

For the 2023 calendar year, or tax year beginning

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

and ending

Inspection

C Name of organization D Employer identification number Check If Address Catholics for Choice Hame change 52-1154418 Doing business as initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Phal 1436 U St NW, Ste 301 (202)986-6093 7,106,925. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts S Washington, DC 20009 H(a) Is this a group return F Name and address of principal officer. Christopher Wimbush for subordinates? Yes X No same as C above H(b) Are all subordinates included? Yes No Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) If "No." attach a list. See instructions www.catholicsforchoice.org Website: H(c) Group exemption number Form of organization: X Corporation Trust Association Year of formation: 1974 M State of legal domicile: DC Part I Summary Briefly describe the organization's mission or most significant activities: See Part III, Line 1 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 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 Prior Year Current Year 2.194.065 2,630,460. 8 Contributions and grants (Part VIII, line 1h) 9.654 9,707. 9 Program service revenue (Part VIII, line 2g) 52,809. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11,568. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,704,544. 2,390,870. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 63,288. 14,637. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 1,629,538 1,945,858. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 536,114. b Total fundraising expenses (Part IX, column (D), line 25) 1,454,735. 1,253,504. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,213,999. 3.147.561. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -756,691. -509,455. 19 Revenue less expenses. Subtract line 18 from line 12. Beginning of Current Year End of Year 麵 14,206,866. 14,891,745. 20 Total assets (Part X, line 16) 791,051 460,983. 21 Total liabilities (Part X, line 26) 14,430,762 415,815. Net assets or fund balances, Subtract line 21 from line 20. Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Christopher Wimbush 10/10/2024 Sign Christopher Wimbush, Interim President Here Type or print name and title Preparer's signature Print/Type preparer's name Zhana 10/08/24 P01249785 Paid Yong Zhang, CPA Firm's name Rogers & Company PLLC Firm's EIN 58-2676261 Preparer Use Only Firm's address 8300 Boone Boulevard, Suite 600 Phone no. (703) 893-0300 Vienna, VA 22182 X Yes No May the IRS discuss this return with the preparer shown above? See instructions

Pai	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:
	Catholics for Choice-which serves the pro-choice Catholic
	majority-encounters, emboldens, and educates people of faith who
	support reproductive freedom. We work in the United States and abroad
	to promote our belief that reproductive healthcare is a human right.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 898,839 • including grants of \$) (Revenue \$ 9,707 •)
Tu	Communications: promotion of the organization's mission through the
	development of values-based messaging and the publication of
	educational and pastoral resources.
	educacional and pascolal lesources:
4b	(Code:) (Expenses \$ 737,662 • including grants of \$ 14,637 •) (Revenue \$
	Domestic Programs: promotion of the organization's mission through
	activities including education, organizing, and movement-building at
	the state and federal levels in the United States.
	<u> </u>
4c	(Code:) (Expenses \$ 404,984. including grants of \$) (Revenue \$)
	International Programs: promotion of the organization's mission through
	values clarification workshops, theological messaging trainings, and
	other communications vehicles.
4d	Other program services (Describe on Schedule O.)
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses 2,041,485.
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Form 990 (2023) Catholics for Choice Part IV Checklist of Required Schedules

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

Form 990 (2023) Catholics for Choice Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		l	
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	 		x
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	-	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
А	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	200		x
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28a 28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?	200		1
Ü	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	۔ ا		_ v
05 -	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	├^
a	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
00	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	"		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
U	(gambling) winnings to prize winners?	1c	Х	
	\(\sigma\)			

Catholics for Choice Statements Regarding Other IRS Filings and Tax Compliance (continued) Form 990 (2023) Part V

		_		Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1.0			
	filed for the calendar year ending with or within the year covered by this return	19		.,	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Х	Х
			3a		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	Г	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority o		.		х
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		
D	If "Yes," enter the name of the foreign country				
5 0	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (F		5 0		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a 5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		- 25
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization		30		
ou	any contributions that were not tax deductible as charitable contributions?	1	6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gift		-		
~	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provice	ded to the payor?	7a		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_			
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	Ī			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 a	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		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the				
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	, , , , , , , , , , , , , , , , , , , ,		9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
	Initiation fees and capital contributions included on Part VIII, line 12 10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-			
11	Gross income from members or shareholders 11a				
	Gross income from other sources. (Do not net amounts due or paid to other sources against				
b	amounts due or received from them.)				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	l l			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans				
С	Enter the amount of reserves on hand				
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or				7.5
	excess parachute payment(s) during the year?		15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.				3.7
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		Х
_ -	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

Part 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	2								
	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 0.									
b	Enter the number of voting members included on line 1a, above, who are independent 1b	2								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?	2		X						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, trustees, or key employees to a management company or other person?	3		X						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X						
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders?	6		X						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
	more members of the governing body?	7a		X						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	Х							
b	Each committee with authority to act on behalf of the governing body?	8b		X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the									
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		X						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X							
11a	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?									
b										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	on Schedule O how this was done	12c	X							
13	Did the organization have a written whistleblower policy?	13	X							
14	Did the organization have a written document retention and destruction policy?	14	X							
15	Did the process for determining compensation of the following persons include a review and approval by independent									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official	15a	X							
b	Other officers or key employees of the organization	15b		Х						
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
	taxable entity during the year?	16a		X						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?	16b								
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, CA, CO, CT, DC, FL, GA	A,HI	,IL	,KS						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(c) (c) (c) (c) (c) (c) (c) (c) (c) (3)s only) avail	able						
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X Upon request Other (explain on Schedule O)									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	nd fina	ncial							
	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's books and records									
	Christopher Wimbush - (202)986-6093									
	1436 U St NW, Ste 301, Washington, DC 20009									

