DLN: 93493196051360 OMB No 1545-0047 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 Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 09-01-2018 , and ending 08-31-2019 D Employer identification number B Check if applicable ACCOUNTABLE JUSTICE ACTION FUND ☑ Address change 82-3247136 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Application pending (650) 804-7100 City or town, state or province, country, and ZIP or foreign postal code PALO ALTO, CA $\,\,$ 94301 $\,\,$ G Gross receipts \$ 270,350 Name and address of principal officer H(a) Is this a group return for RASHAD ROBINSON ☐Yes **☑**No subordinates? 314 LYTTON AVE H(b) Are all subordinates PALO ALTO, CA 94301 ☐Yes ☐No ıncluded? Tax-exempt status 501(c)(3) ✓ 4947(a)(1) or 501(c) (4) ◀ (insert no) If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► N/A L Year of formation 2017 M State of legal domicile DE K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities TO SUPPORT AND PROMOTE CRIMINAL JUSTICE REFORM Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 4 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 **6** Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 17,050,000 200,000 Ravenua 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 79,344 70,350 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 17,129,344 270,350 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 12,133,530 4,224,642 0 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 0 0 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 441,094 455,141 12,574,624 4,679,783 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 4,554,720 -4,409,433 Net Assets or Fund Balances Beginning of Current Year **End of Year** 4,573,963 2,130,983 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 19,243 1,985,696 22 Net assets or fund balances Subtract line 21 from line 20 . 4,554,720 145,287 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-07-14 Signature of officer Sign Here CHLOE COCKBURN TREASURER Type or print name and title Print/Type preparer's name Preparer's signature Check 🔲 ıf P00447955 Paid self-employed Firm's name > APERCEN PARTNERS LLC Firm's EIN ► 26-2246506 Preparer Use Only Firm's address ► 314 LYTTON AVE Phone no (650) 804-7100 PALO ALTO, CA 94301 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)					Page 2
Pa	rt III Statemen	nt of Program Service	e Accomplis	hments		
	Check if Sch	nedule O contains a respo	onse or note to	any line in this Part III .		🗹
1		organization's mission				
UST URT	ICE REFORM BY FUN HERANCE OF ITS EX	IDING AND ENGAGING IN	N PUBLIC EDUCA RPORATION PR	ATION, ADVOCACY, GRA OMOTES THE GENERAL	REFORM THE CORPORATION WIL NTMAKING AND OTHER PERMISSI WELFARE OF INDIVIDUALS AND THE ELS	BLE ACTIVITIES IN
2	Did the organizatio	n undertake any significa	ant program ser	vices during the year wh	nich were not listed on	
	the prior Form 990	or 990-EZ?				☐ Yes ☑ No
	If "Yes," describe t	hese new services on Sch	nedule O			
3	Did the organizatio	n cease conducting, or m	nake significant	changes in how it condu	ıcts, any program	
	services?					☐ Yes ☑ No
4	Describe the organ Section 501(c)(3) a	ızatıon's program service	accomplishmei	I to report the amount o	largest program services, as measi f grants and allocations to others,	ured by expenses the total
4a	(Code) (Expenses \$	4,500,410	ıncludıng grants of \$	4,224,642) (Revenue \$	0)
	See Additional Data					
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$		ıncluding grants of \$) (Revenue \$)
4d	Other program ser	vices (Describe in Schedi	ule O)			
	(Expenses \$	ıncl	uding grants of	<u> </u>) (Revenue \$)
4 e	Total program se	rvice expenses >	4.500.4	.10		

Form 990 (2018) Page 3 **Checklist of Required Schedules** Yes Nο Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Nο 1 2 Yes Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆 . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates Yes 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 5 No 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? No 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Nο 7 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? No 8 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation Nο 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Nο permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? Nο 11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Nο 11b Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its Nο 11c Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported No 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Nο Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f Nο the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Part X

12a

12b

13

14a

14b

15

16

17

18

19

20a

20b

21

22

Yes

Nο

No

Nο

No

No

Nο

No

Nο

Nο

Nο

Nο

Nο

Form 990 (2018)

12a Did the organization obtain separate, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

lines 1c and 8a? If "Yes," complete Schedule G, Part II

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

Was the organization included in consolidated, independent audited financial statements for the tax year?

