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Form	330

Department of the Treasury Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2022 Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.

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



AF	or th	e 2021 calendar year, or tax year beginning and	ending		
B C a	heck if pp l icab	e: C Name of organization		D Employer identific	ation number
	Addre	ALLIANCE FOR JUSTICE			
	Name chang			52-10099	73
	nitial return	Number and street (or P.0. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final Feturn	11 DUPONT CIRCLE, NW SUITE 500		202-822-6	
	termir ated			G Gross receipts \$	8,951,680.
	Amen return	WASHINGTON, DC 20050-1200		H(a) Is this a group re	
	Applic tion pendi	F Name and address of principal officer: KAKIM BROOKS		for subordinates	
		SAME AS C ABOVE		H(b) Are all subordinates in	
		empt status: $X = 501(c)(3) = 501(c) () $ (insert no.) 4947(a)(1)	or 527	1 '	list. See instructions
		te: ▶ WWW • AFJ • ORG f organization: X Corporation Trust Association Other ►	L Veer	H(c) Group exemption	number ▶ I State of legal domicile: DC
	irt I	Summary	L Year		State of legal domicile. DC
	1	Briefly describe the organization's mission or most significant activities: ALLI	ANCE F	OR JUSTICE W	ORKS TO
ce	'	ENSURE THAT THE FEDERAL JUDICIARY ADVANCE			
Activities & Governance	2	Check this box			
ver	3			3	17
ß	4	Number of independent voting members of the governing body (Part VI, line 1b)			16
s	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)			44
/itie		Total number of volunteers (estimate if necessary)			0
ctiv		Total unrelated business revenue from Part VIII, column (C), line 12			0.
A	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h)		4,587,236.	5,952,125.
Revenue	9	Program service revenue (Part VIII, line 2g)		223,502.	462,805.
Sev	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		250,405.	560,265.
-	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		81,418.	11,989.
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		5,142,561.	6,987,184.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		202,853.	380,368.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.3,614,465.	0. 3,479,495.
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	······	<u>3,014,403</u> . 0.	<u> </u>
ens	16a	Professional fundraising fees (Part IX, column (A), line 11e)	55	0.	0.
Expenses				1,660,520.	1,881,116.
_	17 18	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,477,838.	5,740,979.
	10	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		-335,277.	1,246,205.
r SS		Revenue less expenses. Subtract line 18 from line 12		ginning of Current Year	End of Year
ets c	20	Total assets (Part X, line 16)		13,824,890.	16,204,744.
Ass	21	Total liabilities (Part X, line 26)	·····	1,933,277.	2,477,722.
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 20		11,891,613.	13,727,022.
لننف	rt 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.

Sign Here	Signature of officer RAKIM BROOKS, PRESIDENT	Date
	Type or print name and title	
Paid	Print/Type preparer's name KRISTIN A. JACQUELIN, CPA	Date Check PTIN 11/13/22 self-employed P01325865
Preparer	Firm's name CALIBRE CPA GROUP, PLLC	Firm's EIN 🕨 47–0900880
Use Only	Firm's address 7501 WISCONSIN AVENUE, SUITE 1200 W BETHESDA, MD 20814	VEST Phone no.202-331-9880
May the If	RS discuss this return with the preparer shown above? See instructions	X Yes No
132001 12-0	9-21 LHA For Paperwork Reduction Act Notice, see the separate instructions.	Form 990 (2021)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

_	1990 (2021) ALLIANCE FOR JUSTICE	52-1009973 Page
Pa	rt III Statement of Program Service Accomplishments	-
	Check if Schedule O contains a response or note to any line in this Part III	<u>X</u>
1	Briefly describe the organization's mission:	
	ALLIANCE FOR JUSTICE ENSURES A FAIR FEDERAL JUDICIARY T	
	CORE CONSTITUTIONAL VALUES AND ACCESS TO THE COURTS FOR	
	PROVIDES INDISPENSABLE RESOURCES TO FUNDERS AND NONPROF	
	THEIR ADVOCACY AND EFFECTIVENESS IN ADVANCING THEIR MIS	SIONS.
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X N
	If "Yes," describe these new services on Schedule O.	T7
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	?Yes 🔀 N
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, a	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth	ners, the total expenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 2,921,821. including grants of \$ 149,625.) (Rev	
	BOLDER ADVOCACY - BOLDER ADVOCACY (BA) PROMOTES ACTIVE	
	THE DEMOCRATIC PROCESS BY PROVIDING NONPROFITS AND FOUN	
	KNOWLEDGE AND CONFIDENCE TO ADVOCATE EFFICIENTLY AND EF	
	OVER 20 YEARS, BA HAS OFFERED A COMPREHENSIVE PROGRAM O	
	THOUGHT-LEADERSHIP, WORKSHOPS, TECHNICAL ASSISTANCE, PU	
	EDUCATIONAL EVENTS TO HELP NONPROFITS COST-EFFECTIVELY	
	501(C)(3) AND (C)(4) RULES AND BE MORE EFFECTIVE ADVOCA	TES FOR THEIR
	COMMUNITIES. THROUGH LOBBYING, REGULATORY EFFORTS, AND	CANDIDATE
	EDUCATION, BA STRENGTHENS THE ABILITY OF THOUSANDS OF N	ONPROFIT STAFF
	MEMBERS AND TRUSTEES TO ADVOCATE CONFIDENTLY.	
łb	(Code:) (Expenses \$1, 165, 276. including grants of \$23, 192.) (Rev	/enue \$
	JUSTICE SELECTION: THROUGH THE VARIOUS INITIATIVE'S UND	ER ITS JUDICIAL
	SELECTION PROGRAM (JUSTICE), AFJ WORKS TO ENSURE THAT T	HE NATION'S
	COURTS ARE STAFFED WITH HIGHLY-QUALIFIED, FAIR, AND IND	EPENDENT JUDGES
	WHO WILL SAFEGUARD THE RIGHTS OF ALL. THROUGH THE JUDI	CIAL NOMINATIONS
	PROJECT AFJ WORKS TO RESEARCH NOMINEES TO THE FEDERAL B	ENCH, PROVIDING
	DETAILED INFORMATION TO CONGRESS, THE MEDIA, AND THE PU	BLIC AND
	EDUCATES THE PUBLIC ABOUT THE IMPORTANCE AND ROLE OF TH	E FEDERAL
	COURTS. OUR BUILDING THE BENCH PROJECT PROMOTES THE ID	ENTIFICATION OF
	PROFESSIONALLY AND DEMOGRAPHICALLY DIVERSE AND HIGHLY-Q	
	INDIVIDUALS FOR FEDERAL JUDGESHIPS. AND AFJ'S ACCESS TO	
	PROTECTS AND PROMOTES THE VALUE OF A VIGOROUS CIVIL JUS	
	MONITORS AND EXPOSES THREATS TO THE RULE OF LAW THROUGH	
1c	(Code:) (Expenses \$201,330. including grants of \$7,551.) (Rev	
	COMMUNITY ENGAGEMENT PARTNERSHIPS - AFJ'S COMMUNITY ENG.	
	PARTNERSHIP PROGRAM OF OVER 120 CIVIL RIGHTS AND PUBLIC	
	ORGANIZATIONS AND LEADS STRATEGIES ELEVATING THE IMPORT.	
	COURTS THROUGH PUBLIC EDUCATION AND MOBILIZATION; ENGAG	
	NATIONAL NETWORK OF MEMBER ORGANIZATIONS, PROGRESSIVE G	
	COMMUNITIES, AND POLITICAL INFLUENCERS; AND EXPANDING T JUSTICE AND BOLDER ADVOCACY RESOURCES TO ARM PARTNERS,	
	THISTICE AND BUILDER ADVOCACY RESOLECES TO ARM PARTNERS /	
	ADVOCATES, AND DIVERSE CONSTITUENCIES WITH THE TOOLS TO	
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	ADVOCATES, AND DIVERSE CONSTITUENCIES WITH THE TOOLS TO	
	ADVOCATES, AND DIVERSE CONSTITUENCIES WITH THE TOOLS TO DEMOCRACY THAT PROTECTS OUR CONSTITUTIONAL RIGHTS.	
4d	ADVOCATES, AND DIVERSE CONSTITUENCIES WITH THE TOOLS TO DEMOCRACY THAT PROTECTS OUR CONSTITUTIONAL RIGHTS.	
	ADVOCATES, AND DIVERSE CONSTITUENCIES WITH THE TOOLS TO DEMOCRACY THAT PROTECTS OUR CONSTITUTIONAL RIGHTS. Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$	
1d 1e	ADVOCATES, AND DIVERSE CONSTITUENCIES WITH THE TOOLS TO DEMOCRACY THAT PROTECTS OUR CONSTITUTIONAL RIGHTS.	ADVOCATE FOR A
le	ADVOCATES, AND DIVERSE CONSTITUENCIES WITH THE TOOLS TO DEMOCRACY THAT PROTECTS OUR CONSTITUTIONAL RIGHTS. Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ 4,288,427.	ADVOCATE FOR A) Form 990 (202
le	ADVOCATES, AND DIVERSE CONSTITUENCIES WITH THE TOOLS TO DEMOCRACY THAT PROTECTS OUR CONSTITUTIONAL RIGHTS. Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$	ADVOCATE FOR A) Form 990 (202

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 Form 990 (2021)
 ALLIANCE
 FOR
 JUSTICE

 Part IV
 Checklist of Required Schedules
 Checklist
 Checklist

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		x	
0	If "Yes," complete Schedule A	1 2	X	
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	<u> </u>		
0	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	ЬЩ		
-	during the tax year? If "Yes," complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
•	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
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		X
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	X	
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		X
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)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes, " complete		v	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
10	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)? <i>If "Yes," complete Schedule E</i>	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
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	1/1		х
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		**
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		
.0	1c and 8a? If "Yes," complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	<u> </u>		
	complete Schedule G, Part III	19		х
20a		20a		X
	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? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21	х	
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 ALLIANCE FOR JUSTICE

 Part IV
 Checklist of Required Schedules (continued)