Form 990 (2023)

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.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	(do	not c	Pos heck	ition more	than o	one	Reportable	Reportable	Estimated
	hours per	box	oox, unless person is both an officer and a director/trustee)				h an	compensation	compensation	amount of
	week	Η.			1	17 11 43	100)	from	from related	other
	(list any hours for	Individual trustee or director				_		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or c	stee			satec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al trus		yee	mper		1099-NEC)	,	and related
	below	idual	nstitutional trustee	l e	Key employee	est cc Ioyee	ıer	,		organizations
	line)	Indiv	Instii	Officer	Key	Highest compensated employee	Former			
(1) Jamie Manson	60.00									
President				Х				282,273.	0.	30,697.
(2) Margaret-Ann Cabaniss	40.00									
Dir. of Development						Х		153,052.	0.	13,777.
(3) Ashley Wilson	40.00									
Dir. of Communications & Strategy						Х		126,000.	0.	16,719.
(4) Christopher Wimbush	50.00									
Chief of Staff						Х		119,217.	0.	5,740.
(5) Shannon Russell	40.00									
Dir. of Policy						Х		102,286.	0.	14,480.
(6) Linda Pinto	5.00							_	_	_
Board Chair		Х		Х				0.	0.	0.
(7) Gloria Romero Roses	5.00								_	_
Board Treasurer		Х		Х				0.	0.	0.
(8) Meghan Smith Holden	5.00								_	_
Board Dir (Jan-Jun)/Secretary (Jun-D		Х		Х				0.	0.	0.
(9) Kathleen Ryg	5.00								_	_
Secretary (Jan-Jun)/Board Dir (Jun-D		Х						0.	0.	0.
(10) Erin Matson	5.00									
Board Director		Х						0.	0.	0.
(11) Jennifer Villavicencio	5.00								_	_
Board Director		Х						0.	0.	0.
(12) Jessica Avery	5.00									
Board Director		Х						0.	0.	0.
(13) Kate Ott	5.00									
Board Director		Х						0.	0.	0.
(14) Luis Borbon	5.00								_	_
Board Director		Х						0.	0.	0.
		-								
		_								
		1	l	1	1	1	l			

(A)	(B)	nployees, and Highest ((C)			gne	ST ((D)	es (continuea) (E)			(F)		
Name and title	Average			Pos	ition			Reportable	(E) Reportable		Fe	ור) timate	ad.
Name and title	hours per	nours per (do not check more than one box, unless person is both an										nount	
	week officer and a director/truster							from	from related			other	
	(list any	ector	ector					the	organizations			pensa	
	hours for related	or dir	æ			ated		organization	(W-2/1099-MIS	C/		om th	
	organizations	ustee	truste		e e	ubeus		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		•	anizat d relat	
	below	Individual trustee or director	Institutional trustee	_	key employee	st cor	<u> </u>	′				anizati	
	line)	Indivi	Institu	Officer	Key er	Highest compensated employee	Former				J		
1b Subtotal								782,828.		0.	8	1,4	13.
c Total from continuation sheets to Part VI	I, Section A							0.		0.			0.
d Total (add lines 1b and 1c)								782,828.		0.	8	1,4	13.
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bove	e) wh	no r	received more than \$100	,000 of reportable	е			_
compensation from the organization												Yes	5 No
3 Did the organization list any former officer,	director trust	ee k	cev e	emp	love	e or	· hic	nhest compensated emr	olovee on			103	140
line 1a? If "Yes," complete Schedule J for s	•	-	•		•	-	•	• • •	•		3		Х
4 For any individual listed on line 1a, is the su										····			
and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sche	edule	J	for such individual			4	Х	
5 Did any person listed on line 1a receive or a	accrue comper	nsat	ion f	rom	any	unr unr	elat	ted organization or indivi	dual for services				
rendered to the organization? If "Yes," com	plete Schedul	e J f	or su	ıch	pers	son .					5		X
Section B. Independent Contractors													
1 Complete this table for your five highest co	=	-								pensa	tion f	rom	
the organization. Report compensation for (A)	the calendar y	eare	enai	ng v	vitri	or w	Itnii	n the organization's tax (B)	year.		(C	<u> </u>	
Name and business	address							Description of s	ervices	Co		nsatio	n
RSM US LLP, 1861 Internation	tional I)ri	ive	3 5	STI	E		Accounting a	nd Tax				
400, McLean, VA 22102							Preparation	& Filing		21	4,0	50.	
							\dashv						
							\dashv						

\$100,000 of compensation from the organization

Total number of independent contractors (including but not limited to those listed above) who received more than

