Annual Report

Fiscal Year 2019 - 2020



EQUAL JUSTICE AMERICA, INC FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

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JUNE 30, 2020 AND 2019

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ROGER BERMAN, CPA WILLIAM J. RANK. CPA, CFP MARK COHEN, CPA LORI LERMAN, CPA

INDEPENDENT AUDITORS' REPORT

To the Board of Trustees EQUAL JUSTICE AMERICA, INC

We have audited the accompanying financial statements of Equal Justice America, Inc., which comprise the statements of financial position as of June 30, 2020 and 2019, and the related statements of activities and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditors consider internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Equal Justice America, Inc., as of June 30, 2020 and 2019, and the results of their operations and their cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Emphasis of Matter

As discussed in Note 8 to the financial statements, in 2020, the entity received an unsecured loan in the amount of \$82,200, due to the Small Business Administration (SBA) and administered by a local bank, as part of the Coronavirus Aid, Relief and Economic Security Act (CARES Act) Paycheck Protection Program (PPP). In February 2021, the entity received notification from the SBA that the entire \$82,200 loan balance was forgiven. Our conclusion is not modified with respect to this matter.

BLOOM AND STREIT LLP Certified Public Accountants

Bloom and Street CLP

March 9, 2021

Statements of Financial Position

As of June 30,

	2020	2019
ASSETS		
Cash and Cash Equivalents	233,253	139,830
Investments	150,000	0
Prepaid Expenses	2,646	1,659
Miscellaneous Receivables	3,459	799
Promises to Give (Net)	116,928	61,845
TOTAL ASSETS	506,286	204,133
LIABILITIES AND NET ASSETS (DEFICIT))	
LIABILITIES		
Accounts Payable	12,606	15,118
Credit Card Payable	12,623	4,435
Grants Payable	401,987	488,331
Loans Payable	232,200	0
TOTAL LIABILITIES	659,416	507,884
NET ASSETS		
Without Donor Restrictions	(602,080)	(347,732)
With Donor Restrictions	448,950	43,981
TOTAL NET ASSETS (DEFICIT)	(153,130)	(303,751)
TOTAL LIABILITIES AND NET ASSETS (DEFICIT)	506,286	204,133

Statements of Activities

	2020	2019
CHANGE IN NET ASSETS WITHOUT DONOR RESTRICTIONS	\$	
REVENUE AND PUBLIC SUPPORT	,	
Contributions	506,746	1,003,029
Other Income	10,000	0
Interest Income	40	89
Net Assets Released from Restrictions	249,833	0
Total Revenue and Public Support	766,619	1,003,118
EXPENSES		
Program Expenses - Grants and Fellowships	594,849	813,829
Fundraising Expenses	270,381	263,255
General and Administrative Expenses	155,737	246,586
Total Expenses	1,020,967	1,323,670
Decrease in Net Assets Without Donor Restrictions	(254,348)	(320,552)
CHANGE IN NET ASSETS WITH DONOR RESTRICTIONS		
Contributions	654,802	43,981
Net Assets Released from Restrictions	(249,833)	0
Increase in Net Assets With Donor Restrictions	404,969	43,981
Increase (Decrease) in Net Assets	150,621	(276,571)
Net Assets (Deficit) - Beginning of Year	(303,751)	(27,180)
Net Assets (Deficit) - End of Year	(153,130)	(303,751)

Statements of Cash Flows

	2020	2019
Cash Flows From Operating Activities		
Increase (Decrease) in Net Assets	150,621	(276,571)
Adjustments to reconcile increase (decrease) in net assets to net cash provided by operating activities: Decrease (Increase) in operating assets:		
Prepaid Expenses	(987)	(1,659)
Miscellaneous Receivables	(2,660)	(799)
Promises to Give (Net)	(55,083)	92,155
Increase (Decrease) in operating liabilities:	(55,085)	92,133
Accounts Payable	(2,512)	13,668
Credit Card Payable	8,188	4,435
Grants Payable	(86,344)	183,056
Net cash provided by operating activities	11,223	14,285
Cash Flows From Investing Activities		
Purchases of Investments	(150,000)	0
Net cash used by investing activities	(150,000)	0
Cash Flows From Financing Activities		
Loan Proceeds Received	222 200	٥
Net cash provided by financing activities	232,200 232,200	0
Increase in Cash and Cash Equivalents	93,423	14,285
Cash and Cash Equivalents - Beginning of Year	139,830	125,545
oush and oush Equivalents - Deginning of Tear	139,630	125,545
Cash and Cash Equivalents - End of Year	233,253	139,830
Supplemental Disclosures:		
Interest Paid	N/A	N/A

Schedule of Functional Expenses

			General and	
	Program	Fundraising	Admin.	Total - 2020
Grants and Fellowships	430,617	0	0	430,617
Salaries	117,659	198,725	65,951	382,335
Benefit Expense	9,935	2,694	5,995	18,624
Payroll Taxes	10,148	17,913	5,728	33,789
Consulting and Professional Fees	0	0	20,099	20,099
Conferences	21	0	20,000	20,099
Mailing List	0	15,645	0	15,645
Insurance	656	656	656	1,968
Advertising and Marketing	0	4,281	4,280	8,561
Occupancy Expense	8,330	8,330	8,330	24,990
Telephone	3,361	3,360	3,361	10,082
Office Expenses and Supplies	1,004	1,004	2,315	4,323
Computer and Website Expense	11,465	11,466	11,466	34,397
Printing and Postage	1,573	6,227	1,574	9,374
Dues, Licenses and Subscriptions	80	80	183	343
Merchant and Bank Fees	0	0	25,799	25,799
Total Expenses	594,849	270,381	155,737	1,020,967

Schedule of Functional Expenses

			General and	
	Program	Fundraising	Admin.	Total - 2019
Grants and Fellowships	680,124	0	0	600 104
Salaries	•	ŭ	· ·	680,124
	88,782	171,008	141,604	401,394
Benefit Expense	5,222	2,716	8,004	15,942
Payroll Taxes	7,522	14,963	12,307	34,792
Consulting and Professional Fees	0	0	15,178	15,178
Conferences	1,050	0	0	1,050
Mailing List	0	24,629	0	24,629
Insurance	163	164	163	490
Advertising and Marketing	0	11,857	11,857	23,714
Occupancy Expense	7,610	7,611	7,612	22,833
Telephone	3,525	3,526	3,526	10,577
Office Expenses and Supplies	3,826	3,825	5,198	12,849
Computer and Website Expense	11,417	15,762	11,418	38,597
Printing and Postage	1,189	3,796	1,188	6,173
Dues, Licenses and Subscriptions	3,399	3,398	3,749	10,546
Merchant and Bank Fees	0	0	24,782	24,782
Total Expenses	813,829	263,255	246,586	1,323,670

Comparative Schedule of Functional Expenses

	2020	2019
Grants and Fellowships	430,617	680,124
Salaries	382,335	401,394
Benefit Expense	18,624	15,942
Payroll Taxes	33,789	34,792
Consulting and Professional Fees	20,099	15,178
Conferences	21	1,050
Mailing List	15,645	24,629
Insurance	1,968	490
Advertising and Marketing	8,561	23,714
Occupancy Expense	24,990	22,833
Telephone	10,082	10,577
Office Expenses and Supplies	4,323	12,849
Computer and Website Expense	34,397	38,597
Printing and Postage	9,374	6,173
Dues, Licenses and Subscriptions	343	10,546
Merchant and Bank Fees	25,799	24,782
Total Expenses	1,020,967	1,323,670

Notes to Financial Statements

June 30, 2020 and 2019

Note 1 Nature of Activities

Equal Justice America, Inc. (the organization) is a non-profit organization that provides grants to legal services that deliver civil assistance to the poor.

Note 2 <u>Summary of Significant Accounting Policies</u> Basis of Accounting

The financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Cash and Cash Equivalents

For purposes of the statements of cash flows, Equal Justice America, Inc. considers all highly liquid debt instruments, purchased with a maturity of three months or less, to be cash equivalents.