22 bit the organization report more than 55,000 of grants or other assistance to or for dometic individuals on Part K (other N), kines? (****,***: complete Schedule I, Parts and M) 22 X 23 bit the organization answer 'Yes' to Part VI. Soction A, Into 3, 4, or 5, about compensation of the organization's current and former offices, directors, trustees, key employees, and highest compensated employee? (*****; complete Schedule V, Parts and VI. Soction A. Into 3, 4, or 5, about compensation of the organization's current and former offices, directors, trustees, key employees, and highest compensated employee? (****; complete Schedule V, Parts and VI. Soction A. Into 3, 4, or 5, about complete Schedule J, Parts and VI. Soction A. Into 3, 4, or 5, about complete Schedule J, Parts and VI. Soction A. Into 3, 4, or 5, about complete Schedule J, Parts and VI. Soction A. Into 3, 4, or 5, about complete Schedule J, Parts and VI. Soction A. Into 3, 4, or 5, about complete Schedule J, Parts and VI. Soction A. Into 3, 4, or 5, about complete Schedule J, Parts and VI. Soction A. Into 3, 4, or 5, about complete Schedule J, Parts and VI. Soction A. Into 3, 4, or 5, about complete Schedule J, Parts and VI. Soction A. Into 3, 4, or 5, about complete Schedule J, Parts and VI. Soction A. Into 3, 4, or 5, about complete Schedule J, Parts and Y. Into 4, about A. Into 3, 4, or 5, about complete Schedule J, Parts and Y. Into 4, about A. Into 3, 4, or 5, about complete Schedule J, Parts and Y. Into 4, about A. Into 3, 4, or 5, about complete Schedule J, Parts and Y. Into 4, about A. Into 3, 4, or 5, about complete Schedule J, Parts and Y. Into 4, and A. Into 3, 4, or 7, and 4, and 5, and 5				Yes	No
23 Did the organization arswer "Yes" to Part VL. Section A, Ine 3, 4, or 5, about compensation of the organization's current and former officer, directors, trustees, key employees, and highest compensated employees? // 'Yes,' complete Schedule J. 23 X 24a Did the organization have a tax-seempt bond issue with an outstanding principal anount of more than \$100,000 as of the last dup of the year. Inst was issued after Ducember 31, 2002? / 'Yes,' ranswer lines 2b through 2bd and complete Schedule K. If Yes,' to print Poset 24a X 25 Did the organization maritaria an escrew account other than a refunding discover at any time during the year? 24d X 26 Bects on GN(68), 501(64), and 601(62) or gonzitation. Sub fire cognization or gonzitation and the transport in the adaption or segmization by a reference to any other cognization. Sub fire cognization and the transport in the adaption or segmization by or 90-E2? // 'Yes,' complete Schedule L, Part I 28a X 26 Did the organization aver that if a rengoed in an excess buendit transaction has no thes reported on any of the organization by or 90-E2? // 'Yes,' complete Schedule L, Part I 28b X 27 Did the organization approximation approximatin contributer or of 35% controlled anthy or family memb	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officient, direction, trustees, key amployees, and highest compensated amployees? # 'Yes, ' complete 24a Did the organization have a tax exampt bond issue with an oxidiancing principal amount of more time \$100,000 as of the site day of the year, that was issued after December 31, 2002? If 'Yes, ' answer lines 24b through 24d and complete 24a 24b Did the organization invest amy processes to face-scengt bonds beyond a temporary period exception? 24b 25a Schedule K. I' No, ' go to line 25a 24b 25a Schedule K. I' No, ' go to line 25a 24b 25a Schedule K. I' No, ' go to line 25a 24b 25a Schedule K. I' No, ' go to line 25a 24b 25a Schedule K. I' No, ' go to line 25a 24c 25a Schedule K. I' No, ' go to line 25a 24c 25a Schedule K. I' No, ' go to line 25a 24c 25a Schedule K. I' No, ' go to line 25a 24c 25a Schedule K. I' No, ' go to line 25a 24c 25a Schedule K. I' No, ' go to line 25a 24c 25a X. 25a X. 25a Schedule K. I' No, ' go to line 25a 25a 25a X. 25a X. 2			22		X
Sobelule J 22 X 4a Did the organization have a tace-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the Schedule K, M Yos," or to line 25a. 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization invest any proceeds of tax-exempt bonds outstanding at any time dung the year: to defease any tax-exempt bonds? 24d 25 Section 50(4)(3), 501(40)(4), and 501(42)(30 organizations. Did the organization ange in an excess benefit transaction with a disqualified person during the year? (1 Yes," complete Schedule L, Part I 25a 25 Did the organization avand that it engaged nam avecass bonefit transaction with a disqualified person during the year? (1 Yes," complete Schedule L, Part I 25a 27 Did the organization provide a grant or there assistance to any ourrent or former office, director, trustes, key approver, enator or former office, director, trustes, key approver, centar or former office, director, trustes, key approver, centary or the assets, or qualified cons	23				
24a Did the organization have a tax-esempt bond issue with an outstanding principal amount of more than \$100,000 are of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K, If 'No,' 'po to line 25e. 24a X D Did the organization invest any proceeds of tax-exampt bonds beyond a temporary period exception? 24a X D Did the organization invest any proceeds of tax-exampt bonds. 24a X 25a Section \$01(c)(3), 601(c)(4), and \$01(c)(2) organizations. Did the organization angap in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction may amount on Part X. Line 5 or 22, for receivables from or paybles to any current or former offloer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of nonity methor of any of these persons? // 'Yes,' complets Schedule L, Part I 26a X 27 Did the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part I). 26a X 28 Was the organization aparty to a business transaction with one of the lowing parties (see the Schedule L, Part I). 26a X 29 Did the organization aparty to a business transaction with one of the lowing parties (see the Schedule L, Part I). 26a X 28 Was the organization prower the ansets.000 in non-cash controfhuoring rives, 'complete S		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
Is at day of the year, that was issued after December 31, 2002? If "Yes," answer times 24b through 24d and complete Schedule K. If Yes," go to line 25a. 24a X b Did the erganization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 24b c Did the erganization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24c 24c d Did the erganization maintain an escrow account other than a refurning the year? 24d 24c d Did the organization and a dist of year period exception? 24d 24d d Did the organization and a dist of year period exception? 24d 24d d Did the organization and a dist of year period exception? 24d 24d d Did the organization organization. Sub the regarkingtion regain an excess benefit transaction than and use patients with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization spitor Forms 900 or 990-E27. If Yes, ' complete Schedule L, Part I 25b X d Did the organization provide a grant or their assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 335% 27b X d Numert of forms member of any of these person? If Yes, ' complete Schedule L, Part II 28b X d Did the organization provide a grant or their assistance to any current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If Yes, ' complete Schedule L, Part IV 28b </td <td></td> <td></td> <td>23</td> <td>X</td> <td><u> </u></td>			23	X	<u> </u>
Schedule K, M Yoh, 'go to fine 25a 24a X b Did the organization meantain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24a 24a c Did the organization meantain an escrow account other than a refunding escrow at any time during the year? 24a 24a 25a Section 501(c)(3), 601(c)(4), and 501(c)(20) organizations. Did the organization angape in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has no the person during the year? 25a X b is the organization across any other organizations prior Forms 900 cr 900 E27. # 'Yea,' complete Schedule L, Part I 25b X b Did the organization report any amount on Part X, the 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 and thy or family member of any of the segmination committee member, or to 35% controlled at prior to any dive thereof, a rain takes priors? 26 X 27 Did the organization report and or the seasabance to any current or former officer, director, trustee, key employee, constort or former officer, director, trustee, key employee, creator or founder, substantial contributor or angloyee thereof or family member of any of the segmination committee member, or to 3 35% controlled at the organization neove more than 250.00 in non-cash contributions? 27 X 28 X 29 X 29 X <td>24a</td> <td></td> <td></td> <td></td> <td></td>	24a				
b Define organization mest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization minimalin an escrow account other than a refunding escrow at any time during the year to deficate any tax-exempt bonds? 24c d Did the organization and at an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 28 Section 50(16)8, 05(16)4, 04(16)4, 040 50(16)20 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 28 Did the organization avere that engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a 29 Did the organization avere that engage in an excess benefit transaction with one of any of the organization or physics. Creator or founder, substantial contributor, or 35% 26d 20 Did the organization aver than or other assistance to any ourrent or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 26d 27 Did the organization aver than any individual described in line 28a' If 'Yes,' complete Schedule L, Part II 26d 28 Was the organization aver than one or more individual and/or organization described in line 28a' If 'Yes,' complete Schedule L, Part II 26d 20 Did the organization neeve thane 250:00 in non-ceach contributions? If 'Yes					37
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? 24d d Did the organization acta as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 601(c)(4), and 501(c)(20) organizations, Did the organization engage in an excess benefit transaction with a disqualified person during the year? 24d 25a Main transaction with a disqualified person during the year? 17e (Section 2005) 24d 25a Bethe organization avaise that it engaged in an excess benefit transaction with a disqualified person in a pior year, and that the transaction with a disqualified person during the year? 17e (Section 2005) 25b X 25b Did the organization provide any of the organization's pior Forms 900 or 990-E2? 17 (*ge. * complete Schedule L, Part II 25b X 25b Did the organization provide agrant or other assistance to any current or form officer, director, trustee, key employee, creator or founder, a grant solden assistance to any current or form officer, director, trustee, key employee, creator or founder, a grant solden assistance to any complete Schedule L, Part II 26b X 26b A samp membor of any individual described on inno 24a? If "'ese, " complete Schedule L, Part II 28b X 26b A samp membor of any individual described or rabot or founder, substantial contributo		-			
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d Did the organization act as an 'on behalf of 'issuer for bonds outstanding at any time during the year? 24d 25a Section 50(6)(8), 50(16)(4), and 50(16)(20) organizations. Dub the organization errogapia in an excess benefit transaction with a disqualified person during the year? // 'Yes,' complete Schedule L, Part I 25a 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 900 of 590-57. 27b 27 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%. 260 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, usubstantial contributor or amployee thereol, a grant selection committee member, or to a 55% controlled entity (including an employee thereol) or family member of any of these persons? // Yes,' complete Schedule L, Part IV. 260 X 28 Was the organization reporties thereol or family member of any of these persons? // Yes,' complete Schedule L, Part IV. 28a X 29 Did the organization dividual described in line 28a? If Yes,' complete Schedule L, Part IV. 28a X 29 Did the organization receive more than 325.000 in non-cash contributions? If Yes,' complete Schedule L, Part IV. 28a X 20 Did the organization nevel contribuiti	с		04-		
25a Section 501(e)(3), 501(e)(4), and 501(e)(20) or ganizations. Did the organization engage in an excess benefit transaction with a disgualified person in a prior year, and that the transaction has not been reported on any of the organization for 500 5900-527. If 'Ves,' complete Schedule L, Part I 25a X 26b Schedule L, Part I 25b X 27c Did the organization report any amount on Part X, line 5 or 22, for recolvables from or psyables to any current or former officer, director, trustes, key employee, creator or founder, substantial contributor, or 55% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II 26 X 27 Did the organization apport any amount on Part X, line 5 or 22, for recolvables from or psyables to any current or former officer, director, trustes, key employee, creator or founder, substantial contributor on a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part IV. 27 X 28 Was the organization a part to a buinses transaction with one of the following parties (see the Schedule L, Part IV. 28 X 29 Did the organization and part part in the 28a? If 'Yes,' complete Schedule L, Part IV. 28 X 29 Did the organization neceive organization seques conthy similar asset, or qualified conservation orthibutions? If 'Yes,' complete Schedule L, Part IV. 28 X 29 Did the organization necule was of the insolve an	d				<u> </u>
transaction with a disqualified parson during the year? # 'Yes,' complete Schedule L, Part ! 25a X b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 // */es, * complete Schedule L, Part I 25b X controlled entity or family member of any of these persons? // */es, * complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 55% controlled entity (including an employee thereof) or family member of any of these persons? // */es, * complete Schedule L, Part II 26 X 28 Was the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? /// * 27 X 28 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? /// * 28b X 29 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // * 28b X 29 D A timely member of any individual described in line 28a // */es, * complete Schedule L, Part I/ 28b X 29 D d the organization receive onthiloxitions of art, historical t			<u>24u</u>		
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 or 990-E2? If "yes," complete Schedule L, Part I 26b X d0 Did the organization report any amount on Part X, line 5 or 22, for recolvables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial continutor, or 95% controlled entity or family member of any of these persons? If "yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial continutor or employee thereof, or family member of any of these persons? If "yes," complete Schedule L, Part II 28 X 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV. 28 X 29 Did the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV. 286 X 29 Did the organization neceive contributions of art, historical treasures, or other similar asset, or qualified conservation contributions? If "yes," complete Schedule L, Part IV 286 X 20 Did the organization neceive contributions of art, historical treasures, or other similar asset, or qualified conservation contributions? If "yes," complete Schedule I, Part I 30 X <tr< td=""><td>20a</td><td></td><td>252</td><td></td><td>x</td></tr<>	2 0a		252		x
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? /f 'Yes, 'complete Z 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 of nating member of any of these persons? /f 'Yes, 'complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereof) of ramity member of any indived member, or a organization of regulations for applicable beding thresholds, conditions, and any of these persons? /f 'Yes, 'complete Schedule L, Part IV. 28 X 28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV. 28a X 29 D A family member of any individual described in line 28a' /f 'Yes,' complete Schedule L, Part IV. 28a X 29 D d the organization receive more than 255.000 In non-cash contributions? /f 'Yes,' complete Schedule N, Part I 30 X 30 D d the organization receive more than 255.000 In non-cash contributions? /f 'Yes,' complete Schedule N, Part I 31 X 31 D d the organization receive on thore than 255.000 In non-cash contributions? /f 'Yes,' complete Schedule N, Part I 31 <td>h</td> <td></td> <td>254</td> <td></td> <td></td>	h		254		
Schedule L, Part I 25b X 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or forme officer, director, truste, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II 26 X 27 Did the organization provide a grant or there 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 or applicable fling thresholds, conditions, and exceptions): 27 X 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part II). 28a X 29 Was the organization a perty to a business transaction with one of the following parties (see the Schedule L, Part IV). 28a X 29 A transity member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV. 28b X 29 Did the organization receive contributions of at, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule N. Part II. 29 X 20 Did the organization receive contributions or ath, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule N. Part I. 31 X 31 Did the organization receive contributions or ath, historical treasures, or othere schedule	D				
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 Yrsg, "complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or applice Schedule L, Part II 26 X 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): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If Y X 28 Was the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule L, Part IV 28a X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule L, Part IV 28a X 20 Did the organization founder, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part I 30 X 31 Did the organization substantial terminitor or dissolve and ccase operations? I'Yes,' complete Schedule N, Part I 31 X 32 Did			25h		x
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? II "Yes," complete Schedule L, Part II. 27 X 28 Was the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? II "Yes," complete Schedule L, Part IV. 28 X 29 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? II "Yes," complete Schedule L, Part IV. 28 X 29 Did the organization receive more than \$25,000 in non-cash contributions? II "Yes," complete Schedule M 29 X 20 Did the organization receive contributions of art, historical treasures, or other similar assets? II "Yes," complete Schedule N, Part I 30 X 30 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? II "Yes," complete Schedule N, Part I 31 X 31 Did the organization neal-texted to any tax-exempt or thaxable entity? II "Yes," complete Schedule R, Part II. 31 X 32 D	26				
controlled entity or family member of any of these persons? // if 'Yes,' complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, truste, 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? // 'Yes,' complete Schedule L, Part IV 27 X 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV) 28a X 29 Mas the organization reactive control individual described in line 28a? // 'Yes,' complete Schedule L, Part IV 28a X 29 D A family member of any individual described in line 28a? // 'Yes,' complete Schedule L, Part IV 28a X 29 Did the organization receive more than \$25,000 in non-cash contributions? // 'Yes,' complete Schedule M 29 X 30 Did the organization receive more than \$25,000 in non-cash contributions? // 'Yes,' complete Schedule N, Part I 30 X 31 Did the organization receive more than \$25,000 in non-cash contributions? // 'Yes,' complete Schedule N, Part I 31 X 32 Did the organization receive more than \$25,000 in non-cash contributions? // 'Yes,' complete Schedule N, Part I 30 X 33					
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 emptypelyse thereof) or fany of these persons? If 'Yes,' complete Schedule L, Part IV. 27 X 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV. 28 X 29 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,'' complete Schedule L, Part IV. 28 X 20 A family member of any individual described in line 28a? If 'Yes,'' complete Schedule L, Part IV. 28 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,'' complete Schedule M 29 X 20 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,'' complete Schedule M 20 X 31 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,'' complete Schedule N, Part I 31 X 32 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,'' complete Schedule N, Part I 31 X 33 Did the organization set, exchange, dispose d, or transfer more than 25%			26		x
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? // "Kes," complete Schedule L, Part II. Z X 2 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): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // // */es," complete Schedule L, Part IV. 28a X b A family member of any individual described in line 28a? // *Yes," complete Schedule L, Part IV. 28b X 2 Did the organization are or more individuals and/or organizations described in line 28a or 28b? // **** 29b X 2 Did the organization receive more than \$25,000 in non-cash contributions? // **es," complete Schedule M. 20 X 3 Did the organization sell, exchange, dispose of, or transfer more than 225% of is net assets? // **es," complete Schedule N, Part I 31 X 3 Did the organization nelated to any taxewompt or taxable entity? If **es," complete Schedule R, Part II. 33 X 3 Did the organization relate to any taxewompt or taxable entity? If **es," complete Schedule R, Part II. 33 X 3 Did the organization nelated to any taxewompt or taxable entity? If **es," complete Schedule R, Part II. 33 X 3 Did the organi	27				
entity (including an employee thereof) or family member of any of these persons? // 'Yes,' complete Schedule L, Part III. 27 X 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV. 28 X 29 X a current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // 28 X 20 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // 28a X 20 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // 28a X 20 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // 28a X 20 A complete Schedule L, Part IV 28a X 20 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // 'Yes,' complete Schedule M 30a X 31 Did the organization receive contributions of an entity disregarded as separate from the assets? // 'Yes,' complete Schedule N, Part I 33 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.77013? 14*se,' complete Schedule R, Part I					
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): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? /// A family member of any individual described in line 28a? // *Yes," complete Schedule L, Part IV A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? // Part V Part V Statements Regarding Other IRS Filings and Tax Complete Schedule R, Part V, line 2 X 30 Did the organization receive 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? // *Yes," complete Schedule N, Part I 31 X 33 X 34 Was the organization receive any taxes the organization under Regulations sections 301.7701.3? // 1* *yes," complete Schedule R, Part I 33 X 34 X 35 Bid the organization receive any taxes throm the angulations sections 512(b)(13)? // *yes," complete Schedule R, Part I, III, or IV, and Part V, line 1 35 35 Section 501c(A) organizations. Did the organization make any transaction with a controlled entity within t			27		x
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 28a X b A family member of any individual described in line 28a? <i>If</i> "yes," complete Schedule <i>L</i> , Part <i>IV</i> 28b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i> 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "yes," complete Schedule <i>M</i> 29 X 20 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "yes," complete Schedule <i>N</i> , Part <i>I</i> 30 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "yes," complete Schedule <i>N</i> , Part <i>I</i> 31 X 32 X 33 X 33 X 33 Did the organization related to any tax-exempt or transfer more than 25% of its net assets? <i>If</i> "yes," complete Schedule <i>N</i> , Part <i>I</i> 33 X 34 Was the organization nearce any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 35a X 35a Did the organization are eave any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If</i> "Yes," complete Schedule <i>R</i> , Part <i>V</i> , li	28				
"Yes," complete Schedule L, Part IV 28a X b A family member of any individual described in line 28a? // "Yes," complete Schedule L, Part IV 28b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? // "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // "Yes," complete Schedule M 29 X 30 Did the organization liquidate, terminate, or dissolve and cease operations? // "Yes," complete Schedule N, Part I 30 X 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? // "Yes," complete Schedule R, Part I 31 X 34 Was the organization netated to any tax-exempt or taxable entity? // "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1 35a X 35 Did the organization axis as a partnership for federal income tax purposes? // "Yes," complete Schedule R, Part V, line 2 36 X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? // "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization condu		instructions for applicable filing thresholds, conditions, and exceptions):			
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 30 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization nealed to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Ine 1 35a Did the organization nealed to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Ine 1 35a 35a Did the organization neale a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Ine 2 35b So 35a <td>а</td> <td>A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If</td> <td></td> <td></td> <td></td>	а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
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"Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 32 X 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 X 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 36a X 35a Did the organization conduct more than 5% of its activities through an entity that is not a related organization? 37 X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization complete Schedule Q If "Yes," complete Schedule R, Part V, line 2 36 X 36 Section 501(c)(3) orga	b		28b		Х
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 30 X 31 Did the organization iquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 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 neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, line 2 35a X 36 Section 501(c)(3) organization neceive 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 36a X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanati	с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 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 Part V, line 1 34 X 35a Did the organization nave a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Bit "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 35a X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization? If "Yes," complete Schedule Q 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 36		"Yes," complete Schedule L, Part IV	28c		X
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 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? <i>If "Yes," complete Schedule R, Part VI</i>	36				v
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(gambling) winnings to prize winners?			1		
132004 12-09-21 Form 990 (2021)	-		1c	Х	
	132004		Form	990	(2021)

5 2021.05000 ALLIANCE FOR JUSTICE 71593_1

990 (2021) ALLIANCE FOR JUSTICE	52-1009	973	Pa	ge 5
t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
		$ \square$	Yes	No
Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
		2b	_	Χ
	S			
		3a	\rightarrow	Χ
		3b	\rightarrow	
At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over, a			
	ccount)?	4a	_	Χ
				X
			\rightarrow	Χ
		<u>5c</u>	\rightarrow	
	e organization solicit			
		<u>6a</u>	\rightarrow	Χ
	ons or gifts			
		6b	_	
o i				
	vices provided to the payor?	7a	\rightarrow	Χ
		7b	\rightarrow	
		7c	_	X
		- 1		
		7e	\rightarrow	
			\rightarrow	
			\rightarrow	
		7h	_	
	by the			
		8	_	
		9a	\rightarrow	
		9b	_	
	10b			
	11a			
	11b			
	1041?	12a	_	
	12b			
			_	
		13a	_	
	13c		_	
		14a	\rightarrow	Х
		14b	\rightarrow	
excess parachute payment(s) during the year?		15		X
Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		X
If "Yes," complete Form 4720, Schedule O.				
		. I		
Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in				
		17		
	Statements Regarding Other IRS Filings and Tax Compliance (continued) Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax return. Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions Did the organization have unrelated business gross income of \$1.000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If 'No' to <i>line 3b, provide an explanation on Schedule</i> A ray time during the calendar year, did the organization have an interest in, or a signature or other a financial account in a foreign country (such as a bank account, securities account, or other financial a f"Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial a f"Yes' to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$10,000, and did the yorganization include with every solicitation an express statement that such contributions ware not tax deductible? Organization stat ware not tax deductible contributions under section 170(c). Did the organization net ac deductible contributions under section 170(c). Did the organization net ac deductible contributions under section 170(c). Did the organization sell, excharge, or otherwise dispose of tangible personal property for which it was to file form 8282? If "Yes," did the organization and y day for indirectly, to pay premiums on a personal benefit contribution prediction received a contribution of ualified intelledual property, did the organization file of the value of the value of the goods or services provide? Did the organization make was exel tide during the year? Sponoring	It attements Regarding Other IRS Filings and Tax Compliance (continued) Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, lied or the calendar year ending with or within the year covered by this return. 2a 44 If at least one is proprided in In 22, ald the organization file all required federal employment tax returns? 44 Note: If the sum of fines ta and 2a is greater than 250, you may be required to e-rige, See instructions. 0 44 If 'Yes, has if field a Form 9907 for this year? 11'/0'-16 rims 3b, provide an explanation on Schedule O. 44 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account is origin country. 11'/// 10'-16 rims 3b, provide an explanation on Schedule O. At any time during the calendar year, did the organization that it was or is a park to a prohibited tax sheller transaction? 11'/// 10' to fine 3b, provide an explanation on Schedule O. Bee instructions for filling requirements for FinCICN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization tax two was or is a park to a prohibited tax sheller transaction? If 'Yes' to line 5a c 5b, did the organization tax two or is a park to a prohibited tax sheller transaction? 11'// See to a schedule tax sheller transaction? If 'Yes', did the organization tax two or or tax deductible as charitable contributions? 11'// See to line 5a c 5b, did the organization tax two or or tax deductible?	Image: Statements Regarding Other IRS Filings and Tax Compliance (continued) Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements. 2a 44 If the tax class one seported on In 25, did the organization file all required federal employment tax returns? 2b Note: If the sum of lines 1 and 2a is greater than 250, you may be required to <i>e. dia</i> , See instructions. 2b Did the organization have unrelated business gross income of \$1,000 or more during the year? 3e At any time during the calendar year, did the organization have an interest to a signature or other authority over, a financial account? 4a If "Yes," enter the name of the foreign country Implication have an interest for finaccial account? 4a If "Yes," enter the name of the foreign country Implication tax was or is a party to a prohibited tax sheller transaction at any time during the tax year? 5e Deas the organization tax that was or is a party to a prohibited tax sheller transaction? 5e Deas the organization tax that was or is a party to a prohibited tax sheller transaction? 5e Deas the organization tax that was or is a party to a prohibited tax sheller transaction? 5e Deas the organization tax that was or is a party to a prohibited tax sheller transaction? 5e Deas the organization tax that was not tax deductible as chattable contributions 7e If "Yes," did the organizat	Iteratements Regarding Other IRS Filings and Tax Compliance (continued) Yes Entor the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, Itera can be reported on Ine 2a, dd the organization field and year ending with or within the year covered by this return 2a 444 Iteration the calendar year ending with or within the year covered by this return 2a 444 Iteration the calendar year ending with or within the year covered by this return 2a 444 Iteration the calendar year ending with or within the year covered by this return 2a 444 Iteration the calendar year ending with or within the year covered by this return 2a 444 Iteration the calendar year ending with or within the year covered an explanation or other attractions. 3a 3a Iteration the calendar year ending with or within the year covered an explanation or other attractions. 3a 3a Iteration the calendar year ending with the year covered an explanation or other attraction year. 3a 3a Iteration the calendar year ending with the year covered attraction the attraction or a sparse to a problemot ta schedure transaction? 3b 3a Iteration the attraction the attraction at any time during the tay year? 5a 5a 5a Deal year backed part year of the organization induk with ever salicitation and explase statement that such con