Catholics for Choice 52-1154418 Page 9 Form 990 (2023) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Revenuè éxcluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 2,630,460. 1f g Noncash contributions included in lines 1a-1f 1g |\$ 2,630,460. h Total. Add lines 1a-1f **Business Code** 2 a Pubs and Subscriptions Program Service Revenue 900099 9,707. 9,707. С f All other program service revenue 9,707. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 301,032 301,032. other similar amounts) Income from investment of tax-exempt bond proceeds 121 121. 5 Royalties (i) Real (ii) Personal 5,100 6 a Gross rents **b** Less: rental expenses ... 6b 5,100. c Rental income or (loss) 5,100. 5,100. d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 4,154,158. **b** Less: cost or other basis Other Revenue 4,402,381 and sales expenses 7b -248,223. c Gain or (loss) ______7c -248,223. -248,223. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities **10 a** Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a Other Revenue 900099 6,347 6,347.

64,377.

b

d All other revenue

Total revenue. See instructions

e Total. Add lines 11a-11d

6,347

9,707.

2,704,544.

Form 990 (2023) Catholics for Choice 52

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respon				X
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21	6,637.	6,637.		
2	Grants and other assistance to domestic	0,037.	0,037.		
2					
•	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	8,000.	8,000.		
	individuals. See Part IV, lines 15 and 16	0,000.	0,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	312,970.	208,145.	40,368.	61 157
_	trustees, and key employees	314,970.	200,143.	40,300.	64,457.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 267 200	000 075	176 250	001 502
7	Other salaries and wages	1,367,208.	909,275.	176,350.	281,583.
8	Pension plan accruals and contributions (include	FO 614	24 004	6 505	10 000
	section 401(k) and 403(b) employer contributions)	52,614.	34,991.	6,787.	10,836.
9	Other employee benefits	108,622.	72,239.	14,011.	22,372.
10	Payroll taxes	104,444.	69,461.	13,472.	21,511.
11	Fees for services (nonemployees):				
а	Management				
b	Legal	8,569.		8,569.	
С	Accounting [198,507.		198,507.	
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	77,314.		77,314.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	330,557.	268,315.	30,622.	31,620.
12	Advertising and promotion	33,256.	27,342.	5,865.	31,620. 49.
13	Office expenses	95,459.	69,102.	10,188.	16,169.
14	Information technology				
15	Royalties				
16	Occupancy	169,965.	118,038.	15,653.	36,274.
17	Travel	54,857.	46,525.	349.	7,983.
18	Payments of travel or entertainment expenses	,	,		<u> </u>
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	68,808.	51,829.	13,744.	3,235.
20	Interest	,	,	==,,-==	-,
21	Payments to affiliates			+	
22	Depreciation, depletion, and amortization	63,013.	42,141.	7,955.	12,917.
23	Inquirance	23,280.	14,446.	4,687.	4,147.
23 24	Other expenses. Itemize expenses not covered	25,250	,,	=,00,•	-,,•
24	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
-	amount, list line 24e expenses on Schedule 0.) Dues and Subscriptions	82,396.	71,265.	897.	10,234.
a	License, Taxes and Fees	28,157.	16,868.	622.	10,234.
a	Miscellaneous	9,771.	0.	9,771.	10,007.
С	Staff Development	9,771.	6,866.	669.	2,060.
d		3,333.	0,000.	009.	۵,000.
	All other expenses	3,213,999.	2,041,485.	636,400.	536,114.
25	Total functional expenses. Add lines 1 through 24e	3,413,333.	4,041,403.	030,400.	330,114.
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)				F 000 (0000)

Form 990 (2023)

Part X | Balance Sheet

Par	rt X	Balance Sheet					
		Check if Schedule O contains a response or r	note to a	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			202,445.	1	503,718.
	2	Savings and temporary cash investments		645,894.	2	135,061.	
	3	Pledges and grants receivable, net			1,520,131.	3	1,059,728.
	4	Accounts receivable, net	93,088.	4	91,705.		
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, su	contributor, or 35%				
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disqu	alified pe	rsons (as defined			
		under section 4958(f)(1)), and persons describ	bed in se	ction 4958(c)(3)(B)		6	
şţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			32,684.	9	52,455.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		750,936.			
	b	Less: accumulated depreciation		700,804.	98,060.	10c	50,132. 12,666,399.
	11	Investments - publicly traded securities		10,990,882.	11	12,666,399.	
	12	Investments - other securities. See Part IV, lin		12			
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets	602 600	14	222 545		
	15	Other assets. See Part IV, line 11	623,682.	15	332,547.		
	16	Total assets. Add lines 1 through 15 (must e			14,206,866.	16	14,891,745.
	17	Accounts payable and accrued expenses			110,556.	17	183,731.
	18	Grants payable			18		
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complet				21	
Liabilities	22	Loans and other payables to any current or fo					
oilit		trustee, key employee, creator or founder, su					
Lia		controlled entity or family member of any of the				22	
	23	Secured mortgages and notes payable to unr				23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lir of Schedule D		·	680,495.	25	277,252.
	26	Total liabilities. Add lines 17 through 25			791,051.	26	460,983.
$\overline{}$	20	Organizations that follow FASB ASC 958, or			73170310	20	100/3031
Ses		and complete lines 27, 28, 32, and 33.	TICON TIC				
auc	27	Net assets without donor restrictions			11,618,065.	27	13,098,943.
Bal	28	Net assets with donor restrictions			1,797,750.	28	1,331,819.
pu		Organizations that do not follow FASB ASC			, ,		, ,
교		and complete lines 29 through 33.	, , , , , , , , , , , , , , , , , , , ,				
Š	29	Capital stock or trust principal, or current fund			29		
Net Assets or Fund Balances	30	Paid-in or capital surplus, or land, building, or				30	
As	31	Retained earnings, endowment, accumulated				31	
ě	32	Total net assets or fund balances		13,415,815.	32	14,430,762.	
	i	Total liabilities and net assets/fund balances			14,206,866.	33	14,891,745.