Property and Equipment

It is the organization's policy to capitalize-significant expenditures for property and equipment. Lesser amounts are expensed. Purchased property and equipment is capitalized at cost. Donations of property and equipment are recorded as contributions at their estimated fair value. Such donations are reported as unrestricted contributions unless the donor has restricted the donated asset to a specific purpose. Assets donated with explicit restrictions regarding their use and contributions of cash that must be used to acquire property and equipment are reported as restricted contributions. Depreciation is being computed by the straight line method over five to seven years for accounting and income tax purposes.

Promises to Give

Unconditional promises to give (pledges), less an allowance for uncollectible amounts where applicable, are recognized as increases in net assets without donor restrictions when the pledge is made.

Notes to Financial Statements

June 30, 2020 and 2019

Note 2 <u>Summary of Significant Accounting Policies</u> - continued Contributed Services

No amounts have been reflected in the financial statements for contributed services. Many individuals volunteer their time to assist the organization, but these services do not meet the criteria for recognition as contributed services.

Net Assets

Net assets of the organization are classified based upon the existence or absence of donor-imposed restrictions, as follows:

Net Assets without Donor Restrictions

Net assets that are not subject to donor-imposed stipulations and are therefore, available for the general operations of the organization.

Net Assets with Donor Restrictions

Net assets that are subject to donor-imposed stipulations that will be met either by actions of the organization and/or the passage of time. As such restrictions are satisfied, net assets with donor restriction are reclassified to net assets without donor restriction in the accompanying statement of activities as net assets released from restrictions.

Contributions

Contributions are reported at fair value at the date the contribution is received. Contributions received are recorded as net asset with donor restrictions if they are received with donor stipulations that limit the use of the donations.

Functional Allocation of Expenses

The financial statements report certain categories of expenses that are attributable to more than one program or supporting function. Therefore, these expenses require allocation on a reasonable basis that is consistently applied. The expenses that are allocated include expenses related to employee compensation and benefits, occupancy expenses, office expenses and insurance which are all allocated on the basis of estimates time and effort.

Notes to Financial Statements

June 30, 2020 and 2019

Note 2 <u>Summary of Significant Accounting Policies</u> - continued Tax Status

Equal Justice America, Inc. is a Not-For-Profit organization exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code and, therefore, has made no provision for federal income taxes on the accompanying financial statements. In addition, Equal Justice America, Inc. has been determined by the Internal Revenue Service not to be a "Private Foundation" within the meaning of Section 509 (a) of the Internal Revenue Code.

Note 3 Concentrations of Credit Risk

Equal Justice America, Inc. maintains various bank and money market accounts that at times may exceed insured credit limits. The organization has not experienced any losses in such accounts and believes it is not exposed to any significant credit risk with respect to such balances.

Note 4 <u>Investments and Fair Value Measurements</u>

Investments are stated at fair value and consisted of the following at December 31:

	<u>2020</u>	<u> 2019</u>
US Government Securities	-0-	-0-
Mutual Funds	150,000	-0-
Equities	<u>-0-</u>	<u>-0-</u>
Total	<u>150,000</u>	<u>-0-</u>

Purchases of marketable securities are initially recorded at cost; donated securities are recorded at fair value on the date of the contribution. Realized and unrealized gains and losses are recorded separately in the statement of activities. Investment fees have been netted against investment income in the statement of activities.

The organization values its investments at fair value, based on prices provided to it by its custodian. In determining fair value, the highest priority is given to quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements).

Notes to Financial Statements

June 30, 2020 and 2019

Note 4 <u>Investments and Fair Value Measurements</u> - continued

The three levels of the fair value hierarchy are as follows:

Level 1: Quoted prices (unadjusted) for identical investments in active markets

Level 2: Other significant observable inputs (including quoted prices for similar investments, interest rates, credit risk, etc.)

Level 3: Significant unobservable inputs

The following is a summary of the inputs used in valuing the organization's investments at December 31:

	<u>2020</u>	<u>2019</u>
Level 1	150,000	-0-
Level 2	-0-	-0-
Level 3	<u>-0-</u>	<u>-0-</u>
Total	<u>150,000</u>	<u>-0-</u>

The organization invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the organization's statement of financial position.

Note 5 Promises to Give (Net)

Promises to Give (Net) are recorded when the pledge is made by the donor. As of June 30, 2020 and 2019, the organization has received pledges of \$160,935 and \$85,040, respectively, and has provided an allowance for doubtful accounts on these promises of \$44,007 and \$23,195, respectively, for amounts not expected to be collected. All other pledges are expected to be received within one year.

Notes to Financial Statements

June 30, 2020 and 2019

Note 6 Property and Equipment

Property and Equipment consists of the following at June 30:

	<u>2020</u>	<u>2019</u>
Furniture and Equipment	1,185	1,185
Machinery and equipment	<u>28,616</u>	<u> 28,616</u>
Subtotal	29,801	28,801
Less: Accumulated depreciation	<u>29,801</u>	<u>28,801</u>
	<u>-0-</u>	<u>-0-</u>

Property and equipment is fully depreciated for the year ended June 30, 2020.

Note 7 <u>Grants Payable</u>

The organization provides Grants, which at times provide for payments extending over a number of years. As of June 30, 2020 and 2019, \$130,000 and \$156,000 of Grants Payable are to be paid beyond a period of twelve months from the balance sheet date, during the fiscal year ended June 30, 2022 and 2021, respectively.

Note 8 Loans Payable

On April 20, 2020 the organization was granted a loan from Village Bank, N.A. in the amount of \$82,200, pursuant to the Paycheck Protection Plan (the "PPP") under Division A, Title 1 of the CARES Act, which was enacted March 27, 2020.

The loan which was in the form of a note dated April 20, 2020 issued by the borrower, matures April 20, 2022 and bears interest at a rate of 1% per annum, payable monthly commencing on November 20, 2020 with monthly payments of approximately \$4,627. The note may be prepaid by the borrower at any time prior to maturity with no prepayment penalties. Funds from the loan may only be used for payroll costs, costs used to continue group health care benefits, mortgage payments, rent, utilities and interest on other debt obligations incurred before February 15, 2020. The organization intends to use the entire loan amount for qualifying expenses. Under the terms of the PPP, certain amounts of the loan may be forgiven if they are used for qualifying expenses as described in the CARES Act.

On February 26, 2021, the organization received notification from the SBA that the entire loan balance of \$82,200 has been forgiven.

Notes to Financial Statements

June 30, 2020 and 2019

Note 8 <u>Loans Payable</u> - continued

On May 21, 2020 the organization was granted an Economic Injury Disaster loan through the U.S. Small Business Administration in the amount of \$150,000. The loan bears interest at a rate of 2.75% and matures May 21, 2050. Monthly payments of \$641 are due beginning May 2021 and will be applied first to interest and the remainder to the outstanding principal.

Note 9 Net Assets with Donor Restrictions

Net assets with donor restrictions are subject to the following purpose or time restrictions.

Subject to purpose restrictions:
Specific university/college fellowships and grants

Total net assets with donor restrictions

2020 2019

448,950 43,981

Note 10 <u>Liquidity and Availability of Financial Assets</u>

The following reflects the organization's financial assets as of the balance sheets date, reduced by amounts not available for general use because of contractual or donor-imposed restrictions within one year of the balance sheets date.

Financial Assets at year end	<u>2020</u> 503,640	<u>2019</u> 202,474
Less those unavailable for general expenditures within one year, due to: Donor-restrictions for specific university/college fellowships and grants	(<u>448,950</u>)	(<u>43,981</u>)
Financial Assets available to meet cash needs for general expenditures within one year	54,690	158,493

As part of its liquidity management, the organization maintains excess cash in a savings account and mutual funds.