	tion A. Governing Body and Management				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	17		100	
ia	If there are material differences in voting rights among members of the governing body, or if the governing			1		
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
1.			16			
D	Enter the number of voting members included on line 1a, above, who are independent	1b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship					
	officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under the					
	of officers, directors, trustees, or key employees to a management company or other person?			3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was fi l ed?		4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X
6	Did the organization have members or stockholders?			6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					
	more members of the governing body?			7a		X
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, st			<u> </u>		
				7b		X
0	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the yea					
8				0-	Х	
a	The governing body?			<u>8a</u>	A X	-
b	Each committee with authority to act on behalf of the governing body?			8b		-
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	<u>venue Code.)</u>				
					Yes	N
0a	Did the organization have local chapters, branches, or affiliates?			10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such cha					
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body			11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.					
2a	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			12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? $ff "\gamma$			120		_
С		,		10-	x	
	on Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
4	Did the organization have a written document retention and destruction policy?			14		_
5	Did the process for determining compensation of the following persons include a review and approval		ent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	nent with a				
	taxable entity during the year?			16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					
	exempt status with respect to such arrangements?			16b		
ec	tion C. Disclosure			100		
7	List the states with which a copy of this Form 990 is required to be filed CA, VA, MD, NY, F	T. MA DA	MT WA			_
				م بر ا	e veilet	1.
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	10 990-1 (sect	ion 50 i (c)(3)s	only)	avallar	ble
	for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request Other (explain					
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	nflict of intere	st po l icy, and	finand	cial	
	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 boo	oks and record	ls 🕨 🔜			
	ALICIA PEYTON - 202-822-6070					
	11 DUPONT CIRCLE, NW SUITE 500, WASHINGTON, DC 200	36-1206	5			
32006	6 12-09-21			Form	990	(20)
	7					

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ALLIANCE FOR JUSTICE

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.

Form 990 (2021)

<u>Form 990 (2</u>		52-1009973	Page 7
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 Comple	te this table for all persons required to be listed. Report compensation for the calendar year endir	ng with or within the organization's	stax 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

		1								
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do			ition	l than c	ne	Reportable	Reportable	Estimated
	hours per	box	, unle	ss per	rson i	s both	n an	compensation	compensation	amount of
	week		cer an	dad	irecto	r/trust	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or di	90			ated		organization	(W-2/1099-MISC/	from the
	related	Istee	truste		e.	pens		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	lal tru	ona		ploye	ee Com		1099-NEC)		and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) NAN ARON	40.00	=	=	Ö	Ŷ	E E	<u> </u>			
PRESIDENT	5.00	x		x				204,384.	0.	10,491.
(2) DANIEL GOLDBERG	40.00									
DIRECTOR OF JUSTICE PROGRA						x		175,180.	0.	15,579.
(3) ABBY LEVINE	40.00									
DIRECTOR OF ADVOCACY PROGR						X		168,536.	0.	15,668.
(4) NONA RANDOIS	40.00									
DIRECTOR OF CA						Х		145,947.	0.	8,792.
(5) REGINAL THORNTON	40.00									
DIRECTOR OF FINANCE						Х		129,898.	0.	12,502.
(6) ALICIA PEYTON	40.00									
DIRECTOR OF ADMINISTRATION						Х		125,128.	0.	14,659.
(7) RAKIM BROOKS	40.00									
PRESIDENT		Х		Х				82,751.	0.	2,629.
(8) PAULETTE MEYER	2.00									
CHAIRMAN OF THE BOARD		Х		Х				0.	0.	0.
(9) BARBARA GONZALEZ-MCINTOSH	2.00									
TREASURER		Х		Х				0.	0.	0.
(10) NORMAN ROSENBERG	2.00									
VICE CHAIR		Х		Х				0.	0.	0.
(11) SERRA FALK-GOLDMAN	2.00									
SECRETARY		Х		Х				0.	0.	0.
(12) DEEPAK GUPTA	2.00									
BOARD MEMBER		Х						0.	0.	0.
(13) CLAY HILES	2.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(14) AKUNNA COOK	2.00	I								
BOARD MEMBER		Х			<u> </u>			0.	0.	0.
(15) FARHANA KHERA	2.00	I							_	_
BOARD MEMBER		Х			<u> </u>		<u> </u>	0.	0.	0.
(16) BILL LURYE	2.00	. ,,								
BOARD MEMBER		Х			-			0.	0.	0.
(17) CHRISTOPHER TORRES	2.00	.,								_
BOARD MEMBER		Х						0.	0.	0. Form 990 (2021)

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Form **990** (2021)

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Form	990	(202 -
I UIIII	990	1202

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	anc	l Hig	ghes	st C	ompensated Employee	s (continued)				
(A)	(B) (C)							(D)	(E)	ſ		(F)	
Name and title	Average Position						one	Reportable	Reportable		E	stimate	ed
	hours per	box	, unle	ss pei	rson i	is both pr/trus	n an	compensation	compensatio		ar	nount	of
	week (list any	<u> </u>		uau	n ec ic	, i us	lee)	from	from related			other	
	hours for	lirecto						the organization	organization (W-2/1099-MIS			npensa rom th	
	related	e or c	stee			Isated		(W-2/1099-MISC/	1099-NEC)			ganizat	
	organizations	truste	al tru:		yee	mper		1099-NEC)	,	ſ		d relat	
	below	Individual trustee or director	nstitutional trustee	er	ƙey employee	Highest compensated employee	Jer			ſ	org	anizati	ons
	line)	ndiv	Insti	Officer	Key e	High emp	Former						
(18) MADELINE DELONE	2.00									ſ			
BOARD MEMBER		Х						0.		0.			0.
(19) KHALIL SHAHYD	2.00									ſ			
BOARD MEMBER		Х						0.		0.			0.
(20) ARNOLD SPELLUN	2.00									ſ			
BOARD MEMBER		Х						0.		0.			0.
(21) CAROL LESLIE HAMILTON	2.00									ſ			
BOARD MEMBER	1.00	Х						0.		0.			0.
(22) BRADLEY WHITFORD	2.00									ſ			
BOARD MEMBER		Х						0.		0.			0.
										ſ			
										ſ			
										ſ			
										ſ			
1b Subtotal								1,031,824.		0.	8	0,3	
c Total from continuation sheets to Part V								0.		0.			0.
d Total (add lines 1b and 1c)								1,031,824.		0.	80,320.		
2 Total number of individuals (including but r	not limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	3			1.0
compensation from the organization													10
										I		Yes	No
3 Did the organization list any former officer		<i>,</i>				<i>'</i>	0		5				37
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the s												37	
and related organizations greater than \$15											4	X	
5 Did any person listed on line 1a receive or								0	lual for services				37
rendered to the organization? <i>If "Yes." con</i>	nplete Schedule	e J f	or si	ich į	oers	on .					5		X
Section B. Independent Contractors									100.000 (
1 Complete this table for your five highest co										bensa	tion fr	om	
the organization. Report compensation for	the calendar ye	ear e	ndir	ig w	ith c	or wi	thin		ear.				
(A) Name and business	address	NT	ONE	,				(B) Description of s	ervices	C		C) ensatio	n
	daarooo	TAC		-				Decemption of e			Joinpe	mouto	
							\dashv						
							┥						
							\dashv						
							╡						
2 Total number of independent contractors (ncludina but n	ot lir	nited	to '	thos	se lis	ted	above) who received mo	ore than				
\$100,000 of compensation from the organ					(,					

Form **990** (2021)

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	t VII				JUSTICE			52-1009	973 Pag
		Check if Schedule O c	ontains	a response	or note to any line	in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue exclu from tax und sections 512 -
Contributions, Gifts, Grants and Other Similar Amounts		Federated campaigns		1a					
Ħ		Membership dues							
8		Fundraising events		·	1,244,563.				
TA		Related organizations							
Bil		Government grants (contri							
5		All other contributions, gifts, g							
ther		similar amounts not included	•		4,707,562.				
ġ	g	Noncash contributions included in li	ines 1a-1f	1g \$	347,065.				
anc	h	Total. Add lines 1a-1f				5,952,125.			
					Business Code				
	2 a	CONTRACT REVENUE			900099	331,696.	331,696.		
a	b	MEMBER DUES			900099	130,583.	130,583.		
ng.	с	HONORARIUM			900099	500.	500.		
Revenue	d	PUBLICATION SALES			900099	26.	26.		
"	е								
		All other program service r							
4	g	Total. Add lines 2a-2f				462,805.			
	3	Investment income (includ	-						
		other similar amounts)				124,651.			124,6
	4	Income from investment or		empt bond p	oroceeds				
	5	Royalties							
	_		$ \vdash$	(i) Real	(ii) Personal				
		Gross rents	6a	64,955.					
		Less: rental expenses	6b	0.					
		Rental income or (loss)	6c	64,955.	<u> </u>	64,955.			64,9
		Net rental income or (loss)) Securities	(ii) Other	04,955.			04,9
	7а	Gross amount from sales of		2,324,782.					
	h	assets other than inventory Less: cost or other basis	7a -	2,524,702.					
	u	and sales expenses	7b 3	1,889,168.					
	~	Gain or (loss)	70 7c	435,614.					
		Net gain or (loss)				435,614.			435,6
		Gross income from fundraisin							
	0 4	including \$1,2							
1		contributions reported on l		_					
		Part IV, line 18			17,251.				
	b	Less: direct expenses			75,328.				
		Net income or (loss) from f				-58,077.			-58,0
		Gross income from gaming							
		Part IV, line 19							
	b	Less: direct expenses							
	с	Net income or (loss) from g	gaming	activities					
	10 a	Gross sales of inventory, le			T				
		and allowances							
	b	Less: cost of goods sold							
\downarrow	С	Net income or (loss) from s	sales of	inventory .	····· • •				
					Business Code				
Revenue	11 a	MISCELLANEOUS			900099	5,111.	5,111.		
<u>Revenue</u>	b				├ ───┤				
<u>R</u>	С				├ ───┤				
٦		All other revenue							
	е	Total. Add lines 11a-11d			î	5,111.			
	12	Total revenue. See instructio	ns		🕨 📔	6,987,184.	467,916.	0.	567,1

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	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	se or note to any line in t (A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21	380,368.	380,368.		
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	291,017.	210,491.	50,453.	30,073
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,318,547.	1,676,995.	401,961.	239,591
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	119,258.	86,259.	20,675.	12,324
9	Other employee benefits	463,524.	335,265.	80,360.	47,899
10	Payroll taxes	287,149.	207,694.	49,782.	29,673
11	Fees for services (nonemployees):				
а	Management				
b	Legal	87,199.	80,192.	5,004.	2,003
с	Accounting	74,155.	55,525.	11,655.	6,975
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	49,179.		49,179.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	192,425.	178,764.	11,698.	1,963
12	Advertising and promotion	7,633.	5,192.	1,623.	818
13	Office expenses	46,292.	29,838.	12,258.	4,196
14	Information technology	100,633.	71,670.	17,925.	11,038
15	Royalties				
16	Occupancy	809,581.	585,566.	140,355.	83,660
17	Travel	12,317.	9,323.	1,633.	1,361
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	10 (15	1.1.000	0.005	4 0 0 5
19	Conferences, conventions, and meetings	19,615.	14,393.	3,285.	1,937
20	Interest				
21	Payments to affiliates	100.000	0.0. 6.0.6	00.005	11 011
22	Depreciation, depletion, and amortization	137,822.	99,686.	23,895.	14,241
23	Insurance	8,240.	7,240.	605.	395
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	RECRUITING AND HIRING	208,875.	149,520.	34,730.	24,625
b	BOOKS AND PERIODICALS	55,712.	52,927.	1,782.	1,003
c	REPAIRS AND MAINTENANCE	37,957.	27,514.	6,407.	4,036
d	EQUIPMENT RENTAL	21,267.	15,511.	3,546.	2,210
e	All other expenses	12,214.	8,494.	2,286.	1,434
25	Total functional expenses. Add lines 1 through 24e	5,740,979.	4,288,427.	931,097.	521,455
26	Joint costs. Complete this line only if the organization		, , ,	,	
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	I			

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Form **990** (2021)

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ALLIANCE FOR JUSTICE 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).

Form 990 (2021)

ALLIANCE FOR JUSTICE Part X Balance Sheet

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

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	831,870.	1	3,159,936.
	2	Savings and temporary cash investments	3,480,832.	2	3,927,308.
	3	Pledges and grants receivable, net	1,810,465.	3	692,742.
	4	Accounts receivable, net	59,764.	4	34,391.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
w	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	46,485.	9	38,346.
	- ·	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 1,623,886.			
	Ь		860,856.	10c	738,361.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	6,583,862.	12	7,507,192.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	150,756.	15	106,468.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	13,824,890.	16	16,204,744.
	17	Accounts payable and accrued expenses	54,195.	17	153,043.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ŝ	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
abi		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	1,879,082.	25	2,324,679.
	26	Total liabilities. Add lines 17 through 25	1,933,277.	26	2,477,722.
(0		Organizations that follow FASB ASC 958, check here 🕨 🗴			
ce		and complete lines 27, 28, 32, and 33.			11 000 005
llan	27	Net assets without donor restrictions	8,760,141.	27	11,223,385.
Ba	28	Net assets with donor restrictions	3,131,472.	28	2,503,637.
pun		Organizations that do not follow FASB ASC 958, check here			
Ē		and complete lines 29 through 33.			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds		29	
sse	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
t Aŝ	31	Retained earnings, endowment, accumulated income, or other funds	11 001 610	31	
Ne	32	Total net assets or fund balances	11,891,613.	32	13,727,022.
	33	Total liabilities and net assets/fund balances	13,824,890.	33	16,204,744.