Form **990** (2023)

Pa	rt XI Reconciliation of Net Assets			, α,	90			
	Check if Schedule O contains a response or note to any line in this Part XI							
	,							
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,70	4,5	44.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,21	3,9	99.			
3	Revenue less expenses. Subtract line 2 from line 1	3	-50					
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	13,41	5,8	<u>15.</u>			
5								
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B)) 10 14,4							
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII							
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	X				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,						
	consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the							
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.						
3а	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?		3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ							
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b					

332012 12-21-23

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

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.

2023

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Catholics for Choice

Employer identification number 52 – 115 / / 18

		Cati	OIICS IOI	CHOICE			-	7 1134410				
Pa	rt I	Reason for Public (Charity Status.	(All organizations must o	omplete tl	nis part.) S	See instructions.					
The	organ	ization is not a private found										
1		A church, convention of ch	urches, or association	on of churches described	d in sectio	n 170(b)(1)(A)(i).					
2		A school described in secti										
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4		A medical research organiz					-	the hospital's name.				
		city, and state:		. ,				,				
5		An organization operated for	or the benefit of a co	allege or university owner	d or opera	ted by a d	overnmental unit describ	ned in				
Ŭ		section 170(b)(1)(A)(iv). (C		maga ar armvaranty attrict	a or opera	iou by u g	overmiental and accord	, od 111				
6				montal unit described in	soction 17	70/6\/4\/A\	(v)					
7	X	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in										
'		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)										
0				(4)(A)(vi) (Complete Der	+ II \							
8		A community trust describe						a alla ma				
9		An agricultural research org	-			-	-	-				
		or university or a non-land-g	grant college of agric	culture (see instructions).	. Enter the	name, city	y, and state of the colleg	e or				
40		university:										
10	ш	An organization that norma										
		activities related to its exen		•	` '		• •	· ·				
		income and unrelated busin		(less section 511 tax) from	om busine	sses acqu	ired by the organization	after June 30, 1975.				
		See section 509(a)(2). (Cor										
11		An organization organized a	•	•	•							
12		An organization organized a	· ·	•	•		•					
		more publicly supported or						Check the box on				
		lines 12a through 12d that										
а			· · · · · · · · · · · · · · · · · · ·	•	•							
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or trustees of the s	supporting				
	_	organization. You must o	complete Part IV, Se	ections A and B.								
b			anization supervised	d or controlled in connec	tion with it	s support	ed organization(s), by ha	iving				
		control or management o	of the supporting orga	anization vested in the s	ame perso	ons that co	ontrol or manage the sup	ported				
	_	organization(s). You mus	t complete Part IV,	Sections A and C.								
С			grated. A supporting	g organization operated	in connec	tion with,	and functionally integrat	ed with,				
	_	its supported organization	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.					
d			y integrated. A supp	orting organization oper	ated in co	nnection v	vith its supported organ	zation(s)				
		that is not functionally int	egrated. The organiz	zation generally must sat	tisfy a dist	ribution re	quirement and an attent	iveness				
		requirement (see instruct	ions). You must con	nplete Part IV, Sections	s A and D,	and Part	V.					
е		☐ Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	a Type I, Type II, Type III					
		functionally integrated, or	r Type III non-functio	nally integrated support	ing organi:	zation.						
f	Ente	er the number of supported o	organizations									
g		vide the following information		. 								
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	ng document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)				
Tota	al											

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	981,787.	301,324.	1,766,582.	2,194,065.	2,630,460.	7,874,218.
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	004 505	201 201				
	Total. Add lines 1 through 3	981,787.	301,324.	1,766,582.	2,194,065.	2,630,460.	7,874,218.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						0.504.045
_	column (f)						2,584,347.
	Public support. Subtract line 5 from line 4.						5,289,871.
	• • • • • • • • • • • • • • • • • • • •	(=) 0010	(h) 0000	(=) 0001	(a) 0000	(-) 0000	(f) Tatal
	ndar year (or fiscal year beginning in)	(a) 2019 981, 787.	(b) 2020 301,324.	(c) 2021 1,766,582.	(d) 2022 2,194,065.	(e) 2023 2,630,460.	(f) Total 7,874,218.
	Amounts from line 4 Gross income from interest,	301,707.	301,324.	1,700,302.	2,154,005.	2,030,400.	7,074,210.
0	*						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources	740,088.	310,395.	292,047.	308,373.	306,253.	1,957,156.
a	Net income from unrelated business	, 10,000	320,3331	232,027	300,0100	300,2331	2,507,2004
•	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	664.				6,347.	7,011.
11	Total support. Add lines 7 through 10						9,838,385.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	25,825.
	First 5 years. If the Form 990 is for th			fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stop						
	tion C. Computation of Publ						
	Public support percentage for 2023 (14	53.77 %
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	30.00 %
16a	33 1/3% support test - 2023. If the o	•		•		•	
	stop here. The organization qualifies						
b	33 1/3% support test - 2022. If the c						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes	ū					*
	and if the organization meets the fact		•	•	•	9	
	meets the facts-and-circumstances to	-	-		-		
b	10% -facts-and-circumstances tes	_					IU% or
	more, and if the organization meets the				-		
40	organization meets the facts-and-circ						
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 160, 1/a, or 1/b	o, cneck this box a	na see instruction	s