Notes to Financial Statements

June 30, 2020 and 2019

Note 11 Operating Lease

The organization leases office space under an operating lease which ran from September 1, 2018 through August 31, 2019. Since that time the organization leases the space monthly. The monthly rental expense is approximately \$1,912 per month.

Note 12 Subsequent Events

Management has evaluated subsequent events through March 9, 2021, the date at which the financial statements became available for issuance. No events have occurred that would require adjustments to, or disclosure in, the financial statements.

Form 8879-EO

IRS e-file Signature Authorization for an Exempt Organization

7/01 2019, and ending 6/30 20 20 For calendar year 2019, or fiscal year beginning ▶ Do not send to the IRS. Keep for your records. Department of the Treasury ▶ Go to www.irs.gov/Form8879EO for the latest information. Internal Revenue Service Name of exempt organization Employer identification number EOUAL JUSTICE AMERICA, INC 13-3708596 Name and title of officer DAVID SANTACROCE PRESIDENT Part I Type of Return and Return Information (Whole Dollars Only) Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return, If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. 1a Form 990 check here ▶ X b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1b 1,171,588 2a Form 990-EZ check here D Total revenue, if any (Form 990-EZ, line 9) 2b 3a Form 1120-POL check here b b Total tax (Form 1120-POL, line 22)

4a Form 990-PF check here b b Tax based on investment income (Form 990-PF, Part VI, line 5)

4b 5a Form 8868 check here ▶ □ b Balance Due (Form 8868, line 3c) 5b □ Part II Declaration and Signature Authorization of Officer Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund, If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only lauthorize BLOOM AND STREIT LLP to enter my PIN as my signature FRO firm name Enter five numbers, but do not enter all zeros on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. WILLIAM J RANK 04/22/21

ERO Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form 8879-EO (2019)

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.

inte			est information.		The section
٨		alendar year, or tax year beginning 07/01/19, and ending 06/30 C. Name of organization			
	Order appointe Address dance	EQUAL JUSTICE AMERICA, INC			Gentification number
		Doing business as			08596
		Number and street (or P.O. box if mail is not delivered to smooth expens) 13540 EAST BOUNDARY ROAD, BLDG 2		E Constitution	
		City or town, state or province, country, and ZIP or foreign postal code			
П		MIDIOPHIAN VA 23112			Andrew Company
		F Name and address of principal offices			osomer [] Yes [X] N
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Activities & Community	ASSIX FELLO 2 Check the 3 Number of 4 Number of 5 Total num 6 Total num 7a Total unre	STANCE TO THE POOR AND DISADVANTAGED. THE GRANTS DWSHIPS FOR LAW SCHOOL STUDENTS. a box I if the organization discontinued its operations or disposed of more than if voting members of the governing body (Part VI, line 1a) if independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1b) independent voting members of the governing body (Part VI, line 1c) independent voting members of the governing body (Part VI, line 1c) independent voting members of the governing body (Part VI, line 1c) independent voting members of the governing body (Part VI, line 1c) independent voting members of the governing body (Part VI, line 1c) independent voting members of the governing body (Part VI, line 1c) independent voting members of the governing body (Part VI, line 1c) independent voting members of the governing body (Part VI, line 1c) independent voting members of the governing body (Pa	ELIVER LEG ARE USED 25% of its net as	TO SPONS 3 4 5 6 7a	
	free constants	ated business taxable income from Form 990-T, line 39	Free Ye		Control Year
		ons and grants (Part VIII, line 1h) service revenue (Part VIII, line 2g)	1.04	7,010	1,171,548
		It income (Part VIII, column (A), lines 3, 4, and 7d)			40
ĸ.	11 Other revo	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
	12 Total reve	nue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) d similar amounts paid (Part IX, column (A), lines 1-3)	1,04		1,171,598
		aid to or for members (Part IX, column (A), lines 1–3)		3,006	430,617
	15 Salanes, c	other compensation, employee benefits (Part IX, column (A), tines 5-10)	45;	7,128	434,748
		al fundraising fees (Part IX, column (A), line 11e)			0
		raising expenses (Part IX, column (D), line 25) ► 270, 381 enses (Part IX, column (A), lines 11a–11d, 11f–24e)		,418	
	18 Total expe	nses. Add lines 13–17 (must equal Part IX, column (A), line 25)		.552	155,602 1,020,967
	19 Revenue l	ess expenses. Subtract line 18 from line 12	- 1	453	150,621
	20 Total asse	ts (Part X, line 16)	Indiana of Cu		506, 286
		lies (Part X, line 26)	2 communication and a second an		659,416
		or fund balances. Subtract line 21 from line 20 nature Block			-153,130
***************************************	***************************************	fracture ISIOCK Briury, I declare that I have examined this return, including accompanying schedules and states			
bu	s, correct, and co	nplete. Decignation of preparer (other than officer) is based on all information of which prepare	Charley Control		or being the
		notice of officer		5/1a	P/a/
ilgi Ior					
		so or pontinarne and title			
	4.4	Propert's signature	l de la companya de		II PNN
	Farms from	J RANK BLOOM AND STREIT LLP	100		
loo	Only	2900 WESTCHESTER AVENUE, SUITE 303		es P	13-1922464
		▶ PURCHASE, NY 10577-2537	J.		14-253-8484
or F	aperwork Regue	this return with the preparer shown above? (see instructions) tion Act Notice, see the separate instructions.			Yes No
ALC:				10 TO 10	990

	m 990 (2019) EQ						13-	·370859	96				Page 2
Р		ment of P											177
_					onse or n	ote to any lii	ne in this	Part III					X
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2	Did the organiza	tion undertake	any signific	cant program	services dur	ing the year wl	nich were n	not listed on	the				
	prior Form 990 c	or 990-EZ?										Yes	X No
	If "Yes," describe	these new s					*********		*******		0.15155510	. — .	
3	Did the organiza	tion cease cor	nducting, or	make signific	cant changes	in how it cond	lucts, anv r	orogram					
	services?			_	_			_				Yes	X No
	If "Yes," describe	these change	es on Sche	dule O.						201201001		. 🗀 😘 (
4	Describe the org	•			hments for e	ach of its three	largest pro	oaram sen <i>i</i> i	res as m	neasured	hv		
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Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 complete Schedule A X 2 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Χ candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) X election in effect during the tax year? If "Yes," complete Schedule C, Part II 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 5 5 X assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 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 X 6 "Yes," complete Schedule D, Part I 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes, complete Schedule D, Part III 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a 9 custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or Χ debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 or in quasi endowments? If "Yes," complete Schedule D, Part V 10 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. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 11a complete Schedule D. Part VI b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more 11b of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c 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 d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets X 11d reported in Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes." and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 Χ foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 X for any foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 19 If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.

Pa	art IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
~	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
·	to defease any tax-exempt bonds?	240		
٨	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c	-	
d 25-		24d	-	
25a				17
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b	_	X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these		1	
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part	0115		2 369
	IV instructions, for applicable filing thresholds, conditions, and exceptions):	68.		1 7 3
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		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 "Ves." complete Schedule M	30		Х
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,"	Ů.		
-		32		X
33	complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			43
00	andiana 201 7701 2 and 201 7701 22 K Was I served to Caledida D. Dart I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33	=	-23
J-7		34		Х
250	or IV, and Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?			X
35a b		35a	-	
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	256		
~~	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			v
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38		<u>X</u>
Pa	ort V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			Ш
	1 (15)		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	Part	100	100
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	was	0.00	1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1000	1 18	Name of the last
	reportable gaming (gambling) winnings to prize winners?	1c	X	
DAA		For	n 990	(2019)