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Form 990 (2021)

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Part XI Reconciliation of Net Assets Check If Schedule O contains a response or note to any line in this Part XI 1 1 Total expenses (must equal Part IX, column (A), line 12) 2 2 Total expenses (must equal Part IX, column (A), line 25) 3 1, 246, 205. 4 11, 891, 613. 5 589, 204. 6 5 589, 204. 6 6 6 7 7 7 8 7 7 9 Other changes in net assets or fund balances (explain on Schedule O) 8 9 Other changes in net assets or fund balances (explain on Schedule O) 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 13, 727, 022. Part XII The column (B) 10 13, 727, 022. 13, 727, 022. Part XII Financial Statements and Reporting Yes No 1 2 X 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 2 X		1990 (2021) ALLIANCE FOR JUSTICE	52	-1009	9973	Pag	_{ge} 12
1 Total revenue (must equal Part VIII, column (A), line 12) 1 6, 987, 184. 2 Total expenses (must equal Part IX, column (A), line 25) 3 1, 246, 205. 3 1, 246, 205. 4 11, 891, 613. 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 11, 891, 613. 5 589, 204. 6 6 7 7 7 7 7 8 9 0. 9 0. 9 Other changes in et assets or fund balances (explain on Schedule O) 9 0. 10 Net assets or fund balances (explain on Schedule O) 9 0. 10 Net assets or fund balances (explain on Schedule O) 9 0. 10 Net assets or fund balances (explain on Schedule O) 9 0. 10 13, 727, 022. 10 13, 727, 022. Part XII Xii Xii Xii 11 Accounting method used to prepare the Form 990: Cash Xii Accrual Other 11 H'res, 'check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separa	Pa	rt XI Reconciliation of Net Assets					
2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses, Subtract line 2 from line 1 4 11,246,205. 4 11,891,613. 5 589,204. 6 7 7 8 7 1 8 9 9 0. 9 0. 10 13,727,022. Part XII Financial Statements and Reporting Check if Schedule 0 contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990: 2 Cash X Accrual 11 Yes 12 Accounting method used to prepare the Form 990: 2 Cash X Accrual 1 Yes 1 Accounting method used to prepare the Form 990: 2 Cash X Accrual 11 Yes 12 X 14 Yes 15 Separate basis 16 Consolidated basis 17 Yes 18 Yes, 'check a box below to indicate whether the financial statements for the year were audited on a separate basis 16 Yes 17 Yes 18 Yes to indicate basis 19 Separate basis 10 Consolidated basis 11 Separate basis 12 Consolidated basis 13 Separate basis 14 Consolidated basis 15 Separate basis 16 Yes'' to line 2a or 2b, does th		Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses, Subtract line 2 from line 1 4 11,246,205. 4 11,891,613. 5 589,204. 6 7 7 8 7 1 8 9 9 0. 9 0. 10 13,727,022. Part XII Financial Statements and Reporting Check if Schedule 0 contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990: 2 Cash X Accrual 11 Yes 12 Accounting method used to prepare the Form 990: 2 Cash X Accrual 1 Yes 1 Accounting method used to prepare the Form 990: 2 Cash X Accrual 11 Yes 12 X 14 Yes 15 Separate basis 16 Consolidated basis 17 Yes 18 Yes, 'check a box below to indicate whether the financial statements for the year were audited on a separate basis 16 Yes 17 Yes 18 Yes to indicate basis 19 Separate basis 10 Consolidated basis 11 Separate basis 12 Consolidated basis 13 Separate basis 14 Consolidated basis 15 Separate basis 16 Yes'' to line 2a or 2b, does th							
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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 13, 727, 022. Part XII Financial Statements and Reporting X Yes No 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 2a X 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 2a X 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 2a X 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 2a X 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 2a X 1 Yes, 'heck a box below to indicate whether the financial statements accountant? 2a X 2a X 1 <	4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1			
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Act and OMB Circular A-133? 3a X b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits 3b 3b							
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or audits, explain why on Schedule O and describe any steps taken to undergo such audits					3a		<u>X</u>
	b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red aud	lit			
		or audits, explain why on Schedule O and describe any steps taken to undergo such audits		<u></u>	3b		L

Form **990** (2021)

SCHEDULE /	4
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Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public
Inspection

OMB No. 1545-0047

1001

Name of the organization

Name	e of t	the organization							dentification number				
ALLIANCE FOR JUSTICE 52–100 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.													
Par	tl	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructior	is.					
The o	The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)												
1 [
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990).)								
3		A hospital or a cooperative				(h)(1)(A)(ii	ii)						
								Viii) Entor	the hospital's name				
4 [A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,												
г	city, and state:												
5 [
_	section 170(b)(1)(A)(iv). (Complete Part II.)												
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7 [Х	An organization that norma	Illy receives a substa	ntial part of its support fi	rom a gove	ernmental	unit or from th	ne genera l p	oublic described in				
		section 170(b)(1)(A)(vi). (C	omplete Part II.)										
8		A community trust describe		(1)(A)(vi). (Complete Par	t II.)								
9		An agricultural research org				ed in coniu	inction with a	land-grant	college				
5													
		or university or a non-land-g	grant college of agric	ulture (see instructions).		name, city	, and state of	the college	: 01				
[university:											
10		An organization that norma	\$ ()					•	0				
		activities related to its exen		•					-				
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	om busines	ses acqui	red by the org	ganization a	after June 30, 1975.				
		See section 509(a)(2). (Co	mplete Part III.)										
11 [An organization organized	and operated exclusi	vely to test for public sa	fety. See	section 50	09(a)(4).						
12		An organization organized	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or				
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section	509(a)(3).	Check the box on				
		lines 12a through 12d that											
а		Type I. A supporting orga							aivina				
u		the supported organization											
					. majonty c				ipporting				
		organization. You must o											
b		Type II. A supporting org											
		control or management o			ame perso	ns that co	ntro l or mana	ge the supp	ported				
		organization(s). You mus	st complete Part IV,	Sections A and C.									
с		Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functional	lly integrate	ed with,				
		its supported organizatio	n(s) (see instructions)). You must complete I	Part IV, Se	ctions A,	D, and E.						
d		Type III non-functionally	/ integrated. A supp	orting organization oper	ated in co	nnection w	vith its suppo	rted organiz	zation(s)				
		that is not functionally int											
		requirement (see instruct	0 0	0 ,	5								
~		Check this box if the orga											
C		functionally integrated, or					туре і, туре	п, туре п					
,	E	, , ,		, , , , , , , , , , , , , , , , , , , ,	0 0								
		er the number of supported of	0										
g		vide the following information i) Name of supported	n about the supporte (ii) EIN	d organization(s). (iii) Type of organization	(iv) is the oroa	anization listed	(v) Amount o	fmonotony	(vi) Amount of other				
	(organization		(described on lines 1-10	in vour governi	na document?	support (see in	-	support (see instructions)				
		organization		above (see instructions))	Yes	No	Support (See ii	131140110113)	Support (See Instructions)				
Total													

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support										
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total				
	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	5298084.	5339475.	7771021.	4587126.	5969376.	28965082.				
2	Tax revenues levied for the organ-										
	ization's benefit and either paid to										
	or expended on its behalf										
3	The value of services or facilities										
-	furnished by a governmental unit to										
	the organization without charge										
4	Total. Add lines 1 through 3	5298084.	5339475.	7771021.	4587126.	5969376.	28965082.				
5	The portion of total contributions										
Ŭ	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,										
	a aluman (A						2963507.				
6	Public support. Subtract line 5 from line 4.						26001575.				
	ction B. Total Support						20001373.				
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total				
	Amounts from line 4	5298084.	5339475.	7771021.	4587126.		28965082.				
8	Gross income from interest,	52500011		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	100/1200		203030021				
0	dividends, payments received on										
	securities loans, rents, royalties,										
	and income from similar sources	249,814.	205,181.	216 715	331,933.	189,606.	1193249.				
~		249,014.	205,101.	210,713.	JJI, JJJ.	109,000.	1195249.				
9	Net income from unrelated business										
	activities, whether or not the										
40	business is regularly carried on										
10	Other income. Do not include gain										
	or loss from the sale of capital	2,483.	19.	21.	750.	5,611.	0 001				
	assets (Explain in Part VI.)	2,403.	19.	<u> </u>	750.	5,011.	<u>8,884.</u> 30167215.				
	Total support. Add lines 7 through 10						437,833.				
12	Gross receipts from related activities,						437,033.				
13	First 5 years. If the Form 990 is for th										
800	organization, check this box and stor ction C. Computation of Publi	o here	oontogo								
							96 10 ~				
	Public support percentage for 2021 (I					14	86.19 % 78.80 %				
15						15					
1 6a	33 1/3% support test - 2021. If the c	-					5 37				
	stop here. The organization qualifies	1 2 11	0								
la	33 1/3% support test - 2020. If the o	-									
	and stop here. The organization qual										
17a	10% -facts-and-circumstances test										
	and if the organization meets the fact					VI how the organiz	ation				
	meets the facts-and-circumstances te	0			•						
b	10% -facts-and-circumstances test						10% or				
	more, and if the organization meets th				•		. —				
	organization meets the facts-and-circu		0								
18	18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions										
						Schedule A	(Form 990) 2021				

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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.)

ction A. Public Support						
ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
Gifts, grants, contributions, and						
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						
iness under section 513						
ization's benefit and either paid to						
furnished by a governmental unit to the organization without charge						
Total. Add lines 1 through 5						
Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
Public support. (Subtract line 7c from line 6.)						
ction B. Total Support						
	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
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						
Add lines 10a and 10b						
Net income from unrelated business activities not included on line 10b, whether or not the business is regulative carried on						
-	-			-		tion,
check this box and stop here	- 0					
		-				%
					16	%
			ine 10. eeluwer (6)		47	0/
		B				%
	•	•				and
line 18 is not more than 33 1/3%, che	ck this box and s	top here. The orga	anization qua l ifies	as a publicly supp	orted organizatior	• • 🗆
Private foundation. If the organization	<u>n did not check a</u>	box on line 14, 19	a, or 19b, check t	his box and see in	structions	
3 01-04-22		A /	-		Schedule	A (Form 990) 2021
	Ar year (or fiscal year beginning in) Gifts, grants, contributions, and 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 bus- iness under section 513 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf The value of services or facilities 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 1, 2, and 3 received from disqualified persons Amounts included on lines 1, 2, and 3 received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support . (Subtractline 7c 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 Add lines 10a and 10b Net income from unrelated business acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business is regularly carried on 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 the check this box and stop here tion C. Computation of Invess Investment income percentage from 2020 tion D. Computation of Invess Investment income percentage from 2020 tion D. Computation of Invess as 1/3% support tests - 2	dar year (or fiscal year beginning in) (a) 2017 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") (b) 2017 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose (c) 2017 Gross receipts from activities that are not an unrelated trade or business under section 513 (c) 2017 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf (c) 2017 The value of services or facilities furnished by a governmental unit to the organization without charge (c) 2017 Amounts included on lines 1, 2, and 3 received from disqualified persons hat exceed the greater of \$5,000 or 1% of the amount on line 13 for the year (c) 2017 Add lines 7 and 7b Public support. (Subtractline 7c from line 6.) (c) 2017 Amounts from line 6 (c) 2017 (c) 2017 Amounts from line 6 (c) 2017 (c) 2017 Add lines 7 and 7b (c) 2017 (c) 2017 Add lines 10 and 10b (c) 2017 (c) 2017 Amounts from line 6 (c) 2017 (c) 2017 Add lines 10a and 10b (c) 2017 (c) 2017 Add lines 10a and 10b (c) 2017 (c) 2017	dar year (or fiseal year beginning in) (a) 2017 (b) 2018 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") (c) 2018 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose (c) 2018 Gross receipts from activities that are not an unrelated trade or business under section 513 (c) 2018 Tax revenues levied for the organization's tax-exempt purpose (c) 2018 Tax revenues levied for the organization without charge (c) 2018 Total. Add lines 1 through 5 (c) 2018 Amounts included on lines 1, 2, and 3 received from disqualified persons (c) 2018 Amounts included on lines 1, 2, and 3 received from the twar exect the gracter of 50:000 r 1% of the amount on line 13 for the year (c) 2018 Add lines 7 and 7b (c) 2018 (c) 2018 Amounts from line 6 (c) 2017 (b) 2018 Gross income from interest, dividends, payments received on securities loans, rents, royaties, and income from similar sources (c) 2018 Add lines 10 and 10b (c) 11, and 12.) (c) 2018 Net income from interest, dividends, payments received on securities loans, rents, royaties, and income from similar sources (c) 2018 Add lines 10 and 10b <t< td=""><td>dar year (or fiseal year beginning in) (a) 2017 (b) 2018 (c) 2019 Gifts, grants, contributions, and membership fees received, (Do not include any "unusual grants.") (a) 2017 (b) 2018 (c) 2019 Gross receipts from admissions, merchandles edd or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose (a) 2017 (b) 2018 (c) 2019 Gross receipts from admissions, merchandles edd or services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 (a) 2017 (b) 2018 (c) 2019 Amounts included on lines 1.2, and 3 received from disqualified persons that execute gravits of stome that eaccent the grave of stome tax eaccent tax eaccent tax eaccent tax eaccentax eaccent tax eaccent tax eaccent tax eaccent</td><td>dar year (or fiscal year beginning in) (a) 2017 (b) 2018 (c) 2019 (d) 2020 Gifts, grants, contributions, and membership fees received. (On not include any "unusual grants.") (c) 2019 (d) 2020 Greas necipits from admissions, membership fees received. (Do not include any "unusual grants.") (c) 2019 (d) 2020 Greas necipits from admissions, membership fees from shell are vacuum to the admissions. (c) 2019 (d) 2020 Greas necipits from admissions. (c) 2019 (d) 2020 Greas necipits from activities that are not an unrelated trade or bus- iness under section 513 (c) 2019 (d) 2020 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its bahaff (c) 2019 (d) 2017 The value of services or facilities throm ber water of admissions. (c) 2019 (d) 2020 Admounts included on line 1, 2, and 3 received from disqualified persons. (c) 2019 (d) 2020 Amounts from line 3 and 7 arcside throm der han disqualified persons. (c) 2019 (d) 2020 And lines 7 and 7 arcside throm der han disqualified persons. (c) 2019 (d) 2020 Amounts from line 6 (c) 2019 (d) 2020 (d) 2020 And lines 7 and 7 arcside throm der han disqualified persons. (c) 2019 (d) 2020</td><td>dar year (or fiscal year beginning in) ▶ (a) 2017 (b) 2018 (c) 2019 (d) 2020 (a) 2021 Gifts, grants, contributions, and membership best received. (Do not include any 'unusual grants.') (c) 2018 (d) 2021 (d) 2021 Gross receipts from admissions, merchandse sold or services performed, or facilities functions of the propose Gross receipts from admissions, merchandse sold or services performed, or facilities functions of the propose Gross receipts from admissions, merchandse sold or services perform admissions, merchandse sold or services perform admissions, merchandse sold or services or hour services the service or hour services the service or hour services the service of hour services the service of hour services the service or hour services the service of hour services the service of hour services the service or hour services the service or hour services the service of hour services the service or hour service the service or hour services the servic</td></t<>	dar year (or fiseal year beginning in) (a) 2017 (b) 2018 (c) 2019 Gifts, grants, contributions, and membership fees received, (Do not include any "unusual grants.") (a) 2017 (b) 2018 (c) 2019 Gross receipts from admissions, merchandles edd or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose (a) 2017 (b) 2018 (c) 2019 Gross receipts from admissions, merchandles edd or services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 (a) 2017 (b) 2018 (c) 2019 Amounts included on lines 1.2, and 3 received from disqualified persons that execute gravits of stome that eaccent the grave of stome tax eaccent tax eaccent tax eaccent tax eaccentax eaccent tax eaccent tax eaccent tax eaccent	dar year (or fiscal year beginning in) (a) 2017 (b) 2018 (c) 2019 (d) 2020 Gifts, grants, contributions, and membership fees received. (On not include any "unusual grants.") (c) 2019 (d) 2020 Greas necipits from admissions, membership fees received. (Do not include any "unusual grants.") (c) 2019 (d) 2020 Greas necipits from admissions, membership fees from shell are vacuum to the admissions. (c) 2019 (d) 2020 Greas necipits from admissions. (c) 2019 (d) 2020 Greas necipits from activities that are not an unrelated trade or bus- iness under section 513 (c) 2019 (d) 2020 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its bahaff (c) 2019 (d) 2017 The value of services or facilities throm ber water of admissions. (c) 2019 (d) 2020 Admounts included on line 1, 2, and 3 received from disqualified persons. (c) 2019 (d) 2020 Amounts from line 3 and 7 arcside throm der han disqualified persons. (c) 2019 (d) 2020 And lines 7 and 7 arcside throm der han disqualified persons. (c) 2019 (d) 2020 Amounts from line 6 (c) 2019 (d) 2020 (d) 2020 And lines 7 and 7 arcside throm der han disqualified persons. (c) 2019 (d) 2020	dar year (or fiscal year beginning in) ▶ (a) 2017 (b) 2018 (c) 2019 (d) 2020 (a) 2021 Gifts, grants, contributions, and membership best received. (Do not include any 'unusual grants.') (c) 2018 (d) 2021 (d) 2021 Gross receipts from admissions, merchandse sold or services performed, or facilities functions of the propose Gross receipts from admissions, merchandse sold or services performed, or facilities functions of the propose Gross receipts from admissions, merchandse sold or services perform admissions, merchandse sold or services perform admissions, merchandse sold or services or hour services the service or hour services the service or hour services the service of hour services the service of hour services the service or hour services the service of hour services the service of hour services the service or hour services the service or hour services the service of hour services the service or hour service the service or hour services the servic

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Yes No

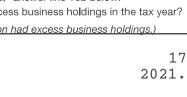
Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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, Ioan, 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.)