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	tion A. Public Support	elow, please com	ipietė Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	(,	(-7	(-,	(-,	(-,	(4)
	membership fees received. (Do not						
	include any "unusual grants.")						
	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						
	Gross receipts from activities that are not an unrelated trade or business under section 513						
	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
	furnished by a governmental unit to the organization without charge						
	· · · ·						
	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	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						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
11	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for th	e organization's f	first, second, third.	fourth, or fifth tax	year as a section	501(c)(3) organizat	ion,
	check this box and stop here		, , , , , , , , , , , , , , , , , , , ,	,		. , , , , , ,	
	tion C. Computation of Publi	ic Support Pe	ercentage				
15	Public support percentage for 2023 (li	ine 8, column (f),	divided by line 13,	column (f))		15	%
	Public support percentage from 2022					16	%
	tion D. Computation of Inves					<u> </u>	
	Investment income percentage for 20		<u>~</u> _			17	%
	Investment income percentage from 2					18	%
	33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box ar	-					
b	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%,	
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n ala not check a	a box on line 14, 19	a, or 19b, check t	nıs box and see ir	istructions	

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
4		
1		
2		
За		
3b		
Зс		
4a		
41.		
4b		
4c		
5a		
5b		
5c		
6		
6		
7		
8		
9a		
9b		
9c		
10a		
100		
10b		
lule A (For	m 990	2023

Par	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	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 Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
	<u>, </u>		Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			
	r		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	_		
Saat	supported organizations played in this regard.	3		
	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
a	The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in:	atruation	20)	
с 2	Activities Test. Answer lines 2a and 2b below.	Struction	Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	NO
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organization(s) to which the organization was responsive: in res, therein Part Vi identity			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	<u>_u</u>		
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.	2.0		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ju		
~	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orgai	nizations			
1	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 mus	t complete	Sections A through E.			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3.	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
с	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other factors					
	(explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d.	3				
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,					
	see instructions).	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by 0.035.	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, column A)	1				
2	Enter 0.85 of line 1.	2				
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3				
4	Enter greater of line 2 or line 3.	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions).	6				
7	Check here if the current year is the organization's first as a non-functional	Illy integrat	ed Type III supporting org	anization (see		

Schedule A (Form 990) 2023

instructions).

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations _{(continu}	ıed)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	าร	3		
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required - pro		5		
6	Other distributions (describe in Part VI). See instructions.		6		
7	Total annual distributions. Add lines 1 through 6.	7			
8	Distributions to attentive supported organizations to which the				
	(provide details in Part VI). See instructions.	8			
9	Distributable amount for 2023 from Section C, line 6	9			
10	Line 8 amount divided by line 9 amount		10		
Secti	on E - Distribution Allocations (see instructions)	าร	(iii) Distributable Amount for 2023		
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2019				
b	Excess from 2020				
С	Excess from 2021				
d	Excess from 2022				
е	Excess from 2023				

Schedule A (Form 990) 2023

Part V	I Cumpl		I Information 2	
rait v	Part IV, line 1; P Section	Section A art IV, Sec	Il Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Inlines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, Incident C, Section B, Incident E, Incident	
Sched	dule A	, Par	t II, Line 10, Explanation for Other Income:	
Other	r incor	ne		
2019	Amount	t: \$	664.	
2023	Amount	t: \$	6,347.	
				_

Schedule B

Schedule of Contributors

OMB No. 1545-0047

2023

Schedule B (Form 990) (2023)

52-1154418

Department of the Treasury Internal Revenue Service

Name of the organization

Catholics for Choice

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

Employer identification number

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

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

Name of organization

Employer identification number

Catholics for Choice

52-1154418

Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution	ion
1		\$ 56,000. Person X Payroll Noncash (Complete Part II for noncash contribution	ıs.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution	ion
2		\$\frac{1,800,000.}{\text{Person } \text{X}}\$ Person \text{X} Payroll Noncash (Complete Part II for noncash contribution)	ns.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contributions	ion
3		Person X Payroll Noncash (Complete Part II for noncash contribution	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contributi	ion
		Person Payroll Noncash (Complete Part II for noncash contribution	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution	ion
		Person Payroll Noncash (Complete Part II for noncash contribution	ns.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution	ion
202450, 10.00		Person Payroll Noncash (Complete Part II for noncash contribution	