Pa	irt V Statements Regarding Other IRS Filings and Tax Compliance (continu	ued)			
				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		1000	4 8	198
	Statements, filed for the calendar year ending with or within the year covered by this return	2a 18	107. 3	SIL.	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return		2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)		SIL	100
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other				
	a financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
b	If "Yes," enter the name of the foreign country ▶			876	1
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accounts (FBAR)		91500	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	_	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		_	X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	**************************************	. 5c		_
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e			3.7
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or			
	gifts were not tax deductible?		6b	U = 1 =	
7	Organizations that may receive deductible contributions under section 170(c).		PR	T 480	N. Are
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	joods	15 (HI)	military.	
	and services provided to the payor?		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		. 7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	S	_		
	required to file Form 8282?	·	7c		6.
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	7.	O. P.	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of				-
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	A Pril 4 A L 4 A A A A A A A A A A A A A A A A	7f	_	
9	If the organization received a contribution of qualified intellectual property, did the organization file Follows		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza	0.000	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine	a by the	0	HINDSA.	
	sponsoring organization have excess business holdings at any time during the year?		. 8		
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?		9a	Company of the last of the las	
a	Did the sponsoring organization make any taxable distributions under section 4900? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?				
b 10	Section 501(c)(7) organizations. Enter:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	36	Digi-	219=
	Initiation fees and capital contributions included on Part VIII, line 12	10a	m)+(=====		1 91
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	107		
11	Section 501(c)(12) organizations. Enter:	100	100		
''	Constitution from the state of the school described as	11a			15.0
b	Gross income from other sources (Do not net amounts due or paid to other sources	11a	200		e value
D	against amounts due or received from them.)	11b	=185	10119	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	180	Page 1	J.C.
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120		TO THE REAL PROPERTY.	
а	le the experiencian licensed to incur qualified health plans in more than one state?		13a		
-	Note: See the instructions for additional information the organization must report on Schedule O.		1500	Court	16
b	Enter the amount of reserves the organization is required to maintain by the states in which				
-	the organization is licensed to issue qualified health plans	13b		150	1
С	Enter the amount of reserves on hand	13c	- 10		135
14a	Did the organization receive any payments for indoor tanning services during the tax year?	100	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				
	excess parachute payment(s) during the year?		15		X
	If "Yes," see instructions and file Form 4720, Schedule N.	e (00) e (00) e (00) e (00)		77.7	
16	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.			1971	12

P	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes or	_	•			ns
	Check if Schedule O contains a response or note to any line in this Part VI	ni ocn	<i>Juano</i> 0. 00	,0 11131	7 4000	 X
Sec	ction 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	5	136		STA.
	If there are material differences in voting rights among members of the governing body, or			N.E.		1
	if the governing body delegated broad authority to an executive committee or similar				G	
	committee, explain on Schedule O.			3 3005		
b	Enter the number of voting members included on line 1a, above, who are independent	1 _b	5	She !		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1.2		357	304	-31
_	any other officer, director, trustee, or key employee?			2		Χ
3	Did the organization delegate control over management duties customarily performed by or under the direct			_		
ŭ	supervision 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 990 was filed		*********	4		X
		5555555	comentary	5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			6		X
6	Did the organization have members or stockholders?		******	10		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					V
	one or more members of the governing body?			7a		_X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			75		Х
0	stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	a by the	follouing	7b		$\hat{}$
8		ar by trie	e following:	0-	v	
a	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?		********	8b	\triangle	_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			ایا		Х
500	tion B. Policies (This Section B requests information about policies not required by the Inter-	nal Do	wonuo Co	I a		
Sec	tion b. Folicies (This Section b requests information about policies not required by the litter	nai ixe	venue CC	ue.)	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	162	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	* 0 0 0 0 0 0		IUa		
D	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	the for	m?	11a		Х
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	i ille loll	0.000	IIa	Diese.	Λ
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	o to con	flicte?	12b	X	_
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	5 10 001	illicis:	120	Λ	
С	describe in Schedule O how this was done			120	X	
13	Did the organization have a written whistleblower policy?	***		12c	X	
	Did the organization have a written document retention and destruction policy?	* * * * * * *	*****		X	_
14 15	Did the process for determining compensation of the following persons include a review and approval by	******	******	14	Λ	100
3	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				57 3	1
_	The experience CEO Experience Dispeter or ten propagation official			150	Х	
a	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization			15a	Λ	v
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			15b	10000	X
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			ATS V		
l6a				AC-	INDUSTRAL I	V
_	with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			16a	100	X
Б	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			128		
	organization's exempt status with respect to such arrangements?			16b	G35=53	NAME OF TAXABLE PARTY.
Sec	tion C. Disclosure			100		_
7	List the states with which a copy of this Form 990 is required to be filed ► CA, CT, DC, FL, IL, MA, MD, N	NE MI	MN NC N	IV OF	1	_
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (S		X D = D 0 7 4 8 6 = 0 P 0	11,01	0 0 0 0 0 0	
U	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	COLIDIT O	01(6)			
	Own website Another's website X Upon request Other (explain on Schedule O)					
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of inter	act notic	n and			
	financial statements available to the public during the tax year.	est holl	y, ariu			
20	State the name, address, and telephone number of the person who possesses the organization's books and reco	rde 🕨				
	AN RUBEN 13540 EAST BOUNDARY RD	us 🚩				
	IDLOTHIAN VA 2311	2	804	-74	4-4	200
- 4	V/1 ZJ11	_	001	/ 1	_ 14	

Part VII	Compensation of Office	rs, Directors	, Trustees,	, Key	Employees,	Highest	Compensated	Employees,	and
	Independent Contracto	'S							

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See 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 and/or Box 7 of Form 1099-MISC) 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 instructions for the order in which to list the persons above.

(A) Name and litle	(B) Average hours per week (list any	bo	x, unle	Posi check ss pe	more rson i directo	than on s both a or/trustee	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(1) DAN RUBEN										
EXECUTIVE DIRECTOR	40.00	X						102,804	0	С
(2) SONIA MARQUEZ										
DIRECTOR	2.00	X						0	0	0
(3) ELISE RIVERS	0.00									
DIRECTOR	2.00	X						0	o	C
(4) LISA TRACY	0.00	1								
	2.00									
DIRECTOR	0.00	X		_		\vdash		0	0	0
(5) DAVID SANTACROC	2.00									
PRESIDENT	0.00	X		Х				0	0	
(6) LARRY ZABAR										
TODA OUNDO	2.00	37		37				o	0	C
TREASURER (7)	0.00	X		X		\vdash			0	
(9)		-		_		\vdash	-			
(8)										
(9)										
		4								
10)										
11)		\vdash				\vdash				
										000

(A) Name and lille	(B) Average hours per week (list any hours for related organizations below dotted line)	bo	x, unle ficer a	Pos check ess pe	erson i	than of the state	an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	or	(F) imated a of othe compensa from th ganizatior ed organ	er Ition e n and
	es e le colocia de la colo											
F #5554444 (524-60) #554444 (504-60) #504444												
CHARLES BELLEVIA DE LA CONTRACTOR DE COMP												
. Personal and a second and a second as	5552573434856644											
	15-07-511-03-70-70-70-70								= =			
1b Subtotal c Total from continuation shee	ts to Part VII, S	ecti	on A	100		8454	•	102,804				
d Total (add lines 1b and 1c) Total number of individuals (increportable compensation from	cluding but not li	mited					bove	102,804) who received more than	\$100,000 of			
 3 Did the organization list any for employee on line 1a? If "Yes," 4 For any individual listed on line organization and related organi individual 5 Did any person listed on line 1a for services rendered to the organization B. Independent Contractor 	complete Sched 1a, is the sum izations greater a receive or acc ganization? If "Y	of rethan	for porta \$15	such able 0,00 ensa	com com 0? If	ividu pens "Ye:	al sation s," co	n and other compensation of the complete Schedule J for such your lated organization or	from the ch individual		3 4 5	Yes No X X X
Complete this table for your five compensation from the organization.	e highest compe ation. Report co	ensal mpe	ted i	ndep on fo	ende	ent c e cal	ontra enda	ar year ending with or withi	n the organization's tax ye	ear.		(C)
Name and t	(A) business address							Descripti	(B) on of services		Comp	(C) pensation
Total number of independent co	ontractors (includ	ding	but r	not li	mite	d to	those	e listed above) who				· 原
received more than \$100,000 o	f compensation	from	the	orga	aniza	ition	>		0		Form	990 (2019