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10b Schedule A (Form 990) 2021

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Part IV	Supporting Organ	nizations (continue	ed)	

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	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		
Ь	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			
800	detail in Part VI. tion B. Type I Supporting Organizations	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
~				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	<u> </u>		
			Yes	No
			res	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		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	-	3		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
000				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	s).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i>			
с	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see i	nstructior	<u>s).</u>	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	<u>2a</u>		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
-	trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in Part VI.	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
U		3b		
400000	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	le A (Forr	n 000)	
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Schedule A (Form 990) 2021

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Schedule A (Form 990) 2021

Part V Type III Non-Functionally Integrated 509(a)(3) Support	ng Organi	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	lov. 20, 1970 (<i>explain in</i>	Part VI). See instructions
All other Type III non-functionally integrated supporting organizations mu	st complete S	Sections A through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optiona l)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optiona l)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(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		1
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		

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

Schedule A (Form 990) 2021

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Schedule A (Form 990) 2021

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Par	t V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	nizations (continu	ied)	
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	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (<i>describe in Part VI</i>). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive)		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	IS	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
с	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, 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 2021, Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
-	and 4c.				
8	Breakdown of line 7:				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				

Schedule A (Form 990) 2021

Schedule A	(Form 990) 2021	ALLIANCE	FOR	JUSTICE	52-1009973 Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D, Section D, lines 5, 6, and	l, 2, 3b, 3c, 4b, 4c, 4 lines 2 and 3; Part	5a, 6, 9a IV, Secti	ı, 9b, 9c, 11a, 11b, and 11c; Par on E, l ines 1c, 2a, 2b, 3a, and 3	10; Part II, line 17a or 17b; Part III, line 12; t IV, Section B, lines 1 and 2; Part IV, Section C, b; Part V, line 1; Part V, Section B, line 1e; Part V, iis part for any additional information.
	(See instructions.)				
132028 01-04-2	2				Schedule A (Form 990) 2021

Identification of Excess Contributions Included on Part II, Line 5

2021

	** Do Not File **	
***	Not Open to Public Inspection	***

Contributor's Name	Total Contributions	Excess Contributions
FORD FOUNDATION	1,575,000.	971,656.
THE CALIFORNIA ENDOWMENT	1,523,714.	920,370.
THE SUSAN THOMPSON BUFFETT	1,078,169.	474,825
WELLSPRING PHILANTHROPIC FUND	1,200,000.	596,656.
otal Excess Contributions to Schedule A, Part II, Line 5		2,963,507

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

2021

Employer identification number

52-1009973

ALLIANCE	FOR	JUSTICE

Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	\fbox 501(c)(3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) 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 for an exclusively religious.

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).

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

Schedule B (Form 990) (2021)

ALLIANCE FOR JUSTICE

Name of organization

Page 2 Employer identification number

52-1009973

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CALIFORNIA ENDOWMENT 1000 N. ALAMEDA ST LOS ANGELES, CA 90012	\$ <u>325,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	BERNARD AND ANNE SPITZER CHARITABLE TRUST 555 MADISON AVE NEW YORK, NY 10022	\$300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>	SOMELAND FOUNDATION 135 MAIN STREET SAN FRANCISCO, CA 94105	\$300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	BLUE SHIELD OF CALIFORNIA FOUNDATION 315 MONTGOMERY ST SAN FRANCISCO, CA 94014	\$250,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	WELLSPRING PHILANTHROPIC FUND 10 TIMES SQUARE NEW YORK, NY 10018	\$ <u>250,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	ROBERT JOHNSON FOUNDATION 50 COLLEGE RD EAST PRINCETON, NJ 08540-6614	\$200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
123452 11-11	-21		Schedule B (Form 990) (2021)

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Schedule B (Form 990) (2021)

Name of organization

Page 2

52-1009973

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	GEORGE GUND FOUNDATION 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036	\$ <u>150,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	DOROT FOUNDATION 10 DAVOI SQUARE PROVIDENCE , RI 02903	\$144,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZI P + 4	(c) Total contributions	(d) Type of contribution
9	OHANA FIDUCIARY CORPORATION PO BOX 33710 SEATTLE, WA 98133	\$347,065.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZI P + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll On Noncash Complete Part II for noncash contributions.)

Schedule B (Form 990) (2021)

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Schedule	Schedule B (Form 990) (2021) Page 3						
Name of c	organization	Emplo	yer identification number				
ALLIA	NCE FOR JUSTICE	52	-1009973				
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needec	ł.				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)		(d) Date received			
9	965 SHARES OF BERKSHIRE HATHAWAY	\$347,0	65.	_12/31/21_			
(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
			Schedule B (Form 990) (2021)

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Name of o	rganization		Employer identification number
ALLTA	NCE FOR JUSTICE		52-1009973
Part III		(a) through (e) and the following line entry , charitable, etc., contributions of \$1,000 or les	ion 501(c)(7), (8), or (10) that total more than \$1,000 for the year For organizations
(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 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 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 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
123454 11-11	1-21		Schedule B (Form 990) (2021)

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SCHEDULE C	LEC Political Campaign and Lobbying Activities				OMB No. 1545-0047			
(Form 990)				2021				
		anizations Exempt From Income						
Department of the Treasury		if the organization is described						
Internal Revenue Service		do to www.irs.gov/Form990 for	nstructions and the la	atest information.	Inspection			
If the organization answ	wered "Yes," on	Form 990, Part IV, line 3, or For	m 990-EZ, Part V, line	e 46 (Political Campaigr	n Activities), then			
 Section 501(c)(3) org 	janizations: Com	plete Parts I-A and B. Do not com	plete Part I-C.					
 Section 501(c) (other 	r than section 50	1(c)(3)) organizations: Comp l ete F	Parts I-A and C below.	Do not complete Part I-B				
 Section 527 organiza 	ations: Complete	Part I-A only.						
If the organization answ	wered "Yes," on	Form 990, Part IV, line 4, or For	m 990-EZ, Part VI, Iin	e 47 (Lobbying Activitie	es), then			
		nave filed Form 5768 (election und						
		nave NOT filed Form 5768 (electio						
-	f 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 inst								
	, or (6) organizat	ions: Complete Part III.		Em	anlover identification number			
Name of organization	3 T T T 3 310				nployer identification number			
Part I-A Comple		E FOR JUSTICE anization is exempt unde	r contion 501(a) a	r is a spotian 527 a	52-1009973			
Part I-A Comple	ete il the org	anization is exempt unde			rganization			
	0	ation's direct and indirect po l itica						
		ures			• \$			
3 Volunteer hours for	political campai	gn activities						
Part I-B Comple	ete if the ora	anization is exempt unde	r section $501(c)(3$)				
		incurred by the organization unde			¢			
		incurred by organization manager						
		n 4955 tax, did it file Form 4720 fo						
b If "Yes," describe in								
		anization is exempt unde	r section 501(c), e	except section 501	(c)(3).			
		by the filing organization for sect		-	• \$			
		ization's funds contributed to othe						
exempt function ac			Ū.	•	► \$			
1		. Add lines 1 and 2. Enter here an						
					► \$			
		1120-POL for this year?			Yes No			
		ployer identification number (EIN						
		tion listed, enter the amount paid						
contributions receiv	ved that were pro	omptly and directly delivered to a	separate political orgai	nization, such as a separa	ate segregated fund or a			
political action com	mittee (PAC). If	additional space is needed, provid	le information in Part I	V.				
(a) Name	e	(b) Address	(c) EIN	(d) Amount paid from	n (e) Amount of political			
				filing organization's				
				funds. If none, enter -0)- promptly and directly delivered to a separate			
					political organization.			
					If none, enter -0			
For Paperwork Reduct	ion Act Notice,	see the Instructions for Form 99	0 or 990-EZ.		Schedule C (Form 990) 2021			

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LHA

Schedule C (Form 990) 2021 ALLIANCE FOR JUSTICE 52–1009973 Page 2							
section 501(h)).							
A Check 🕨 📃 if the filing organiza	tion belongs to an affili	iated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,		
expenses, and shar	e of excess lobbying e	xpenditures).					
B Check 🕨 🔄 if the filing organiza	tion checked box A an	d "limited control" pro	visions apply.				
Limit	s on Lobbying Expen	ditures		(a) Filing	(b) Affiliated group		
(The term "expend	organization's totals	totals					
1a Total lobbying expenditures to influ				81,080.			
b Total lobbying expenditures to influ				0.			
c Total lobbying expenditures (add lin				<u>81,080.</u>			
d Other exempt purpose expenditure				5,138,444. 5,219,524.			
e Total exempt purpose expenditures				410,976.			
f Lobbying nontaxable amount. Ente				410,970.			
If the amount on line 1e, column (a) o Not over \$500,000		oying nontaxable amo he amount on line 1e.	bunt is:				
Over \$500,000 but not over \$1,000		0 plus 15% of the exce	255 OVOR \$500 000				
Over \$1,000,000 but not over \$1,500		0 plus 10% of the exce	1				
Over \$1,500,000 but not over \$1,5		0 plus 5% of the exces	1				
Over \$17,000,000	\$1,000,0		<u>35 0Ver @1,000,000.</u>				
	\$1,000,0						
g Grassroots nontaxable amount (en	ter 25% of line 1f)			102,744.			
h Subtract line 1g from line 1a. If zero				0.			
i Subtract line 1f from line 1c. If zero or less, enter -0-			0.				
j If there is an amount other than zei	o on either line 1h or li	ine 1i, did the organiza	tion file Form 4720				
reporting section 4911 tax for this	/ear?			[Yes No		
		raging Period Under					
(Some organizations the				of the five columns be	low.		
		te instructions for lin					
	Lobbying Expen	ditures During 4-Yea	r Averaging Period				
Calendar year	(a) 2018	(b) 2010	(c) 2020	(d) 2021	(e) Total		
(or fiscal year beginning in)	(a) 2016	(b) 2019	(c) 2020	(a) 2021	(e) Total		
2a Lobbying nontaxable amount	426,394.	418,126.	405,410.	410,976.	1,660,906.		
 b Lobbying ceiling amount 	120,391.	410,120.	405,410.	410,970.	<u> </u>		
(150% of line 2a, column(e))					2,491,359.		
((-))							
c Total lobbying expenditures	180,528.	79,106.	91,076.	81,080.	431,790.		
				, , , , , , , , , , , , , , , , , , ,	· · · · · ·		
d Grassroots nontaxable amount	106,599.	104,532.	101,353.	102,744.	415,228.		
e Grassroots ceiling amount							
(150% of line 2d, column (e))					622,842.		
f Grassroots lobbying expenditures	104,790.	48,958.	72,096.	81,080.	306,924.		
				Schedu	le C (Form 990) 2021		

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

For e	or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the	e lobbying activity.	Yes	No	Amo	ount	
1 a	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: Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?					
d	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
f						
a	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i						
i	Total. Add lines 1c through 1i					
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(ť	5), or sec	tion		
	501(c)(6).					
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2			
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the					
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section					
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered '	'No" OR	(b) Part I	II-A, line	3, is	
	answered "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al				
	expenses for which the section 527(f) tax was paid).					
а	Current year		<u>2</u> a			
b	Carryover from last year		2b			
С	Total		<u>2c</u>			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po					
	expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures. See instructions		5			
Par	t 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 C (Form 990) 2021

132043 11-03-21

		_					
SCHEDULE D Supplemental Financial Statements							
(Fori	n 990)	Part IV, line 6, 7, 8, 9, 10	anization answered "Yes" on Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		2021		
	ment of the Treasury Revenue Service		Attach to Form 990. 90 for instructions and the latest information	n.	Open to Public Inspection		
_	e of the organizatio			Employe	r identification number		
		ALLIANCE FOR JUSTI			52-1009973		
Pa		a tions Maintaining Donor Advise n answered "Yes" on Form 990, Part IV, lin	d Funds or Other Similar Funds or A e 6.	Accounts.	Complete if the		
			(a) Donor advised funds	(b) Funds ar	nd other accounts		
1	Total number at en	nd of year					
2		f contributions to (during year)					
3	Aggregate value of	f grants from (during year)					
4		end of year					
5	•		writing that the assets he <mark>l</mark> d in donor advised fu				
			exclusive legal control?		Yes No		
6	0	C	dvisors in writing that grant funds can be used	2			
			r donor advisor, or for any other purpose confe	5			
Pa			ganization answered "Yes" on Form 990, Part I		Yes No		
1		ervation easements held by the organization		v, ine /.			
1		of land for public use (for example, recrea		storically impo	rtant land area		
		f natural habitat	Preservation of a ce	y 1			
		of open space					
2			ied conservation contribution in the form of a	conservation e	easement on the last		
	day of the tax year	o .			at the End of the Tax Year		
а	Total number of co	onservation easements		2a			
b							
с	Number of conserv	vation easements on a certified historic stru	ucture included in (a)	2c			
d	Number of conserv	vation easements included in (c) acquired a	fter 7/25/06, and not on a historic structure				
				2d			
3			eased, extinguished, or terminated by the orga	nization durin	g the tax		
	year 🕨						
4		where property subject to conservation eas					
5		tion have a written policy regarding the per orcement of the conservation easements it			Yes No		
6	,		holds? handling of violations, and enforcing conserva				
0		i nours devoted to monitoring, inspecting,	narioling of volations, and emotioning conserva	lion easement	s during the year		
7	Amount of expense	es incurred in monitoring inspecting hand	ling of violations, and enforcing conservation	asements du	ring the year		
•	► \$						
8	Does each conserv	vation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h)(4)(B)(i)			
	and section 170(h)	(4)(B)(ii)?			Yes No		
9			on easements in its revenue and expense state				
	balance sheet, and	l include, if applicable, the text of the footn	ote to the organization's financial statements	hat describes	the		
		ounting for conservation easements.		<u></u>			
Pa		-	Art, Historical Treasures, or Other	Similar As	sets.		
		the organization answered "Yes" on Form					
1a	•		8, not to report in its revenue statement and b				
			lic exhibition, education, or research in further	ance of public			
ما			icial statements that describes these items. 8, to report in its revenue statement and balan	ca chaot work	rs of		
b	•		exhibition, education, or research in furtheran				
		ng amounts relating to these items:	exmonion, education, or research in fullieral		ST VICE,		
				▶ \$			
2	. ,		asures, or other similar assets for financial gair				
	-	ints required to be reported under FASB A	-				
а			~	🕨 💲 🔄			
b							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051 10-28-21 Schedule D (Form 990) 2021

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Sche		FOR JUSTICE				009973 Page
Pa	t III Organizations Maintaining Col	lections of Art, Histo	orical Treasures, or	Other S	imilar Asse	ts (continued)
3	Using the organization's acquisition, accession	, and other records, check	any of the following that	make signi	ficant use of its	6
	collection items (check all that apply):					
а	Public exhibition	d	Loan or exchange progra	ım		
b	Scholarly research	e	Other			
с	Preservation for future generations					
4	Provide a description of the organization's colle	ections and explain how th	ey further the organizatio	n's exempt	purpose in Pa	rt XIII.
5	During the year, did the organization solicit or r	eceive donations of art, his	storical treasures, or othe	r similar ass	sets	
	to be sold to raise funds rather than to be main	tained as part of the orgar	nization's collection?			Yes No
Par	t IV Escrow and Custodial Arrange	ements. Complete if the				', line 9, or
	reported an amount on Form 990, Part 3	K, line 21.				
1a	Is the organization an agent, trustee, custodian	or other intermediary for o	contributions or other ass	ets not inc l	uded	
	on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part XIII an	d complete the following t	able:			
						Amount
с	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year				1e	
f	Ending balance				1f	
2 a	Did the organization include an amount on For	n 990, Part X, line 21, for e	escrow or custodial accou	unt liability?	[Yes No
b	If "Yes," explain the arrangement in Part XIII. C					
Pa	t V Endowment Funds. Complete if t	he organization answered				
		(a) Current year (b) P	Prior year (c) Two year	s back (d)	Three years bac	k (e) Four years back
1a	Beginning of year balance					
b	Contributions					
С	Net investment earnings, gains, and losses					
d	Grants or scholarships					
е	Other expenditures for facilities					
	and programs					
f	Administrative expenses					
g	End of year balance					
2	Provide the estimated percentage of the current	it year end balance (line 1g	g, column (a)) held as:			
а	Board designated or quasi-endowment	%				
b	Permanent endowment 🕨	%				
с	Term endowment %					
	The percentages on lines 2a, 2b, and 2c should	l equal 100%.				
3a	Are there endowment funds not in the possess	ion of the organization tha	t are held and administer	ed for the o	rganization	
	by:					Yes No
	(i) Unrelated organizations					3a(i)
	(ii) Related organizations					3a(ii)
b	If "Yes" on line 3a(ii), are the related organization	ons listed as required on So	chedule R?			3b
_4	Describe in Part XIII the intended uses of the or		unds.			
Pa	t VI Land, Buildings, and Equipme					
	Complete if the organization answered	Yes" on Form 990, Part IV	', line 11a. See Form 990,	Part X, l ine	e 10.	
	Description of property	(a) Cost or other	(b) Cost or other		imulated	(d) Book value
		basis (investment)	basis (other)	depre	ciation	
1 a	Land					
b	Buildings					60 0 00-
С	Leasehold improvements		1,051,677.		8,472.	683,205
d	Equipment		572,209.	51	7,053.	55,156
e	Other					
Tota	. Add lines 1a through 1e. <i>(Column (d) must equ</i>	al Form 990. Part X. colum	n <u> (B). line 10c.)</u>			738,361
					Schedu	le D (Form 990) 202

132052 10-28-21

	(Form 990) 2021	ALLIANCE	 JUSTICE
Part VII	Investments -	 Other Securities 	

Complete if the organization answered "Yes" or	n Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book va l ue	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) SECURITIES	7,507,192.	COST	
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) 🕨	7,507,192.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" or	n Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book va l ue	(c) Method of valuation: Cost or end	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Complete if the organization answered "Yes" or	n Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
	escription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)		
Part X Other Liabilities.			
Complete if the organization answered "Yes" or	n Form 990, Part IV. line 1	1e or 11f. See Form 990. Part X. line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			(4) = = = = = = = = = = = = = = = = = = =
(1) Federal Income taxes (2) ACCRUED SALARIES AND BENEF	ТТЯ		159,059
	110		1,599,660
			565,960
			505,500
(5)			
(6)			
(7)			
(8)			
			2,324,679

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) 2021

71593_1

132053 10-28-21

Sche	edule D (Form 990) 2021 ALLIANCE FOR JUSTICE	52	2-1009973	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Reven	le per Retur	'n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total revenue, gains, and other support per audited financial statements		8,174	040.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	9,204.		
b		6,831.		
с				
d				
е			e 1,236	035.
3	Subtract line 2e from line 1		6,938	,005.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 4	9,179.		
b	Other (Describe in Part XIII.) 4b			
с				<u>,179.</u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			184.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Exper	ises per Reti	urn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total expenses and losses per audited financial statements	1	6,338	631.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities 2a 64	6,831.		
b	Prior year adjustments 2b			
с	Other losses 2c			
d	Other (Describe in Part XIII.) 2d			
е	Add lines 2a through 2d			,831.
3	Subtract line 2e from line 1		5,691	,800.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 4	9,179.		
b	Other (Describe in Part XIII.) 4b			
с				179.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)		5,740	,979.
Pa	rt XIII Supplemental Information.			