Catholics for Choice

52-1154418

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
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. 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

Employer identification number Name of organization Catholics for Choice 52-1154418 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

Political Campaign and Lobbying Activities

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

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

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

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

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

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

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

Nar	me of organization	or (o) organiza	tione. Complete Fair III.		Emp	loyer identification number
	•	Catholi	cs for Choice		'	52-1154418
Pa			ganization is exempt un	der section 501(c)	or is a section 527	organization.
2	Political campaign ac	tivity expendit	zation's direct and indirect politi cures ign activities			\$
Pá	art I-B Complet	e if the org	ganization is exempt un	der section 501(c)	(3).	
			incurred by the organization un	<u>`</u>	` '	 \$
			incurred by organization manage			
			on 4955 tax, did it file Form 4720			
48	a Was a correction mad	de?				Yes No
	b If "Yes," describe in F	Part IV.				
			ganization is exempt un		•	
			d by the filing organization for s			\$
2			nization's funds contributed to o			
						
3	Total exempt function	•				
_			1120-POL for this year?			
5			mployer identification number (l ition listed, enter the amount pa			
	• •	-	comptly and directly delivered to			•
		•	additional space is needed, pro		•	ato oogrogatoa faria or a
	(a) Name	• •	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990) 2023

ichedule C (Form 990) 2023 Catholics for Choice 52-1154418 Page 2								
Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under								
section 501(h)).								
		- · ·	Part IV each affiliated	group member's nam	e, address, EIN,			
	expenses, and share of excess lobbying expenditures).							
B Check if the filing organiza	tion checked box A an	id "limited control" pro	ovisions apply.	() ===	(I) A (CIII) I			
Limi	ts on Lobbying Exper	nditures		(a) Filing organization's	(b) Affiliated group totals			
(The term "expend	ditures" means amou	nts paid or incurred.)		totals	totalo			
1a Total lobbying expenditures to infl	1a Total lobbying expenditures to influence public opinion (grassroots lobbying)							
b Total lobbying expenditures to infl				2,985. 98,675.				
c Total lobbying expenditures (add I				101,660.				
d Other exempt purpose expenditur				3,112,339.				
e Total exempt purpose expenditure				3,213,999.				
f Lobbying nontaxable amount. Ent	er the amount from the	following table in bot	h columns.	310,700.				
If the amount on line 1e, column (a) o	or (b) is: The lobi	oying nontaxable am	ount is:					
not over \$500,000,	20% of t	the amount on line 1e.						
over \$500,000 but not over \$1,000	0,000, \$100,00	0 plus 15% of the exc	ess over \$500,000.					
over \$1,000,000 but not over \$1,500,000, \$175,000 plus 10% of the excess over \$1,								
over \$1,500,000 but not over \$17,000,000, \$225,000 plus 5% of the excess over \$1,500,000.								
over \$17,000,000,	\$1,000,0	000.		77 675				
g Grassroots nontaxable amount (er	,			77,675. 0.				
h Subtract line 1g from line 1a. If zer				0.				
i Subtract line 1f from line 1c. If zeroj If there is an amount other than zero			•	0.				
reporting section 4911 tax for this		,	ation lile Form 4720	Г	Yes No			
reporting section 4911 tax for this		raging Period Under		L	1e5 140			
(Some organizations t			` '	of the five columns b	elow.			
	See the separa	nte instructions for li	nes 2a through 2f.)					
	Lobbying Expen	ditures During 4-Yea	ar Averaging Period					
Calendar year								
(or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total			
	201 106	212 750	204 021	210 700	1 222 076			
2a Lobbying nontaxable amount	294,486.	313,759.	304,031.	310,700.	1,222,976.			
b Lobbying ceiling amount (150% of line 2a, column(e))					1,834,464.			
(130% of lifte 2a, coldifitie))					1,031,404.			
c Total lobbying expenditures	192,879.	64,775.	219,731.	101,660.	579,045.			
Total lobbying expenditures			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		2.3,0230			
d Grassroots nontaxable amount	73,622.	78,440.	76,008.	77,675.	305,745.			
e Grassroots ceiling amount								
(150% of line 2d, column (e))					458,618.			
f Grassroots lobbying expenditures	41,119.	24,783.	43,788.	2,985.	112,675.			

Schedule C (Form 990) 2023

Schedule C (Form 990) 2023 Catholics for Choice 52-115441 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)).

of the lobbying activity. Yes No Amount 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: 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)?
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: 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)?
or referendum, through the use of: 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)?
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 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)?
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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)?
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)?
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)?
 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)?
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)?
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
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section
501(c)(6).
Yes No
1 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?
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."
1 Dues, assessments and similar amounts from members1
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political
expenses for which the section 527(f) tax was paid).
a Current year 2a
b Carryover from last year
c Total 2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political
expenditures next year?
5 Taxable amount of lobbying and political expenditures. See instructions 5
Part IV Supplemental Information
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see
instructions); and Part II-B, line 1. Also, complete this part for any additional information.