Pa	rt V	III Statement of Revenue Check if Schedule O conta	aine a	response or note t	o any line in this	Part VIII		
_		Check if Collecting C collection	anio a	response of note t	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1a	Federated campaigns	1a		- 12-13-13-13	- Transition		
ran	b	Membership dues	1b			Charles and		
Amc	С	Fundraising events	1c					
ar A	d	Related organizations	1d		No. of all vision			
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grants (contributions)	1e	10,000	THE RESERVE			
ion	f	All other contributions, gifts, grants,				S WEST ST		
but		and similar amounts not included above	1f	1,161,548				
d O	g	Noncash contributions included in lines 1a-1f	1g \$					
S E	h	Total, Add lines 1a–1f			1,171,548			
				Business Code				
e	2a	· · · · · · · · · · · · · · · · · · ·						
Program Service Revenue	b							
n S	С		0.0000000000000000000000000000000000000	0.000000				
Re	d			355848XX				
Pro	е							
		All other program service revenue		-		and the second	and the state of t	
_		Total. Add lines 2a–2f						T
	3	Investment income (including dividend	is, intere	est, and	40	40		1
	4	other similar amounts) Income from investment of tax-exemp	t bond r		-10	10		
	5	Royalties						
	,	(i) Real		(ii) Personal		Sylvania, de la		
	6a							
	b	Less: rental expenses 6b						
	c	Rental inc. or (loss) 6c						
	d	Net rental income or (loss)						
	7a	Gross amount from (i) Securities	3	(ii) Other				1 2 x 2 2 x 3 6
		sales of assets other than inventory 7a				10 K3 (4 12 15 16		
P	b	Less: cost or other						(A) 200 (A)
Other Revenue		basis and sales exps. 7b						
Re	¢	Gain or (loss) 7c			TR The New St			
ler	d	Net gain or (loss)						
ठ	8a	Gross income from fundraising events						
		(not including \$						THE STATE OF THE S
		of contributions reported on line 1c).			THE RESERVE	A CONTRACTOR OF THE PARTY OF TH		The same of the same of
		See Part IV, line 18	8a		The state of the s	CHECK THE WHITE		
		Less: direct expenses	8b					A STATE OF THE PARTY OF
		Net income or (loss) from fundraising	events					F 6 San Sy 1 - 15
	9a	Gross income from gaming activities.	,				THE THE S	
	١.	See Part IV, line 19	9a 9b	-				
		Less: direct expenses				S 11 2 3 1/10 191 1/4		
		Net income or (loss) from gaming act Gross sales of inventory, less	VILLES	mananan P			rei estadores	THE RESERVE OF THE RESERVE OF
	Iva	returns and allowances	10a					
	h	Less: cost of goods sold	10b			A THINK OF SHE		
		Net income or (loss) from sales of inv		▶				
220		The state of the sale and the sale of the		Business Code		to British		
sno	11a							
ane	b	5003840050000050000000000000000000000000		******				
Sells	c	TOTAL CONTRACTOR AND	15175115					
Miscellaneous Revenue	d	All other revenue		11000000				
	е	Total. Add lines 11a-11d	CONTRACTOR OF THE PARTY OF THE					
		Total revenue. See instructions	15075-1945-0	D	1,171,588	40	0	0

Part IX Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a response			olete column (A).	П
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				or free play to the first
	and domestic governments. See Part IV, line 21	430,617	430,617		
2	Grants and other assistance to domestic		ja di	ALL STREET	Assertance Vigan
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign		10		
	organizations, foreign governments, and foreign		10		
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				STATE OF THE PARTY.
5	Compensation of current officers, directors,				
	trustees, and key employees	102,804	51,402	25,701	25,701
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	279,531	66,257	40,250	173,024
8	Pension plan accruals and contributions (include			10,200	170/021
	section 401(k) and 403(b) employer contributions)		1		
9	Other employee benefits	18,624	9,935	5,995	2 694
10	Payroll taxes	33,789	10,148	5,728	2,694 17,913
11	Fees for services (nonemployees):	337.03	10/110	3/120	11,013
a	Management				
b	Legal	12,215		12,215	
c	LegalAccounting	7,884		7,884	
d	Lobbying	7,004		7,004	
e	Lobbying Professional fundraising services. See Part IV, line 17	86			
f	Investment management fees			Det gat if he states	
g g	Other. (If line 11g amount exceeds 10% of line 25, column				
9	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	8,561		4,280	4 201
13	Office expenses	4,323	1,004	2,315	1,004
14	Office expenses Information technology	34,397	11,465	11,466	
15	Povalties	34,337	11,405	11,400	11,466
16	Royalties	24,990	8,330	8,330	8,330
17	Occupancy	24,550	0,330	0,330	0,330
18	Travel Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	21	21		
20	Internet		21		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,968	656	656	CE C
24	Other expenses. Itemize expenses not covered	1,500	030	930	656
2-4	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	MERCHANT AND BANK FEES	25,799		25,799	DEVINED IN STATE
	MAILING LIST			23, 199	15 645
b	TELEPHONE	15,645	2 261	2 261	15,645
c c		10,082	3,361	3,361	3,360
d	PRINTING & POSTAGE	9,374	1,573	1,574	6,227
	All other expenses	343	80	183	80
	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	1,020,967	594,849	155,737	270,381
DAA	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				5 990 2020

-		(2019) EQUAL JUSTICE AMERICA,	INC	13-	3/08596		Page 11
Pa	rt X		to new fine in	Hois Doct V			
		Check if Schedule O contains a response or note	to any line in	uns Part X	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			139,830	2	233,253
1	3	Pledges and grants receivable, net			61,845	3	116,928
1	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or former			A PROPERTY OF THE PARTY.	1 50	
1		trustee, key employee, creator or tounder, substantial c	ontributor, or :	35%			
1		controlled entity or family member of any of these person	การ			5	
1	6	Loans and other receivables from other disqualified per	sons (as defin	ned			
١		under section 4958(f)(1)), and persons described in sec	ction 4958(c)(3	3)(B)		6	
	7	Notes and loans receivable, net				7	
	8	constrained and the second sec				8	
	9				1,659	9	2,646
ı	10a	Land, buildings, and equipment: cost or other			#31. A		
1		basis, Complete Part VI of Schedule D	10a	59,602			
İ	b	Less: accumulated depreciation	10b	59,602		10c	
1	11	Investments—publicly traded securities				11	150,000
ì	12	Investments—other securities. See Part IV, line 11	4.W240000000000000	LOVO LES VIVIENS NA VEN		12	
ı	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
١	15	Other assets. See Part IV, line 11			799		3,459
	16	Total assets. Add lines 1 through 15 (must equal line 3		204,133		506,286	
T	17	Accounts payable and accrued expenses			19,553	17	25,229
1		Grants payable			488,331	18	401,987
1	19	Deferred revenue				19	
1	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV	of Schedule D			21	
1	22	Loans and other payables to any current or former offic				er and e	A SANGER LEADING
		trustee, key employee, creator or founder, substantial c		35%			
		controlled entity or family member of any of these person				22	2000-10-10-10-10-10-10-10-10-10-10-10-10-
	23	Secured mortgages and notes payable to unrelated thir				23	
- 1		Unsecured notes and loans payable to unrelated third p		***************************************		24	82,200
1		Other liabilities (including federal income tax, payables	5,000,000,000				
1		parties, and other liabilities not included on lines 17-24)					
1		(0) 11 5				25	150,000
1	26	Total liabilities. Add lines 17 through 25			507,884	26	659,416
T		Organizations that follow FASB ASC 958, check her	e ▶ X				
3		and complete lines 27, 28, 32, and 33.	_	1		and la	
	27	Not according to the standard and added to the			-347,732	27	-602,080
	28	Net assets with donor restrictions			43,981	28	448,950
		Organizations that do not follow FASB ASC 958, ch					
		and complete lines 29 through 33.					
5	29	Capital stock or trust principal, or current funds	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		29		
3	30	Paid-in or capital surplus, or land, building, or equipmer				30	
2	31	Retained earnings, endowment, accumulated income, of				31	
	32	Total net assets or fund balances			-303,751	32	-153,130
Z	33	Total liabilities and net assets/fund balances			204,133	33	506,286