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

PART X, LINE 2:

THE ALLIANCE ACCOUNTS FOR UNCERTAINTIES IN INCOME TAXES RECOGNIZED UNDER A
PRESCRIBED THRESHOLD OF "MORE LIKELY THAN NOT" FOR RECOGNITION AND
DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX
RETURN. THE ALLIANCE PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS
FOR THE YEAR ENDED DECEMBER 31, 2021, AND DETERMINED THAT THERE WERE NO
MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT
MAY HAVE AN EFFECT ON ITS TAX-EXEMPT STATUS. AS OF DECEMBER 31, 2021, THE
STATUTE OF LIMITATIONS FOR TAX YEARS 2017 THROUGH 2020 REMAINS OPEN WITH
THE U.S. FEDERAL JURISDICTION AND THE STATE AND LOCAL JURISDICTIONS IN
WHICH THE ALLIANCE FILES RETURNS.

132054 10-28-21

Schedule D (Form 990) 2021

132055 10-28-21

14501115 712177 71593

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctiv	ities	OMB No. 1545-0047
(Form 990)		e organization answered "Yes" on organization entered more than \$15				r 19 ,	or if the	2021
Department of the Treasury		Attach to Form 990						Open to Public
Internal Revenue Service		to www.irs.gov/Form990 for instru	uction	s and	the latest information	on.		Inspection
Name of the organization								entification number
Part Fundrais		E FOR JUSTICE Complete if the organization answe	red "V	oe" or	Form 990 Part IV li	ino 1	52-1009	
required to	complete this part	t.					7.1 OIII 330-L	
a Aail solicitat b Internet and c Phone solici d In-person so	tions email solicitations itations licitations		tion of tion of fundra	non-g gover aising (overnment grants nment grants events	tees.	or	
key employees list	ed in Form 990, Pa highest paid indiv	art VII) or entity in connection with pr viduals or entities (fundraisers) pursua	rofessi	ona l fi	undraising services?		Ye	
(i) Name and addres or entity (fund		(ii) Activity	(iii) fundr have c or con contribu	ntrol of	(iv) Gross receipts from activity	to (Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No				
Total				•				
	ich the organizatio	n is registered or licensed to solicit c	contrib	utions	or has been notified	it is	exempt from re	egistration

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

Schedule G (Form 990) 2021

132081 10-21-21

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

Gross receipts Less: Contributions Gross income (line 1 minus line 2) Cash prizes Noncash prizes Noncash prizes Rent/facility costs Food and beverages Food and beverages Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization	17,251. 4,000. 30,314. 800.	(event type)	(total number)	col.(c)) 1,261,814 1,244,563 17,251 4,000 30,314
Less: Contributions <u>Gross income (line 1 minus line 2)</u> Cash prizes <u>Secondary Secondary Second</u>	1,244,563. 17,251. 4,000. 30,314. 800.			1,244,563 17,251 4,000
Gross income (line 1 minus line 2) Cash prizes Noncash prizes Rent/facility costs Food and beverages Entertainment Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from	17,251. 4,000. 30,314. 800.			17,251
Cash prizes Noncash prizes Rent/facility costs Food and beverages Entertainment Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from	4,000. 30,314. 800.			4,000
Noncash prizes Rent/facility costs Food and beverages Entertainment Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from	4,000. 30,314. 800.			
Rent/facility costs Food and beverages Entertainment Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from	4,000. 30,314. 800.			
Food and beverages Entertainment Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from	30,314.			
Entertainment Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from	800.			20 214
Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from				<u> </u>
Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from	L 41,/14•			800 41,714
Net income summary. Subtract line 10 from				76,828
	, , , , , , , , , , , , , , , , , , , ,			-59,577
J. complete il the englanzation				
\$15,000 on Form 990 EZ, line 6a.		,,,,		
	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (ad col. (a) through col. (d
Gross revenue				
Cash prizes				
Noncash prizes				
Rent/facility costs				
Other direct expenses				
Volunteer labor	Yes%	└── Yes % └── No	Yes %	
			•	
The gaming moorne sammary. Subtrast inte				1
er the state(s) in which the organization cond	ucts gaming activities:			
ne organization licensed to conduct gaming a	activities in each of these s	states?		Yes N
No," explain:				
re any of the organization's gaming licenses r	revoked, suspended, or te	rminated during the tax y	ear?	Yes N
/es," explain:				
	Noncash prizes	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d) er the state(s) in which the organization conducts gaming activities: te organization licensed to conduct gaming activities in each of these s lo," explain: e any of the organization's gaming licenses revoked, suspended, or te	Noncash prizes Rent/facility costs Other direct expenses Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d) er the state(s) in which the organization conducts gaming activities: er the state(s) in which the organization conducts gaming activities: Jo," explain:	Noncash prizes Rent/facility costs Other direct expenses Other direct expenses Volunteer labor No No Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d) er the state(s) in which the organization conducts gaming activities: e any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

Schedule G (Form 990) 2021	ALLIANCE FOR	JUSTICE	52-1009973 Page 3
		embers?	
		, or a member of a partnership or other enti	
to administer charitable gam	ing?		Yes No
13 Indicate the percentage of g			
a The organization's facility			
		organization's gaming/special events book	
Name 🕨			
Address 🕨			
15a Does the organization have a	a contract with a third party from	n whom the organization receives gaming re	evenue? Yes No
b If "Yes " enter the amount of	aaming revenue received by th	e organization 🕨 💲	and the amount
	by the third party >\$		
c If "Yes," enter name and add			
Name 🕨			
Address 🕨			
16 Gaming manager information	ו:		
Name 🕨			
Gaming manager compensa	tion 🕨 \$		
Description of services provi	ded 🕨		
Director/officer	Employee	Independent contractor	
17 Mandatory distributions:			
5	under state law to make obsrite	ble distributions from the gaming proceeds	to
retain the state gaming licen	â		
		be distributed to other exempt organizatio	
	activities during the tax year		
Part IV Supplemental I	nformation. Provide the exp	lanations required by Part I, line 2b, columr	
15b, 15c, 16, and 17	b, as applicable. Also provide	ny additional information. See instructions.	
			Colordado (/ F
132083 10-21-21			Schedule G (Form 990) 2021

Schedule G (Form 990)

132084 11-18-21

14501115 712177 71593

SCHEDULE I (Form 990)		G GO Comple	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.	er Assistand d Individuals answered "Yes" of	te to Organi s in the Unit on Form 990, Par	izations, ted States t IV, line 21 or 22.		OMB No. 1545-0047
Department of the Treasury Internal Revenue Service			Go to www.irs	 Attach to Form 990. Go to www.irs.gov/Form990 for the latest information. 	n 990. · the latest inform	ation.		Open to Public Inspection
Name of the organization	on ALLIANCE FOR	FOR JUSTICE						Employer identification number 52-1009973
Part I General Inf	General Information on Grants and Assistance	id Assistance						
1 Does the organize	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	o substantiate the	amount of the grants c	or assistance, the g	rrantees' eligibility	for the grants or assis	tance, and the selectio	[
criteria used to av	criteria used to award the grants or assistance?	tance?						X Yes No
2 Describe in Part I	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	cedures for monito	<u>pring the use of grant fu</u>	unds in the United	States.			
Part II Grants and recipient th	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	Domestic Organiz 5,000. Part II can t	ations and Domestic be duplicated if additio	Governments. Co	omplete if the orga d.	inization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and ad	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ALLIANCE FOR JUSTICE ACTION CAMPAIGN - 11 DUPONT CICRCL SUITE 500 - WASHINGTON, DC	FOR JUSTICE ACTION - 11 DUPONT CICRCLE NW, - WASHINGTON, DC 20036	52-2330508	501(C)(4)	375,000.	0.			FOR ALLIANCE FOR JUSTICE ACTION CAMPAIGN
	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	id government org	anizations listed in the	line 1 table				
3 Enter total numbe	Enter total number of other organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form	see the Instruction	table ons for Form 990.					Schedule I (Form 990) 2021

132101 10-26-21

SCI	HEDULE J	Compensation Information		OMB No. 1	545-004	47	
(Foi	r m 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		2021			
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		 U		1	
Depar	tment of the Treasury	Attach to Form 990, Part IV, line 23.		Open to	Publi	ic	
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe			
Nam	e of the organizatio			identificatio		nber	
		ALLIANCE FOR JUSTICE	52-	100997	3		
Pa	rt I Question	s Regarding Compensation					
					Yes	No	
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	990,				
		line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or c						
	Travel for com						
	Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef)						
	Ulscretionary spending account Personal services (such as maid, chauffeur, chef)						
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or							
		provision of all of the expenses described above? If "No," complete Part III to explain		1b			
						<u> </u>	
	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	3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's						
		ector. Check all that apply. Do not check any boxes for methods used by a related organization					
		ation of the CEO/Executive Director, but explain in Part III.					
	Compensatior						
		compensation consultant Compensation survey or study					
		ther organizations \overline{X} Approval by the board or compensation of	ommittee				
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing					
	organization or a re	lated organization:					
а	Receive a severand	e payment or change-of-control payment?		4a		X	
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan?		4b		X	
С						X	
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
		;)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	'n				
	contingent on the r					v	
a	ine organization?			<u>5a</u>		X X	
		ation?		<u>5b</u>			
		or 5b, describe in Part III.					
	contingent on the r	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation part correlated of:	41				
	0	6		6a		х	
a h		ation?		6b		X	
		ation? or 6b, describe in Part III.					
		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments					
		nes 5 and 6? If "Yes," describe in Part III		7		х	
		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		·····			
	-			8		х	
		id the organization also follow the rebuttable presumption procedure described in		····· –			
		n 53.4958-6(c)?		9			
LHA		eduction Act Notice, see the Instructions for Form 990.		dule J (Forn	n 990)	2021	

14501115 712177 71593

Schedule J (Form 990) 2021 ALLIA	ANC	ALLIANCE FOR JUSTICE	ICE		52-1009973	973		Page 2
s, Trustee	mplc	oyees, and Highest C	compensated Empl		Use duplicate copies if additional space is needed	pace 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.	be re orm	ported on Schedule J 990, Part VII.	l, report compensati	on from the organize	ttion on row (i) and fron	n related organizations	s, described in the instr	uctions, on row (ii).
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	ed in	dividual must equal th	ie total amount of F	orm 990, Part VII, Se	ction A, line 1a, applic	able column (D) and (E) amounts for that indiv	/idual.
		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) NAN ARON	(E)	174,387.	.0	29,997.	.999.	492.	214,875.	.0
PRESIDENT			.0		4	.0	.0	.0
(2) DANIEL GOLDBERG	Ξ	175,180.	.0	.0	8,750.	6,829.	190,759.	.0
DIRECTOR OF JUSTICE PROGRA	(II)	• 0	.0	• 0	• 0	0.	• 0	0.
(3) ABBY LEVINE	Ξ	168,536.	.0	• 0	8,418.	7,250.	184,204.	0.
DIRECTOR OF ADVOCACY PROGR	(1)		.0	• 0	• 0	.0	0 •	0.
(4) NONA RANDOIS	(i)	145,94	• 0	• 0	7,589.	1,203.	154,739.	.0
DIRECTOR OF CA	(0.	.0	•0	0.	.0	0.	.0
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							Schedu	Schedule J (Form 990) 2021

132112 11-02-21

Schedule J (Form 990) 2021 ALLIANCE FOR JUSTICE Part III Supplemental Information	52-1009973 Page 3
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.	is part for any additional information.
	Schedule J (Form 990) 2021

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury
nternal Revenue Service

Part I

1

2

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4 5

6

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8 9

10

11

12

13

14

15 16

17 18

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20

21

22 23

24 25

26

27

Other 🕨

Other

Other

Collectibles Food inventory

Drugs and medical supplies

Taxidermy

Historical artifacts

Scientific specimens Archeological artifacts

(

(

(

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

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

2021
Open to Public Inspection

Employer identification number

Name of the o	organization
---------------	--------------

ATTTANCE DOD THEMTCE

ALLIANCE FOR	JUSTI	CE			52-1009973
t I Types of Property					
	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) Method of determining noncash contribution amounts
Art - Works of art					
Art - Historical treasures					
Art - Fractional interests					
Books and publications					
Clothing and household goods					
Cars and other vehicles					
Boats and planes					
Intellectual property					
Securities - Publicly traded	X	1	347,065.	FMV	7
Securities - Closely held stock				<u> </u>	
Securities - Partnership, LLC, or					
trust interests				<u> </u>	
Securities - Miscellaneous				<u> </u>	
Qualified conservation contribution -					
Historic structures				<u> </u>	
Qualified conservation contribution - Other $_{\dots}$				<u> </u>	
Real estate - Residential				<u> </u>	
Real estate - Commercial				<u> </u>	
Real estate - Other					

28	Other	• ())				
29	Number of	of Forr	ms 8283 receive	d by the orga	niz	zation during	the tax year for co	ontribut	ions
	for which	the o	rganization com	pleted Form 8	828	83, Part V, D	onee Acknowledge	ement	

)

)

)

			100	110
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it			
	must hold for at least three years from the date of the initial contribution, and which isn't required to be used for			
	exempt purposes for the entire holding period?	30a		Х
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31		Х
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash			
	contributions?	32a		Х
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,			
	describe in Part II.			
			0001	

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

Schedule M (Form 990) 2021

Ves No

132141 11-17-21

Part II	Supplemental	Information,	Provide	the information
Schedule	M (Form 990) 2021	ALLIANCE	FOR	JUSTICE

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

ONE CONTRIBUTION OF 965 SHARES OF BERKSHIRE HATHAWAY

Schedule M (Form 990) 2021

132142 11-17-21

SCHEDULE O (Form 990) Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions of Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. EZ
OMB No. 1545-0047
2021
Open to Public
Inspection
Employer identification number

52-1009973

ALLIANCE FOR JUSTICE

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

VALUES, PRESERVES HUMAN RIGHTS AND UNFETTERED ACCESS TO THE COURTS, AND

ADHERES TO THE EVEN-HANDED ADMINISTRATION OF JUSTICE FOR ALL AMERICANS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

RESEARCH, COMPREHENSIVE WRITTEN REPORTS AND PUBLICATIONS AND

INFORMATION FOR THE PUBLIC.

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

ALLIANCE FOR JUSTICE'S 120 NATIONAL, REGIONAL, AND LOCAL MEMBERS SHARE A

COMMITMENT TO ENSURING THAT GOVERNMENT RESPONDS TO THE NEEDS OF ALL

AMERICANS AND KEEPS ITS PLEDGE OF LIBERTY AND JUSTICE FOR ALL. MEMBERS PAY

DUES BASED ON A SLIDING SCALE AND ARE NON-VOTING MEMBERS OF AFJ IN

ACCORDANCE WITH THE ARTICLES OF INCORPORATION.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST

POLICY, AND FINACIAL STATEMENTS AVAILABLE UPON REQUEST. THE FINANCIAL

STATEMENTS ARE ALSO AVAILABLE ONLINE AT WWW.AFJ.ORG.