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

Catholics for Choice

Employer identification number 52-1154418

Pai	t I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lir		Similar Funds o	r Accounts. Complete if the
	organization anowored 100 or 1000, 1 are 10, iii	(a) Donor advise	d funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in		eld in donor advised	funds
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for ar	ny other purpose cor	nferring
	impermissible private benefit?			Yes No
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes	s" on Form 990, Par	t IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	_	
	Preservation of land for public use (for example, recrea	ation or education)	Preservation of a h	istorically important land area
	Protection of natural habitat		Preservation of a c	ertified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contrib	ution in the form of a	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2 a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic str	ructure included on line 2	a	2c
d	Number of conservation easements included on line 2c acqu			
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or	terminated by the or	ganization during the tax
	year			
4	Number of states where property subject to conservation ea			
5	Does the organization have a written policy regarding the pe		tion, handling of	
	violations, and enforcement of the conservation easements			
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations, ar	nd enforcing conserv	vation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and en	forcing conservation	a easements during the year
•	Amount of expenses mounted in monitoring, inspecting, name	aling of violations, and ch	norcing conservation	reasoments during the year
8	Does each conservation easement reported on line 2d above	e satisfy the requirements	s of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservat			
	balance sheet, and include, if applicable, the text of the foot	note to the organization's	financial statement	s that describes the
	organization's accounting for conservation easements.			
Pai	t III Organizations Maintaining Collections of	of Art, Historical Tre	easures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its rev	enue statement and	balance sheet works
	of art, historical treasures, or other similar assets held for pu	blic exhibition, education	, or research in furth	erance of public
	service, provide in Part XIII the text of the footnote to its fina	ncial statements that des	scribes these items.	
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue	e statement and bala	ance sheet works of
	art, historical treasures, or other similar assets held for public	c exhibition, education, o	r research in furthera	ance of public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	If the organization received or held works of art, historical tre	easures, or other similar a	ssets for financial ga	ain, provide
	the following amounts required to be reported under FASB $\!$			
а	Revenue included on Form 990, Part VIII, line 1			\$
b	Assets included in Form 990, Part X			\$

Pai	rt III Organizations Maintaining Co	ollections of A	rt, Hist	orical Tr	easures, c	or Other	Similar Ass	e ts (continued)
3	Using the organization's acquisition, accession	n, and other record	ds, check	any of the	following that	t make sigr	nificant use of it	S
	collection items (check all that apply).							
а	Public exhibition	d	ıЩı	oan or exc	hange progra	ım		
b	Scholarly research	е	(Other				
С	Preservation for future generations							
4	Provide a description of the organization's col	lections and explai	n how th	ey further t	he organization	on's exemp	t purpose in Pa	rt XIII.
5	During the year, did the organization solicit or	receive donations	of art, his	storical trea	sures, or othe	er similar as	ssets	
	to be sold to raise funds rather than to be ma							Yes No
Pai	t IV Escrow and Custodial Arrang		te if the o	organizatior	n answered "\	res" on Fo	m 990, Part IV,	line 9, or
	reported an amount on Form 990, Part	· ·						
1a	Is the organization an agent, trustee, custodia	•	•					
	on Form 990, Part X?						L	∐ Yes No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the fo	llowing t	able:				
								Amount
	Beginning balance						1c	
	Additions during the year						1d	
	Distributions during the year						1e	
	Ending balance						1f	
	Did the organization include an amount on Fo		•			•	?∟	∐ Yes No
	If "Yes," explain the arrangement in Part XIII. (TY Endowment Funds Complete if t							L
Fai	T V Endowment Funds Complete if t			rior year	(c) Two year		Three years back	(e) Four years back
	<u></u>	(a) Current year	(D) P	nor year	(C) Two year	s back (u)	Tillee years back	(e) i our years back
	Beginning of year balance							
	Contributions							
	Net investment earnings, gains, and losses							
	Grants or scholarships				-			
е	Other expenditures for facilities							
	and programs							
	Administrative expenses							
g	End of year balance		- /!		-\\ -			
2	Provide the estimated percentage of the curre	•		g, column (a	a)) neid as:			
_	Board designated or quasi-endowment	%	_%					
b	Permanent endowment Term endowment 9/							
C		=						
20	The percentages on lines 2a, 2b, and 2c should have there endowment funds not in the possess	· ·	ation tha	t are hold a	and administs	rad for tha		
Ja	organization by:	ssion of the organiza	ation tha	it are rielu a	ina administe	ieu ioi tile		Yes No
	(i) Unrelated organizations?							3a(i)
								"
h	If "Yes" on line 3a(ii), are the related organizat							
4	Describe in Part XIII the intended uses of the							[55]
Pai	t VI Land, Buildings, and Equipme		, WITHOUTE I	ariao.				
	Complete if the organization answered		0, Part IV	', line 11a. S	See Form 990	, Part X, lin	e 10.	
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Accı	ımulated	(d) Book value
	2 ccompliant or property	basis (investr			(other)		ciation	(4) 2001. (4.4)
	Land	-	- 1		•			
	Buildings							
	Leasehold improvements			40	5,760.	39	6,183.	9,577.
	Equipment				1,644.		2,413.	19,231.
	Other				3,532.		2,208.	21,324.
	I. Add lines 1a through 1e. (Column (d) must eq		X, line 1					50,132.