Fom	990 (2019) EQUAL JUSTICE AMERICA, INC 13-3708596			Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,1	71,	588
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,02	20,	967
3	Revenue less expenses, Subtract line 2 from line 1	3	1	50,	621
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-30	03,	751
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	-1	53,	130
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		11.5		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		100		0108
	Schedule O.		25		2
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		W.		
	reviewed on a separate basis, consolidated basis, or both:		F183		
	Separate basis Consolidated basis Both consolidated and separate basis		100		18
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		1884		
	separate basis, consolidated basis, or both:		18		
	X Separate basis Consolidated basis Both consolidated and separate basis		0.00	9.38	1000
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O		72 162	17.5	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Single Audit 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	MATERIAL PROPERTY.			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Fon	n 990	(2019)

SCHEDULE A (Form 990 or 990-EZ)

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.

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization ► Attach to Form 990 or Form 990-EZ.

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

Employer identification number

			EQUAL	JUSTIC	E AMERICA,]	INC			13-37	08596
P	art I	Reas	on for Publ	ic Charity	Status (All organiza	ations	must co	mplete	this part.) See instruct	ions.
The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)										
1		A church, cor	nvention of chu	rches, or ass	ociation of churches des	scribed in	n sectio r	170(b)(I)(A)(i).	
2		A school des	cribed in section	on 170(b)(1)(A)(ii). (Attach Schedule	E (Form	990 or 9	90-EZ).)		
3					ce organization describe				iii).	
4	\Box	A medical re	search organiza	ation operated	d in conjunction with a h	ospital d	lescribed	in section	n 170(b)(1)(A)(iii). Enter the	e hospital's name.
	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:									
5	\Box		0.0000000000000000000000000000000000000	the benefit o	of a college or university	owned i	or operati	ed hv a o	overnmental unit described i	n
•			(b)(1)(A)(iv). (C			Omica .	ог орогас	.a ., a g	Overmiental and accompany	
6					overnmental unit describ	ned in s	ection 1	70(b)(1)(A)(v)	
7	Н			-					unit or from the general put	alic
•	ш	0		•	omplete Part II.)	pport no	m a gove	, , , , , , , , , , , , , , , , , , ,	and or morn the general par	
8					170(b)(1)(A)(vi). (Comple	ete Part	11.)			
9								ed in coni	unction with a land-grant co	lleae
		_						-	y, and state of the college of	_
		university:				- NOANCETS				
10	X	An organizati	ion that normall	y receives: (1) more than 33 1/3% of	its supp	ort from	contributi	ons, membership fees, and	gross
		receipts from	activities relate	ed to its exem	pt functions—subject to	certain	exception	s, and (2) no more than 33 1/3% of i	ts
			9						511 tax) from businesses	
			· ·		0, 1975, See section 50					
11	Н	0	•		exclusively to test for pul		-			
12	Ш	•			-				ns of, or to carry out the pur	•
									509(a)(2). See section 509(and complete lines 12e, 12f, a	
	2			-					organization(s), typically by g	
	а			'	ver to regularly appoint o					pving
					omplete Part IV, Sectio			0, 0,0		
	b	Type II.	A supporting or	ganization su	pervised or controlled in	connec	tion with	its suppo	rted organization(s), by havid	ng
		control or	r management	of the suppor	ting organization vested	in the s	ame pers	ons that	control or manage the suppo	orted
		organizat	ion(s). You mu	ist complete	Part IV, Sections A and	d C.				
	С								, and functionally integrated	with,
				. , ,	structions). You must co	-				
	d								n with its supported organiza requirement and an attentive	• •
			,	-	nust complete Part IV,		-		•	511655
	е		,		-				a Type I, Type II, Type III	
					n-functionally integrated				,ps ., .,ps, .,ps	
	f	Enter the nur	mber of support	ted organizati	ons					
	g	Provide the f	ollowing information	ation about th	ne supported organizatio	n(s).	Table of Merc	TC/WWCT/0/10	aracairacanninger caiceacheanneann	ESENSIANS STEED
(i) Nami	e of supported	(ii) E	IN	(iii) Type of organizatio	on		organization	(v) Amount of monetary	(vi) Amount of
	org	anization			(described on lines 1–1			Jr governing	support (see	other support (see
					above (see instructions	5))	Yes		instructions)	instructions)
/A)							162	No		
(A)										
/B)	_									
(B)										
(C)										
(C)							1			
(D)										
(D)										
(E)	-									
\- <i>/</i>										
_							Di Xili			1
			1000					The state of		(1)

P	art II Support Schedule for O	rganizations I	Described in S	Sections 170(b	o)(1)(A)(iv) and	170(b)(1	(A)(vi)
	(Complete only if you che	cked the box or	n 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 test	s listed below,	please complet	e Part III.)	0)	
Sec	tion A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 201	9	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4	125 Ref. 1197		CONTRACTOR			grant in	
	tion B. Total Support							
Caler	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 201	9	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		0					
11	Total support. Add lines 7 through 10	Con Service		Maritin Wilson			Total Cons	
12	Gross receipts from related activities, etc.	(see instructions)	**************************************			OF SMAILWANNESS	12	
13	First five years. If the Form 990 is for the	organization's first	, second, third, for	urth, or fifth tax ye	ar as a section 501	(c)(3)		
	organization, check this box and stop here	•		-		. , . ,		▶□
Sec	tion C. Computation of Public Su		tage					
14	Public support percentage for 2019 (line 6,	column (f) divided	by line 11, colum	n (f))	at operation of the section	oward to decimate a	14	%
15	Public support percentage from 2018 Sche		- 44				15	%
16a	33 1/3% support test-2019. If the organi	zation did not ched	k the box on line	13, and line 14 is	33 1/3% or more, o	heck this		
	box and stop here. The organization quali	fies as a publicly s	supported organiza	ition		navetera necesso	ansenio ne	
b	box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check							
	this box and stop here. The organization qualifies as a publicly supported organization							
17a	10%-facts-and-circumstances test—201	If the organization	on did not check a	box on line 13, 16	Sa, or 16b, and line	14 is		
	10% or more, and if the organization meet	s the "facts-and-ci	rcumstances" test,	check this box ar	nd stop here. Expla	ain in		
	Part VI how the organization meets the "fa organization				as a publicly supp			►□
b	10%-facts-and-circumstances test—201	8. If the organization	on did not check a	box on line 13, 16	Sa, 16b, or 17a, an	d line		A CONTRACTOR IN THE CONTRACTOR
	15 is 10% or more, and if the organization	meets the "facts-a	ind-circumstances'	test, check this b	ox and stop here.			
	Explain in Part VI how the organization me							
	supported organization							
18	Private foundation. If the organization did							. \Box
	instructions						66000000	(55********

990 or 990-EZ) 2019 EQUAL JUSTICE AMERICA, INC
Support Schedule for Organizations Described in Section 509(a)(2) Part III

(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.)