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

A COPY OF FORM 990 IS REVIEWED IN DETAIL BY THE PRESIDENT, DIRECTOR OF

ADMINSTRATION, DIRECTOR OF BOLDER ADVOCACY, VICE PRESIDENT OF PROGRAMS AND

OPERATIONS, AND MEMBERS OF THE AUDIT COMMITTEE. A COPY OF THE REVIEWED FORM

47

990 WILL BE PROVIDED TO THE ALLIANCE'S GOVERNING BODY BEFORE IT IS FILED.

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

STAFF AND BOARD MEMBERS ARE REMINDED ANNUALLY TO AHDERE TO THE CONFLICT OF INTEREST POLICY. THE BOARD IS ALSO REQUIRED ANNUALLY TO SIGN AND COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE.

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

THE PRESIDENT'S SALARY IS REVIEWED BY THE EXECUTIVE COMMITTEE AS CONVENED

BY THE BOARD CHAIR BIANNUALLY, AND THAT COMMITTEE REVIEWS THE PRESIDENT'S

PERFORMANCE AND DETERMINES THE PRESIDENT'S SALARY. THE BOARD ALSO

DETERMINES WHETHER A SALARY INCREASE IS WARRANTED AND THE AMOUNT OF THE

SALARY INCREASE, BASED ON COMPARABLES.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST

POLICY, AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST. THE FINANCIAL

STATEMENTS ARE ALSO AVAILABLE ONLINE AT GUDIESTAR.

FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED

132212 11-11-21

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service	 Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information. 	ons and Unrelated Pal ared "Yes" on Form 990, Part IV, I ► Attach to Form 990. 1990 for instructions and the lates	therships ne 33, 34, 35b, 36 t information.	3, or 37.	° °	OMB No. 1545-0047 2021 Open to Public Inspection
ation ALLIANCE FOR	JUSTICE				Employer identification number 52-1009973	cation number) 7 3
Part I Identification of Disregarded Entities. Complete if the organization		answered "Yes" on Form 990, Part IV, line 33.				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	me End-of-year assets		(f) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.	ations. Complete if the organization a	answered "Yes" on Form 990	Part IV, line 34, b	ecause it had one	or more related tax-exe	mpt
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
ALLIANCE FOR JUSTICE ACTION CAMPAIGN (AFJAC) - 52-2330508, 11 DUPONT CIRCLE, N.W. SUITE 500, WASHINGTON, DC 20036	PROMOTES THE IMPORTANCE OF COURTS	DISTRICT OF COLUMBIA	501(C)(4)			
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	is for Form 990.				Schedule R	Schedule R (Form 990) 2021

973 Page 2 related	(j) (k) General or managing partner? Yes No	one or more related	(h) Section Percentage 512(b)(13) ownership control(13) entity? Yes No			Schedule B (Form 990) 2021
52-1009973 Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	because it had one	(p) Share of Perce end-of-year owne assets			Cohodulo D
e 34, because it	Disproportionate allocations?	on Form 990, Part IV, line 34, because it had	(f) Share of total S income en	 	 	
1 990, Part IV, lin	(g) Share of end-of-year assets			 		
d "Yes" on Form	(f) Share of total income	Complete if the organization answered "Yes"	lling Type of entity (C corp, S corp, or trust)			
ization answered	(e) Predominant income (related, under excluded from tav under sections 512-514)	the organization	(d) Direct controlling entity			
e if the organi		Complete if f	(c) Legal domicile (state or foreign country)			
	(d) Direct controlling entity	ration or Trust. ear.	(b) Primary activity			
JUSTICE ble as a Partne	(C) Legal domicile (state or foreign country)	as a Corpo	Prim			
ANCE FOR JI anizations Taxable thership during the f	(b) Primary activity	anizations Taxable	Ζ.ε			
Schedule R (Form 990) 2021 ALLIANCE FOR JUSTICE Part III Identification of Related Organizations Taxable as a Partnership. organizations treated as a partnership during the tax year.	(a) Name, address, and EIN of related organization	Identification of Related Organizations Taxable as a Corporation or treated as a corporation or trust during the tax year.	(a) Name, address, and EIN of related organization			- - - - -
Schedule Part III		Part IV				

50

Schedule R (Form 990) 2021 ALLIANCE FOR JUSTICE

Page 3 52-1009973

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

. Note: Complete line 1 if any entity is listed in Darts II. III. or IV of this schedule				Voc No
 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? 	s with one or more re	ated organizations listed i	n Parts II-IV?	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a X 4b X
Gift, grant, or capital contribution from related organization(s)				⊢
d I name or loan guarantees to or for related organization(s)				
 Dividends from related orcenization(s) 				×
				t
				1
h Purchase of assets from related organization(s)				1
i Exchange of assets with related organization(s)				1 X
j Lease of facilities, equipment, or other assets to related organization(s)				1i X
k Lease of facilities, equipment, or other assets from related organization(s)				1k X
Performance of services or membership or fundraising solicitations for related organization(s)	nization(s)			1 X
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			1m X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)			1n X
o Sharing of paid employees with related organization(s)				10 X
 P Reimbursement paid to related organization(s) for expenses a Reimbursement paid by related organization(s) for expenses 				1p X X
 Cither transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s) 				1r
s for inform	ho must complete thi	s line including covered r	ration on who must complete this line including covered relationships and transaction thresholds	
	(b)	(c)	(d)	
Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amount involved	olved
(1) ALLIANCE FOR JUSTICE ACTION CAMPAIGN	В	375,000.	CASH	
(2) ALLIANCE FOR JUSTICE ACTION CAMPAIGN	0	43,048.	ACTUAL EXPENSES	
(3)				
(4)				
(5)				
(6)				
132163 11-17-21	- - -		Schedule F	Schedule R (Form 990) 2021

51

73 Page 4		gross revenue)	(k) ral or Percentage aging ownership No					 Schedule R (Form 990) 2021
66		gross	àene àene mana part	8				e R (F
52-100		total assets or ((i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)					Schedule
		ed by	Dispropor- tionate allocations?	2				
		easur		<u> </u>		 	 	
	37.	of its activities (m	(g) Share of end-of-year assets					
	990, Part IV, line (than five percent	(f) Share of total income					
	Form	more	NO NO	2	 	 	 	
	s" on	ucted	(e) Are all 501(c)(3) 0005.7					
	e organization answered "Yes" on Form 990, Part IV, line 37	which the organization conducted more than five percent of its activities (measured by total assets or cain investment partnerships.	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)					
CE	mplete if the organ	nip through which the sion for certain inve	(c) Legal domicile (state or foreign country)					
ICE FOR JUSTICE	l le as a Partnership. Co	ntity taxed as a partnersh ructions regarding exclu	(b) Primary activity					
Schedule R (Form 990) 2021 ALLIANCE	Part VI Unrelated Organizations Taxable as a Partnership. Complete if th	Provide the following information for each entity taxed as a partnership through which the organization cond that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	(a) Name, address, and EIN of entity					

ALLIANCE FOR JUSTICE

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Schedule R (Form 990) 2021

132165 11-17-21

(Rev. January 2022)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File :	a senarate	application	for	each return.	

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

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or	Name of exempt organization or other filer, see instru	ctions.		Taxpayer	identification num	ber (T I N)
print	ALLIANCE FOR JUSTICE				52-10099	73
File by the due date for filing your			ions.		52 10055	7.5
return. See instructions			ress, see instructions.			
Enter the	Return Code for the return that this application is for (file	e a separat	e application for each return)			0 1
Applicat	ion	Return	Application			Return
ls For		Code	Is For			Code
Form 99	0 or Form 990-EZ	01	Form 1041-A			08
Form 47	20 (individual)	03	Form 4720 (other than individual)			09
Form 99	D-PF	04	Form 5227			10
Form 99	D-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 99	D-T (trust other than above)	06	Form 8870			12
Form 99	D-T (corporation)	07	UPONT CIRCLE, NW S			
 If the If this box 1 I return the 	e organization named above. The extension is for the organization $x = \frac{2021}{2}$ or	Group Exe and atta NOVEN anization's	mption Number (GEN) ch a list with the names and TINs of <u>IBER 15, 2022</u> , to file return for: d ending	f this is fo all membe	r the whole group, ers the extension is upt organization ret	s for.
	his application is for Forms 990-PF, 990-T, 4720, or 6069 y nonrefundable credits. See instructions.	, enter the	tentative tax, less	3a	\$	0.
	his application is for Forms 990-PF, 990-T, 4720, or 6069 timated tax payments made. Include any prior year overp			Зb	\$	0.
c Ba	lance due. Subtract line 3b from line 3a. Include your pa	yment witl	n this form, if required, by			
	ing EFTPS (Electronic Federal Tax Payment System). See			3c	\$	0.
Caution: instruction	: If you are going to make an electronic funds withdrawal ons.	(direct deb	bit) with this Form 8868, see Form 84	453-TE and	d Form 8879-TE for	r payment
LHA I	For Privacy Act and Paperwork Reduction Act Notice,	see instru	ictions.		Form 8868 (F	Rev. 1-2022)

123841 01-12-22

TAX RETURN FILING INSTRUCTIONS

CALIFORNIA FORM 199

FOR THE YEAR ENDING

DECEMBER 31, 2021

PREPARED FOR:

ALLIANCE FOR JUSTICE 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206

PREPARED BY:

CALIBRE CPA GROUP, PLLC 7501 WISCONSIN AVENUE, SUITE 1200 WEST BETHESDA, MD 20814

TO BE SIGNED AND DATED BY:

NOT APPLICABLE

AMOUNT OF TAX:

TOTAL TAX	\$ 0
LESS: PAYMENTS AND CREDITS	\$ 0
PLUS: OTHER AMOUNT	\$ 0
PLUS: INTEREST AND PENALTIES	\$ 0
NO PAYMENT IS REQUIRED	\$

OVERPAYMENT:

CREDITED TO YOUR ESTIMATED	\$ 0	
OTHER AMOUNT	\$ 0	
REFUNDED TO YOU	\$ 0	

MAKE CHECK PAYABLE TO:

NOT APPLICABLE

MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE FTB AND NO FURTHER ACTION IS REQUIRED. DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE FTB.

RETURN MUST BE MAILED ON OR BEFORE:

NOT APPLICABLE

SPECIAL INSTRUCTIONS:

2021 Exempt Orga	file Return Authorization f anizations	or	8453-EO						
Exempt Organization name			Identifying number						
ALLIANCE FOR JUSTICE			52-1009973						
Part I Electronic Return Information (who	ole dollars only)								
1 Total gross receipts (Form 199, line 4)			18,951,680						
2 Total gross income (Form 199, line 8)			2 <u>7,062,512</u>						
3 Total expenses and disbursements (Form	199, line 9)		3 5,816,307						
Part II Settle Your Account Electronically	v for Taxable Year 2021								
4 Electronic funds withdrawal 4a	Amount 4b W	ithdrawal date (mm/dd/	уууу)						
Part III Banking Information (Have you ver	ified the exempt organization's banking informat	ion?)							
5 Routing number									
6 Account number	7 Type of a	ccount: Checkin	g Savings						
Part IV Declaration of Officer									
I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a. Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO),									
statements be transmitted to the FTB by the ERO, tra	A all applicable interest and penalties. I authorize the exit ansmitter, or intermediate service provider. If the process or intermediate service provider the reason(s) for the 11/8/22	e delay.							
Here Signature of officer	Date Title	TN T							
	Driginator (ERO) and Paid Preparer.								
am only an intermediate service provider, I understar	anization's return and that the entries on form FTB 8453 nd that I am not responsible for reviewing the exempt o tained the organization officer's signature on form FTB forms and information that I will file with the FTB, and I	organization's return. I dec 8453-EO before transmittir nave followed all other requ	are, however, that form FTB 8453-EO Ig this return to the FTB; I have						
provided the organization officer with a copy of all fo 1345, 2021 Handbook for Authorized e-file Providers the exempt organization return is filed, whichever is	later, and I will make a copy available to the FTB upon anization's return and accompanying schedules and sta	request. If I am also the pa	urn or four years from the date id preparer, under penalties of perjury						
provided the organization officer with a copy of all fo 1345, 2021 Handbook for Authorized e-file Providers the exempt organization return is filed, whichever is I declare that I have examined the above exempt orga true, correct, and complete. I make this declaration b	later, and I will make a copy available to the FTB upon anization's return and accompanying schedules and sta based on all information of which I have knowledge.	request. If I am also the pa atements, and to the best o	urn or four years from the date id preparer, under penalties of perjury f my knowledge and belief, they are						
provided the organization officer with a copy of all fo 1345, 2021 Handbook for Authorized e-file Providers the exempt organization return is filed, whichever is I declare that I have examined the above exempt orga true, correct, and complete. I make this declaration b	later, and I will make a copy available to the FTB upon anization's return and accompanying schedules and sta based on all information of which I have knowledge.	request. If I am also the pa	urn or four years from the date id preparer, under penalties of perjury f my knowledge and belief, they are ERO's PTIN						
Provided the organization officer with a copy of all fo 1345, 2021 Handbook for Authorized e-file Providers the exempt organization return is filed, whichever is I declare that I have examined the above exempt orga true, correct, and complete. I make this declaration b	later, and I will make a copy available to the FTB upon anization's return and accompanying schedules and sta based on all information of which I have knowledge.	request. If I am also the pa atements, and to the best o	The property of the second sec						
Provided the organization officer with a copy of all for 1345, 2021 Handbook for Authorized e-file Providers the exempt organization return is filed, whichever is I declare that I have examined the above exempt orgatrue, correct, and complete. I make this declaration between the signature ERO BRO's Signature With Margue Firm's name (or yours) CALIERE	later, and I will make a copy available to the FTB upon anization's return and accompanying schedules and sta based on all information of which I have knowledge.	Check if also paid preparer X	urn or four years from the date id preparer, under penalties of perjury f my knowledge and belief, they are ERO's PTIN						
Provided the organization officer with a copy of all for 1345, 2021 Handbook for Authorized e-file Providers the exempt organization return is filed, whichever is I declare that I have examined the above exempt orgatrue, correct, and complete. I make this declaration between the signature ERO Must ERO's signature Firm's name (or yours) CALIERE	later, and I will make a copy available to the FTB upon anization's return and accompanying schedules and sta based on all information of which I have knowledge. Lim, CPA Tote 1/13/22 CPA GROUP, PLLC SCONSIN AVENUE, SUITE 12	Check if also paid	The provided and belief, they are ERO's PTIN PO1325865						
ERO Sign ERO's signature ERO's signature ERO's signature ERO's signature CALIBRE 7501 WI BETHESD Under penalties of perjury, I declare that I have examined the above exempt orgative true, correct, and complete. I make this declaration be correct, and complete. I make this declaration be correct.	later, and I will make a copy available to the FTB upon anization's return and accompanying schedules and sta based on all information of which I have knowledge. Lim, CPA Tote 1/13/22 CPA GROUP, PLLC SCONSIN AVENUE, SUITE 12	Check if also paid preparer X Check 0 0 WES	urn or four years from the date id preparer, under penalties of perjury f my knowledge and belief, they are P01325865 Firm's FEIN $47-0900880$ ZIP code 20814						
ERO Must Sign ERO's estimation of the solution o	later, and I will make a copy available to the FTB upon anization's return and accompanying schedules and sta based on all information of which I have knowledge.	Check if also paid preparer X Check o 0 WES g schedules and statement ave knowledge.	urn or four years from the date id preparer, under penalties of perjury f my knowledge and belief, they are P01325865 Firm's FEIN $47-0900880$ ZIP code 20814						
Provided the organization officer with a copy of all for 1345, 2021 Handbook for Authorized e-file Providers the exempt organization return is filed, whichever is I declare that I have examined the above exempt orget true, correct, and complete. I make this declaration between the second complete. I make the second complete. I	later, and I will make a copy available to the FTB upon anization's return and accompanying schedules and sta based on all information of which I have knowledge. Lin CPA Date 1/13/22 CPA GROUP, PLLC SCONSIN AVENUE, SUITE 12 A, MD nined the above organization's return and accompanyin ke this declaration based on all information of which I	Check if also paid preparer X Check of self- if self- empto 0 0 WES g schedules and statement have knowledge.	urn or four years from the date id preparer, under penalties of perjury. f my knowledge and belief, they are PO1325865 Firm's FEIN $47 - 0900880$ ZIP code 20814 s, and to the best of my knowledge Paid preparer's PTIN						
Provided the organization officer with a copy of all for 1345, 2021 Handbook for Authorized e-file Providers the exempt organization return is filed, whichever is I declare that I have examined the above exempt orgative, correct, and complete. I make this declaration between the second complete. I make	later, and I will make a copy available to the FTB upon anization's return and accompanying schedules and sta based on all information of which I have knowledge. Lin CPA Date 1/13/22 CPA GROUP, PLLC SCONSIN AVENUE, SUITE 12 A, MD nined the above organization's return and accompanyin ke this declaration based on all information of which I	Check if also paid preparer X Check o 0 WES g schedules and statement ave knowledge.	urn or four years from the date id preparer, under penalties of perjury f my knowledge and belief, they are ERO's PTIN P01325865 Firm's FEIN 47-0900880 ZIP code 20814 s, and to the best of my knowledge						