Schedule D (Form 990) 2023

D : \/!!		~ ::	A :::
Dart VIII	Invactmente -	()thar	SACHIFITIAC
rait viii	Investments -	Ouiei	Jeculilles

Complete if the organization answered "Yes"	on Form 990. Part IV. line	11b. See Form 990. Part X. line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		

Part IX Other Assets

Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))

(9)

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

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

Part X Other Liabilities

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	Lease liabilities - operating	
(3)	lease	152,046.
(4)	Lease liabilities - finance lease	10,550.
(5)	Deferred compensation plan	
(6)	liabilities	114,656.
(7)		
(8)		
(9)		
Total.	277,252.	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2023

332054 09-28-23 Schedule D (Form 990) 2023

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Attach to Form 990.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection

Employer identification number

Catholics for Choice 52-1154418 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? _____X Yes _____No 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (b) Number of (f) Total (a) Region (c) Number of (d) Activities conducted in the region émployees, expenditures offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region Europe (Including Educational Training & Iceland & Greenland) 0 Program Services Advocacy Program 6,169. Educational Training & South America 0 Advocacy Program 7,803. Program Services Educational Training & 0 Program Services Advocacy Program Sub-Saharan Africa 25,764. Europe (Including Grants to Recipients Iceland & Greenland) Located in Region 8,000. 3 a Subtotal 0 47,736. **b** Total from continuation sheets to Part I c Totals (add lines 3a

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

Schedule F (Form 990) 2023

47,736.

and 3b)

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland &	Support Spirit Unbounded's efforts organizing the Conference Human	8,000.		0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

______(

52-1154418

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

Schedule F (Form 990) 2023

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
Part I, Line 2:
Grantees are required to submit progress reports that document their
activities under the grants provided.
Part I, line 3:
The organization uses GAAP for foreign expenditures.
Part II, Column (d):
Region: Europe (Including Iceland & Greenland)
(d) Purpose of Grant: Support Spirit Unbounded's efforts organizing the
Conference Human Rights in the Catholic Church.

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

Catholics for Choice

Employer identification number 52-1154418

Questions Regarding Compensation Part I Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence 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 reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain _____ 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 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. X Compensation committee Compensation survey or study Independent compensation consultant X Form 990 of other organizations X Approval by the board or compensation committee 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: X a Receive a severance payment or change-of-control payment? X b Participate in or receive payment from a supplemental nonqualified retirement plan? 4b X c Participate in or receive payment from an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 For persons listed on Form 990. Part VII. Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: Х a The organization? 5a $\overline{\mathbf{x}}$ **b** Any related organization? If "Yes" on line 5a or 5b, describe in Part III. 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: Х a The organization? X **b** Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III Х If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2023

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

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

52-1154418

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		compensation ince	(ii) Bonus & incentive compensation	reportable	compensation			reported as deferred on prior Form 990
(1) Jamie Manson	(i)	282,273.	0.	0.	19,867.	10,830.		0.
President	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) Margaret-Ann Cabaniss	(i)	153,052.	0.	0.	5,782.	7,995.		0.
Dir. of Development	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2023

SCHEDULE 0 (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 Open to Public

Inspection

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

Name of the organization

Catholics for Choice

Employer identification number 52-1154418

Form 990, Part III, Line 1, Description of Organization Mission: Our faith calls us to affirm reproductive and religious freedom as essential to Catholic social justice.

Form 990, Part VI, Section A, line 8b:

There are no committees that have authority to act on behalf of the board.

Form 990, Part VI, Section B, line 11b:

The 990 was prepared by the outside accountants. It was reviewed by management and the Board before it was filed.

Form 990, Part VI, Section B, Line 12c:

Conflict of interest policies are provided to new staff and board members when they join the organization and are redistributed to all staff and board members annually. Potential or actual conflicts are refereed to a director, who in consultation with the president, determines whether an actual conflict exists and recommends action which safeguards the integrity of the organization and the involved parties.

Form 990, Part VI, Section B, Line 15a:

The board of directors formed a committee comprising the executive committee and one additional board member to evaluate the CEO's performance and recommend compensation. The committee submitted its recommendation to the full board, which sets the CEO's compensation. The deliberation took place during executive session of a regular board of directors meeting and

it was contemporaneously documented. This process began in November 2022 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2023

Name of the organization Catholics for Choice	Employer identification number 52-1154418
and was completed with board approval at the December 202	22 meeting.
Form 990, Part VI, Line 17, List of States receiving copy	of Form 990:
AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, MA, ME, MN, MS, NC, ND,	NH, NJ, NM, NV, NY, OH
OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV, MI	
Form 990, Part VI, Section C, Line 19:	
Requests for copies of the organization's governing docum	ments, conflict of
interest policy and financial statements are reviewed by	management.
Financial statements are regularly made available to curr	cent and
prospective donors.	
Form 990, Part IX, Line 11g, Other Fees:	
Other professional services:	
Program service expenses	268,315.
Management and general expenses	30,622.
Fundraising expenses	31,620.
Total expenses	330,557.
Total Other Fees on Form 990, Part IX, line 11g, Col A	330,557.