	tion A. Public Support dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	70,354	63,819	42,793	1,047,010	1,171,548	2,395,524
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	13,871	28,432	15,565	89	40	57,997
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	84,225	92,251	58,358	1,047,099	1,171,588	2,453,521
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	5,000	29,048	5,000	5,467		44,515
С	Add lines 7a and 7b	5,000	29,048	5,000	5,467		44,515
8	Public support. (Subtract line 7c from line 6.)						2,409,006
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	84,225	92,251	58,358	1,047,099	1,171,588	2,453,521
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	10,336	11,856	13,158			35,350
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	10,336	11,856	13,158			35,350
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,	04 561	104 107	71 516	1,047,099	1 171 500	2,488,871
14	and 12.) First five years. If the Form 990 is for the		104,107 second, third, four	71,516 rth, or fifth tax year		1,171,588 c)(3)	2,400,071
Coo	organization, check this box and stop here	7.03.1.07.03.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.					
	tion C. Computation of Public Su			n (fi)		15	96.79 %
15 16	Public support percentage for 2019 (line 8, Public support percentage from 2018 Scheen						92.43 %
	tion D. Computation of Investmen						92.43 79
17	Investment income percentage for 2019 (lir			column (f))		17	1 %
18							3 %
19a	a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line						
	17 is not more than 33 1/3%, check this box						▶ X
b	33 1/3% support tests—2018. If the organ						
	line 18 is not more than 33 1/3%, check this						
20	Private foundation. If the organization did	not check a box or	n line 14, 19a, or 1	19b, check this box	and see instruction	nsxxxxxxxxxxx	

Part IV Supporting Organizations

Schedule A (Form 990 or 990-EZ) 2019

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 in 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 in 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 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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Has the organization acceled a gift or contribution from any of the following persons? A present who directly controls, either since or tegether with persons described in (b) and (c) the will be described to the control of the state of th		ille A (rom 990 or 990-E2) 2019 EQUAL OUSTICE AMERICA, INC 13-370039	0	_	rage 5
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Schedule A (Form 990 or 990-EZ) 2019 EQUAL JUSTICE AMERICA, II		13-3708	596 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting	Organizati	ons	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust of	on Nov. 20, 19	70 (explain in Part VI).	See
instructions. All other Type III non-functionally integrated supporting organizations	s must comple	te Sections A through E	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or	1 1		
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see	Te se in		
instructions for short tax year or assets held for part of year):	8.4		
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		
Discount claimed for blockage or other			
factors (explain in detail in Part VI):	in set		
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 1-1/2% 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 .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2	ST AND WEST WITH	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	WERE TEST	
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 integr	ated Type III s	supporting organization (see

instructions).

Schedu	ile A (Form 990 of 990-EX) 2019		13-3700	J 90 Fage /
Par	t V Type III Non-Functionally Integrated 509(a)(3	Supporting Organiza	tions (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	rposes		
2	Amounts paid to perform activity that directly furthers exempt purpo			
C	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of se	upported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organizations	nization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6		K 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required-explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
	From 2014			
	From 2015			
С	From 2016		THE RESERVE OF THE PARTY OF THE	
	From 2017		and the second	
	From 2018	C/1 (and a last		
	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount	e yar yake bar galar		
i	Carryover from 2014 not applied (see instructions)			
	Remainder, Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from			
	Section D, line 7: \$		The Area ha	
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder, Subtract lines 4a and 4b from 4.			ALCOHOLD SEE
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.	Note that the same of the same		
6	Remaining underdistributions for 2019, Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:	nd EWE HE	of a Committee	E - 27 7 11 - 16
a	Excess from 2015			de talenda in the
b	Excess from 2016		a la lacal de	also whosters will
С	Excess from 2017			Kg /4-55 W. S. S.
d	Excess from 2018	1 35 35 . I F		
e	Excess from 2019		A STATE OF THE STA	A 11.5

Schedule A (For	n 990 or 990-EZ) 2019	EQUAL	JUSTICE	AMERICA,	INC	13-3708596	Page 8
Part VI	Supplemental IIII, line 12; Part IVB, lines 1 and 2;	nformation. F V, Section A, Part IV, Secti V, line 1; Part	Provide the ex lines 1, 2, 3b on C, line 1; I V, Section B	xplanations requ , 3c, 4b, 4c, 5a, Part IV, Section B, line 1e; Part \	uired by Part II, , 6, 9a, 9b, 9c, ı D, lines 2 and /, Section D, lin	line 10; Part II, line 17a or 11a, 11b, and 11c; Part IV, 3; Part IV, Section E, lines es 5, 6, and 8; and Part V,	17b; Part Section 1c, 2a, 2b,
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047 Open to Public

Inspection Name of the organization Employer identification number EQUAL JUSTICE AMERICA, INC 13-3708596 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. 1 Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Part II Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)	Schedule D (Form 990) 2019 EQUAL JU	STICE AMERIC	CA, INC	1:	3-3708596	ó		Page 2
collection fietris (check all that apply): Part Partic Contribition	Part III Organizations Maintaining	Collections of A	Art, Historical T	reasures, or (Other Similar	Assets	(continue	
b		ion, and other records,	check any of the fo	llowing that make	significant use of	of its		
b	a Public exhibition	d∏L	oan or exchange pr	ogram				
Provide a description for white generations of subtree generations and explain how they further the organization's exempt purpose in Part XIII.	H		Other					
Social part Social part Social part Part Mile Companies Social part Part Mile Social part Social part Part Mile Social part Mile Mi	H '							
Section The year, did not organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to rises found farther than to be maintained as part of the organization's collection? Yes No No Part IV Intelligent No No No No No No No N	4 Provide a description of the organization's of	collections and explain	how they further the	organization's ex	empt purpose in	Part		
Section Sect	XIII.							
Secrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, uslatedian or other intermediary for contributions or other assets not included on Form 990, Part X?	5 , .							
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990. Part X. line 21. 1a Is the organization an agent, trustee, outdotain or other intermedially for contributions or other assets not included on Form 990, Part X? b 11 **Yes," explain the arrangement in Part XIII and complete the following tables: C Elegriming balance d Additions during the year d Id d Additions during the year d Id d Additions during the year f Ending balance To Ending balance D Id the displace included an amount on Form 990, Part X. line 21, for escrow or custodial account liability? The Third Type included an amount on Form 990, Part X. line 21, for escrow or custodial account liability? The Thomas arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. The Thomas arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. The Thomas arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. The Thomas arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. The Thomas arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. The Thomas arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. The Thomas arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. The Thomas arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. The Thomas arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. The Thomas arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. The Thomas arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. The Thomas arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. The Thomas arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. The Part XIII. The Part XIII. The Endowment Lond. The Part XIII. The Endowment Lond. The Part XIII. The Part X	Part IV Escrow and Custodial Al	rrangements.	on Form 000 D	art IV lina O a	r ranadad an	amount (on Form	
included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year e Distributions during the year e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account fiability? yes b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XII. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships g End of year balance 9 Chier expenditures for facilities and programs g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasis-endowment \(\bigcite{\frac{1}{2}} \) & \frac{1}{2} \) Administrative expenses 1 Fart Will be estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasis-endowment \(\bigcite{\frac{1}{2}} \) & \frac{1}{2} \) Administrative expenses b Complete organizations if Yes \(\bigcite{\frac{1}{2}} \) and 2c should equal 100%. 3a Are there endowment \(\bigcite{\frac{1}{2}} \) & \frac{1}{2} \) and 2c should equal 100%. 3a Are there endowment \(\bigcite{\frac{1}{2}} \) & \frac{1}{2} \) and 2c should equal 100%. 4 Description by: (i) Unrelated organizations (iii) Related organizations (iv) Unrelated organizations (iv) Unrelated organizations (iv) Unrelated organizations answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Lescopion of propany (c) Local or after beas (b) Coal or after beas (c) Accommodition (c) Accommod	990, Part X, line 21.					amount	on Form	
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(ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (other) (investment) (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 29, 801 Equipment 29, 801 29, 801 29, 801	(i) I have belong a second second							es NO
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1a Land b Buildings c Leasehold improvements d Equipment 29,801 e Other 29,801	Description of property	(a) Cost or other ba					(d) Book val	ue
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d Equipment 29,801 29,801 e Other 29,801 29,801								
e Other 29,801 29,801	######################################	20	901		20	801		
		29,	OOT	29 801				
		equal Form 990. Part	X, column (B). line		231	1000		