FTB 8453-EO 2021

129021 12-29-21

TAXABLE		California Exemp		ation							8941 12 - 2 FORM	9-21
202	21	Annual Informati	on Return								199	
Calendar Yea	r 2021 or fisca	al year beginning (mm/dd/yyyy)			, and end	ling (mm/	′dd/yyyy	/)				
Corporation/Org	ganization name						Califo	ornia corpo	ration nur	mber		
								3813:	200			
	nation. See instru	JUSTICE					FEI		490			—
							1	52-10	0099	73		
Street address (PMB no.				
	ONT CI	RCLE, NW SUITE 5	00			01.1		ZIP code				
City WASHIN	CTON					State D		21P code 2003(5_12	06		
Foreign country			Foreign province/state	county				Foreign pc				
 D Final info Enter date: E Check ac F Federal ration (4) G Is this a (4) H Is this or If "Yes," was a straight of the st	d return ion 4947(a)(1 ormation return Dissolved [: (mm/dd/yyyy) ccounting meth eturn filed? (1 Other 990 ser group filing? § ganization in a what is the par	Surrendered (Withdrawn)	Yes X No Merged/Reorganized al (3) Other ● Sch H (990) Yes X No Yes X No	 not repute the second second	orted to the F ot under R& d in political rganization e enter the gr rganization a organization a axable incom rganization u ited in a price al Form 1023 of with IRS	TB? See TC Sectio activities' exempt ur oss receij a limited li file Form ne? under aud or year? 3/1024 pe	instruc on 2370 ? See ir nder R& pts fron iability on 100 on it by th ending?	tions 1d, has tl Istruction TC Secti In nonmer company Form 10 e IRS or I	ne organ Is. on 2370 mber son ? 	Yu ization Yu i1g? Yu Vi urces S Yu Vi Yu Vi Yu Yu	es X es X es X es X es X es X es X es X	No No No No
Part I (Î.	I unless not required to file this fo										
Receipts and Revenues	 2 Gross 3 Gross 4 Total g This li 5 Cost o 6 Cost o 	r other basis, and sales expenses of	ers and affiliates ilar amounts received test. Add line 1 throu t is less than \$50,000	l gh line 3. I, see Genera	Information 5 6	ST ST 1,889	'MT 'MT 9,16	1 2 00 58 00	1 2 3 4 7	2,999 5,952 8,951 1,889	,125 ,680	00
		ross income. Subtract line 7 from li						•	8	7,062		
Expenses		xpenses and disbursements. From S							9	5,816		
2/10/00	1	of receipts over expenses and disb						•	10	1,246	,205	
Filing Fee	12 Use tax 13 Payme 14 Use tax 15 Penalti	nts balance. If line 11 is more than x balance. If line 12 is more than lin es and interest. See General Inform	line 12, subtract line e 11, subtract line 11 ation J	12 from line from line 12	11			• • • • • • • • • • • • • • • • • • •	11 12 13 14 15 16			00 00 00 00 00 00
<u>.</u>	Under penaltie it is true, correc	e due. Add line 12 and line 15. The s of perjury, I declare that I have examined of, and complete. Declaration of preparer (o	this return, including according the second	ompanying sch sed on all infori	edules and sta nation of which	atements, ar n preparer h	nd to the nas any k	best of my nowledge.	knowledg	ge and belief,		η
Sign Here	Signature of officer	01				-	Date		(*	 Telephone PTIN 		
	Preparer's signature	Prinste & Jarquelin, CPT	4		11/13/2	22	Check i self-em	f ployed >		0132586	5	
Paid	Firm's name	V							•	● Firm's FEIN		
Preparer's		CALIBRE CPA GROU								• Telephone	80	
Use Only	1	7501 WISCONSIN A BETHESDA, MD 208	314			ST			2	02-331-	9880	
	May the FTB	discuss this return with the prepare	er shown above? See	Instructions				. • X	Yes	No		

128941 12-29-21

ALLIANCE FOR JUSTICE

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

128951 01-19-22

		1	Gross sales or receipts from all I	business activities. See instru	ctions	•	1	17,251 00
		2	Interest			•	2	124,651 00
		3					3	00
Receip	ots	4	Gross rents			•	4	64,955 00
from		5	Gross royalties			•	5	00
Other		6	Gross amount received from sal	e of assets (See instructions)	STA	ATEMENT 3 •	6	2,324,782 ₀₀
Source	es	7	Other income		SEE STA	ATEMENT 4 •	7	467,916 00
		8	Total gross sales or receipts fro				8	2,999,555 00
		9	Contributions, gifts, grants, and	similar amounts paid	STA	ATEMENT 5 🔹 🛛	9	380,368 00
		10	Disbursements to or for membe	rs		•	10	00
		11	Disbursements to or for member Compensation of officers, direct	ors, and trustees	SEE STA	ATEMENT 6 •	11	204,384 00
		12	Other salaries and wages			•	12	2,318,547 00
Expens	ses	13	Interest			•	13	00
and		14	Taxes				14	287,149 00
Disbur	rse-	15	Rents				15	809,581 ₀₀
ments		16	Depreciation and depletion (See	instructions)		•	16	137,822 00
		17	Depreciation and depletion (See Other expenses and disburseme	nts	SEE STA	ATEMENT 7 •	17	1,678,456 00
		18	Total expenses and disburseme	nts. Add line 9 through line 17	Lenter here and on Side 1, Pa	art I, line 9	18	5,816,307 ₀₀
Sche	edul	e L	Balance Sheet	Beginning of	taxable year	End	of taxable	e year
Assets	3			(a)	(b)	(C)		(d)
1 Ca	ash .				4,312,702		•	7,087,244
2 Ne			s receivable		59,764		•	34,391
			ceivable				•	
							•	
			state government obligations				•	
6 In	vestm	nents	in other bonds				•	
			in stock				•	
8 M	ortgag	ge loa	ans				•	
9 Ot	ther in	ivestr	ments STMT 8		6,583,862		•	7,507,192
10 a	Depre	eciabl	le assets	1,608,560		1,623,88	36	
			mulated depreciation	(747,704)	860,856	(885,525	5)	738,361
11 La	and .						•	
12 Ot	ther as	ssets	STMT 9		2,007,706		•	837,556
13 To	otal as	ssets			13,824,890			16,204,744
Liabili	ties a	nd ne	et worth					
14 Ac	ccount	ts pay	yable		54,195		•	153,043
			s, gifts, or grants payable				•	
16 Bo	onds a	and n	otes payable				•	
17 M	ortga	ges p	ayable				•	
18 Ot	ther lia	abiliti	es STMT 1 0		1,879,082			2,324,679
19 Ca	apitals	stock	or principal fund				•	
			al surplus. Attach reconciliation				•	
21 Re	etaine	d earı	nings or income fund		11,891,613		•	13,727,022
			ies and net worth		13,824,890			16,204,744
Sche	edul	еM		per books with income per re				
			Do not complete this sche	dule if the amount on Schedul		s than \$50,000.		
			per books			2		
			ne tax			his return. Attach schedule	🕒	
			pital losses over capital gains			is return not charged		
			ecorded on books this year.		against book inc			
			lule					
			corded on books this year not			and line 8	L	
			this return. Attach schedule		10 Net income per r			
6 To	otal. A	dd lir	ne 1 through line 5	1,246,	205 Subtract line 9 fr	om line 6		1,246,205

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ALLIANCE FOR JUSTICE

52-1009973

CA 199	CASH CONTRIBUTIONS INCLUDED ON PART I, LINE 3	SI	FATEMENT 1
CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
CALIFORNIA ENDOWMENT	1000 N. ALAMEDA ST LOS ANGELES, CA 90012		325,000.
BERNARD AND ANNE SPITZER CHARITABLE TRUST	555 MADISON AVE NEW YORK, NY 10022		300,000.
SOMELAND FOUNDATION	135 MAIN STREET SAN FRANCISCO, CA 94105		300,000.
BLUE SHIELD OF CALIFORNIA FOUNDATION	315 MONTGOMERY ST SAN FRANCISCO, CA 94014		250,000.
WELLSPRING PHILANTHROPIC FUND	10 TIMES SQUARE NEW YORK, NY 10018		250,000.
ROBERT JOHNSON FOUNDATION	50 COLLEGE RD EAST PRINCETON, NJ 08540-6614		200,000.
GEORGE GUND FOUNDATION	11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036		150,000.
DOROT FOUNDATION	10 DAVOI SQUARE PROVIDENCE , RI 02903		144,000.
TOTAL INCLUDED ON LINE 3			1,919,000.

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	NCASH CONTRIBU DED ON PART I,		STATEMENT 2
CONTRIBUTOR'S NAME	CONTRIBUTOR'S	ADDRESS	
OHANA FIDUCIARY CORPORATION	PO BOX 33710	SEATTLE, WA 98133	
PROPERTY DESCRIPTION	DATE OF GIFT	FMV OF GIFT	TOTAL AMOUNT
965 SHARES OF BERKSHIRE HATHAWAY	12/31/21	347,065.	347,065.
MOMAL THALIDED ON LINE 2			247 065
TOTAL INCLUDED ON LINE 3		347,065.	347,065.

CA 199	GROSS	AM	OUNT FROM SAL	E OF AS	SETS		S	TATEMENT 3
DESCRIPTION				ATE VIRED	DAT SOI			THOD UIRED
							PUR	CHASED
			COST OR OTHER BASIS	DEPRI	EC.	EXPEN OF SA		GROSS SALES PRICE
			1,889,168.		0.		0.	2,324,782.
TOTAL TO FORM 199, PAG	GE 2, LN	6	1,889,168.		0.		0.	2,324,782.
CA 199			OTHER INCOM	IE			S	TATEMENT 4
DESCRIPTION								AMOUNT
MISCELLANEOUS CONTRACT REVENUE REGISTRATION FEES HONORARIUM PUBLICATION SALES MEMBER DUES								5,111. 331,696. 0. 500. 26. 130,583.
TOTAL TO FORM 199, PAR	RT II, LI	NE	7					467,916.

CA 199	CASH CONTRIBUT AND SIMILA	IONS, GIFTS, R AMOUNTS PA		STATEMENT 5
ACTIVITY CLASSIFICATI	ON: CONTRIBUTION	FO AFJC		
DONEES NAME	DONEES ADDRESS		RELATIONSHIP	AMOUNT
ALLIANCE FOR JUSTICE ACTION CAMPAIGN	11 DUPONT CIRCLE 500 - WASHINGTON 20036-1206		RELATED ORG	375,000
DONEES NAME	DONEES ADDRESS		RELATIONSHIP	AMOUNT
ALL OTHER	11 DUPONT CIRCLE 500 - WASHINGTON 20036-1206		NONE	5,368
		ᠬ᠋᠋᠇ᡳᢧ᠋᠋᠇ᡎᢦ		380,368
	TOTAL FOR THIS A			
	M 199, PART II, L	INE 9		
TOTAL INCLUDED ON FOR CA 199 COMPENSA		INE 9	ND TRUSTEES	380,368 STATEMENT 6
CA 199 COMPENSA	M 199, PART II, L	INE 9	AND	
	M 199, PART II, L TION OF OFFICERS, SUITE 500	INE 9 DIRECTORS AI TITLE	AND WORKED/WK	STATEMENT 6
CA 199 COMPENSA NAME AND ADDRESS NAN ARON 11 DUPONT CIRCLE, NW	M 199, PART II, L TION OF OFFICERS, SUITE 500 -1206 SUITE 500	INE 9 DIRECTORS AN TITLE AVERAGE HRS PRESIDENT 40.00	AND WORKED/WK 0 JUSTICE PROGRA	STATEMENT 6 COMPENSATIO 204,384
CA 199 COMPENSA NAME AND ADDRESS NAN ARON 11 DUPONT CIRCLE, NW WASHINGTON, DC 20036 DANIEL GOLDBERG 11 DUPONT CIRCLE, NW	M 199, PART II, L TION OF OFFICERS, SUITE 500 -1206 SUITE 500 -1206 SUITE 500	INE 9 DIRECTORS AI AVERAGE HRS PRESIDENT 40.00 DIRECTOR OF 40.00	AND WORKED/WK 0 JUSTICE PROGRA 0 ADVOCACY PROGR	STATEMENT 6 COMPENSATIO 204,384

ALLIANCE FOR JUSTICE REGINAL THORNTON 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	DIRECTOR OF FINANCE 40.00	<u>52-1009973</u> 0.
ALICIA PEYTON 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	DIRECTOR OF ADMINISTRATION 40.00	0.
RAKIM BROOKS 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	PRESIDENT 40.00	0.
PAULETTE MEYER 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	CHAIRMAN OF THE BOARD 2.00	0.
BARBARA GONZALEZ-MCINTOSH 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	TREASURER 2.00	0.
NORMAN ROSENBERG 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	VICE CHAIR 2.00	0.
SERRA FALK-GOLDMAN 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	SECRETARY 2.00	0.
DEEPAK GUPTA 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	BOARD MEMBER 2.00	0.
CLAY HILES 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	BOARD MEMBER 2.00	0.
AKUNNA COOK 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	BOARD MEMBER 2.00	0.
FARHANA KHERA 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	BOARD MEMBER 2.00	0.
BILL LURYE 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	BOARD MEMBER 2.00	0.

ALLIANCE FOR JUSTICE		52-1009973
CHRISTOPHER TORRES 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	BOARD MEMBER 2.00	0.
MADELINE DELONE 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	BOARD MEMBER 2.00	0.
KHALIL SHAHYD 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	BOARD MEMBER 2.00	0.
ARNOLD SPELLUN 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	BOARD MEMBER 2.00	0.
CAROL LESLIE HAMILTON 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	BOARD MEMBER 2.00	0.
BRADLEY WHITFORD 11 DUPONT CIRCLE, NW SUITE 500 WASHINGTON, DC 20036-1206	BOARD MEMBER 2.00	0.

TOTAL TO FORM 199, PART II, LINE 11

204,384.

AMOUNT

CA 199 C	OTHER EXPENSES	STATEMENT 7

COMPENSATION OF KEY EMPLOYEES	06 622
COMPENSATION OF RELEMPHOTEES	86,633.
RECRUITING AND HIRING	208,875.
BOOKS AND PERIODICALS	55,712.
REPAIRS AND MAINTENANCE	37,957.
EQUIPMENT RENTAL	21,267.
DIRECT EXPENSES OF FUNDRAISING EVENTS	75,328.
PENSION PLAN CONTRIBUTIONS	119,258.
OTHER EMPLOYEE BENEFITS	463,524.
LEGAL FEES	87,199.
ACCOUNTING FEES	74,155.
INVESTMENT MANAGEMENT FEES	49,179.
OTHER PROFESSIONAL FEES	192,425.
ADVERTISING AND PROMOTION	7,633.
OFFICE EXPENSES	46,292.
INFORMATION TECHNOLOGY	100,633.
TRAVEL	12,317.
CONFERENCES AND CONVENTIONS	19,615.
INSURANCE	8,240.
ALL OTHER EXPENSES	12,214.
TOTAL TO FORM 199, PART II, LINE 17	1,678,456.

CA 199 OTHER INVESTMENTS	5	STATEMENT 8
DESCRIPTION	BEG. OF YEAR	END OF YEAR
SECURITIES	6,583,862.	7,507,192.
TOTAL TO FORM 199, SCHEDULE L, LINE 9	6,583,862.	7,507,192.

CA 199 OTHER ASSETS		STATEMENT 9
DESCRIPTION	BEG. OF YEAR	END OF YEAR
PLEDGES AND GRANTS RECEIVABLE PREPAID EXPENSES AND DEFERRED CHARGES DUE FROM AFFILIATES SECUIRTY DEPOSITS	1,810,465. 46,485. 80,251. 70,505.	692,742. 38,346. 35,963. 70,505.
TOTAL TO FORM 199, SCHEDULE L, LINE 12	2,007,706.	837,556.

ALLIANCE FOR JUSTICE

52-1009973

CA 199 OTHER LIABILITI	ES	STATEMENT 10
DESCRIPTION	BEG. OF YEAR	END OF YEAR
ACCRUED SALARIES AND BENEFITS DEFERRED LIABILITIES REFUNDABLE ADVANCE	189,981. 1,689,101. 0.	159,059. 1,599,660. 565,960.
TOTAL TO FORM 199, SCHEDULE L, LINE 18	1,879,082.	2,324,679.

CA 199 FUND BALANCE	S	STATEMENT 11
DESCRIPTION	BEG. OF YEAR	END OF YEAR
NET ASSETS WITHOUT DONOR RESTRICTIONS NET ASSETS WITH DONOR RESTRICTIONS	8,760,141. 3,131,472.	11,223,385. 2,503,637.
TOTAL TO FORM 199, SCHEDULE L, LINE 21	11,891,613.	13,727,022.