Part VII	Investments – Other Securities. Complete if the organization answered "Yes" on Fe	orm 000 Part IV li	no 11h Soo Form 000 D	art V line 12
	(a) Description of security or category	(b) Book value	(c) Method of	
	(including name of security)	(b) book value	Cost or end-of-yea	
(1) Financial	derivatives			
	derivatives eld equity interests			
(3) Other				
(A)				
(D)				
(E)				
(F)				
(G)	AND THE PERSON OF THE PERSON O			
(H)				
	n (b) must equal Form 990, Part X, col. (B) line 12.)			SEEN MAN - MANUAL SE
Part VIII	Investments – Program Related.		44 0 5 000 0	1 3 2 1 10
	Complete if the organization answered "Yes" on Fo			
	(a) Description of investment	(b) Book value	(c) Method of Cost or end-of-year	
(4)			Cost of end-of-year	market value
(1)				
(2)				
(4)				
(5)			***	
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, col. (B) line 13.)			THE STATE OF THE STATE OF
Part IX	Other Assets. Complete if the organization answered "Yes" on Fo	orm 990 Part IV lii	ne 11d. See Form 990. Pa	art X line 15
	(a) Description	2231		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	100 M			
	(b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities. Complete if the organization answered "Yes" on Foline 25.	orm 990, Part IV, lii	ne 11e or 11f. See Form 9	990, Part X,
	(a) Description of liability			(b) Book value
100000	ncome taxes			(D) DOOK Value
	OAN PAYABLE			150,000
(3)		7011		100/000
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
otal. (Column	(b) must equal Form 990, Part X, col. (B) line 25.)		>	150,000
	incertain tax positions. In Part XIII, provide the text of the footnote			ts the
rganization's li	ability for uncertain tax positions under FASB ASC 740. Check I	nere if the text of the fo	otnote has been provided in Pa	nt XIII

Sche	dule D (Form 990) 2019 EQUAL JUSTICE AMERICA, INC	13-3	708596	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statem		e per Return.	
	Complete if the organization answered "Yes" on Form 990, F	Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements			1,171,588
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	94	initeger)	
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	25-14	
С	Recoveries of prior year grants	2c	1,20	
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	252	3	1,171,588
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		
	Other (Describe in Part XIII.)			
	Add lines 4a and 4b		4c	
5			5	1,171,588
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten	nents With Expens	es per Return.	
	Complete if the organization answered "Yes" on Form 990, F	Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	1,020,967
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	110150101010101010101010101010		
а	Donated services and use of facilities	2a		
b	D. I. I. I.	2b		
С	Other losses	1 0- 1		
d				
	Add lines 2a through 2d	, ,	2e	
3	Subtract line 2e from line 1		3	1,020,967
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	-	
			1970	
b	Other (Describe in Part XIII.)	4b	4c	
b c	Other (Describe in Part XIII.) Add lines 4a and 4b	4b		1,020,967
b c 5	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	4b		1,020,967
b c 5	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information.	, 4 b	5	
b c 5 Pa	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	V, lines 1b and 2b; Part	V, line 4; Part X, line	
b c 5 Pa	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information.	V, lines 1b and 2b; Part	V, line 4; Part X, line	
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Schedule D	(Form 990) 2019	EQUAL	JUSTICE	AMERICA,	INC	1	.3-3708596	Page 5
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SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public OMB No. 1545-0047 2019

> Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Inspection

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, (h) Purpose of grant or assistance Employer identification number X Yes GRANT GRANT GRANT GRANT GRANT GRANT GRANT GRANT GRANT 13-3708596 LEGAL LEGAL LEGAL LEGAL LEGAL LEGAL LEGAL LEGAL LEGAL noncash assistance (g) Description of Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance 500 508 7,674 6,500 421 10,000 6,000 36,060 25,037 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash 13, grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) 74-1109733 | 501C3 50103 501C3 501C3 .501C3 501C3 06-0793269 501C3 501C3 501C3 13-3505428 04-2103907 94-3042565 52-0971440 23-7105149 36-2177139 36-2167940 General Information on Grants and Assistance (p) EIN Enter total number of other organizations listed in the line 1 table AMERICA the selection criteria used to award the grants or assistance? (8) NEW YORK LEGAL ASSISTANCE GROUP (6) NEW HAVEN LEGAL ASSISTENCE ASSN TX 77006 CA 94703 SERVICES CT 06510 CENTER 20012 MA 02114 IL 60602 90005 NY 10004 60637 (9) CATHOLIC CHARITIES GALVESTON JUSTICE (a) Name and address of organization (3) EF MANDEL LEGAL AID CLINIC 6925-B WILLOW STREET NW BAY COMMUNITY LAW 2900 LOUISIANA STREET (4) GREATER BOSTON LEGAL 610 S ARDMORE AVENUE ADELINE STREET 6054 S DREXEL AVENUE or government FOUAT. DEARBORN FRIEND STREET CHICAGO 205 ORANGE STREET 7 HANOVER SQUARE (7) PUBLIC COUNSEL ONE NORTH (5) LEGAL AID LOS ANGELES Name of the organization WASHINGTON NEW HAVEN NEW YORK BERKELEY (2) AYUDA CHICAGO CHICAGO HOUSTON (1) EAST 2921 197 Part BOSTON *

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

Schedule I (Form 990) (2019)

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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

► Attach to Form 990.

2019

OMB No. 1545-0047

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

Open to Public Inspection Employer identification number

ŝ Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, (h) Purpose of grant or assistance ☐ Yes GRANT LEGAL GRANT GRANT 13-3708596 LEGAL LEGAL noncash assistance (g) Description of Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance 6,700 6,049 5,026 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) 501C3 50103 501C3 54-0900644 06-1484152 13-5562265 INC General Information on Grants and Assistance (p) EIN Enter total number of other organizations listed in the line 1 table EOUAL JUSTICE AMERICA, the selection criteria used to award the grants or assistance? CENTRAL VIRGINIA LEGAL AID SOCIETY 23220 (2) LINCOLN SQUARE LEGAL SERVICES NY 10023 10038 (a) Name and address of organization NY VA 101 WEST BROAD STREET or government 60TH STREET (3) LEGAL AID SOCIETY STREET 199 WATER 33 WEST NEW YORK RICHMOND YORK Part NEW 4 2 9 6 8 6

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	onal space is needed.	ils. Complete if the	organization answered	1 "Yes" on Form 990, Part	IV, line 22.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
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Part IV Supplemental Information. Provide the information required in Part	ide the information rec	quired in Part I, line	2; Part III, column (b);); and any other additional information	information.
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2019

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

EQUAL JUSTICE AMERICA, INC	Employer identification number 13-3708596
FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMEN	NTS
PROVIDES GRANTS TO LEGAL SERVICE ORGANIZATIONS THAT I	DELIVER LEGAL
ASSISTANCE TO THE POOR AND DISADVANTAGED. THE GRANTS	S ARE ISSUED TO SPONSOR
FELLOWSHIPS FOR LAW SCHOOL STUDENTS.	
FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS	TO REVIEW FORM 990
PRIOR TO FILING, THE DIRECTORS REVIEW THE FORM 990	
FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICT	rs Policy
DIRECTORS ARE REQUIRED TO DISCLOSE INFORMATION WHENEV	YER THERE IS A CHANGE
IN THEIR STATUS. THE EXECUTIVE DIRECTOR REVIEWS THES	SE POLICIES WITH THE
BOARD.	
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FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FO	
THE EXECUTIVE DIRECTOR'S COMPENSATION IS REVIEWED ANN	NUALLY WITH THE BOARD,
AN INDEPENDENT BODY.	
FORM 990, PART VI, LINE 17 - OTHER STATES WHERE COPY	
PENNSYLVANIA, RHODE ISLAND, VIRGINIA, WISCONSIN	
FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISC	CLOSURE EXPLANATION
NO DOCUMENTS AVAILABLE TO THE PUBLIC	
	GARBIGARIAN PERMENTING TO THE TRANSPORT OF THE STATE OF T