	Charlist of Barrised Cahadulas (continued)			Page 4
Par	tiV Checklist of Required Schedules (continued)		Yes	No
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? <i>If "Yes," complete Schedule J</i>	23	Yes	No No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
Ь	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		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	

37	7 Did the organization conduct more than 5% of its activit is treated as a partnership for federal income tax purpos	37		No	
38	8 Did the organization complete Schedule O and provide e All Form 990 filers are required to complete Schedule O	38	Yes		
Pa	Part V Statements Regarding Other IRS Filing	s and Tax Compliance			
	Check if Schedule O contains a response or	note to any line in this Part V			

 ${f c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

1a

1b

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

Yes

Form **990** (2018)

0

1c

No

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

13b

13c

14a

14b

15

No

No

Form **990** (2018)

011111	336 (2016)			rage
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	lines ✓
Se	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 4			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	≘ Cod€	∍.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
Ь	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records APERCEN PARTNERS LLC 314 LYTTON AVE. PALO ALTO CA 94301 (650) 804-7100			

(F)

Estimated

	•
Part VII	Compensation of Officers,

Name and Title

Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

• 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, or 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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest

compensated employees, and former such persons 🗹 Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

Position (do not check more

Reportable

Reportable

(B)

Average

hours per than one box, unless person compensation compensation amount of other is both an officer and a week (list from related from the compensation any hours director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Individual to or director Highest compensati employee Ke. g organizations MISC) MISC) related Institutional below dotted Ę emplo organizations line) trustee ě Trustee 0 20 (1) RASHAD ROBINSON Х 0 Х PRESIDENT 0 20 (2) TIM SILARD Χ 0 **SECRETARY** 5 00 (3) CHLOE COCKBURN Χ Χ 0 TREASURER 0.20 (4) MICHAEL KIESCHNICK Х n n DIRECTOR

c T	1b Sub-Total										
2	·										
_	Diddle and the first of the second								 	Yes	No

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization \triangleright 0			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4		No

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

from the organization. Report compensation for the calendar year ending with or within the organization's tax year

Name and business address

5

CORMIER & COMPANY LLC

ARNOLD & PORTER KAYE SCHOLER LLP 601 MASSACHUSETTS AVE NW WASHINGTON, DC 20001 IMPACT PARTNERS INC

3521 17TH ST NE WASHINGTON, DC 30018

6906 KENFIG DR FALLS CHURCH, VA 22041

Section B. Independent Contractors

compensation from the organization ▶ 3

c ·	Total (add lines 1b and 1c)	0		0
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization \triangleright 0			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	_		

No

181,064 163,940

(C)

Compensation

5

(B)

Description of services

POLITICAL CONSULTING

OPERATIONS CONSULTING

LEGAL

128,903 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

orm 9		•	-						Page 9
Part	VIII	Statement of		2 5050	nco or noto to an	line in this Part VIII			П
		Check II Schedul	ie O contains	a respo	onse or note to any	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a	Federated campaig	ns	1a			revenue	1	512 - 514
nts mts		• Membership dues		1b					
Gra not	c	: Fundraising events		1c					
Įš.	d	I Related organizatio	ons	1d					
<u>ā</u> ē	e	Government grants (c	ontributions)	1e					
ns, Sir	f	All other contributions	, gifts, grants,						
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts n above	iot included	1 f	200,000				
휼	g	Noncash contribution	ons included						
	١,	in lines 1a - 1f \$ Total. Add lines 1a	-1f						
		Totali / Ida III ida III		•	Busines	200,000	<u> </u>		
E.	2a				- Busilles:	s code			
₹ -	-			_					
Service Revenue	b c								
ž.	d								
<u>د</u>	е			_					
Program	f	All other program se	rvice revenue	2					
Ğ	g٦	Fotal. Add lines 2a–2	2f		•				
		nvestment income (i imilar amounts) .	ncluding divid		nterest, and other	//11 35	0		70,350
		ncome from investm			•	-			
	5 F	Royalties				•			
			(ı) Rea	al	(II) Personal				
	6a	Gross rents							
	b	Less rental expenses							
	_	Rental income or				_			
	·	(loss)							
	d	Net rental income o			<u> </u>				
	7-	Gross amount	(ı) Securi	ties	(II) Other				
		from sales of assets other							
		than inventory							
	b	Less cost or other basis and							
	_	sales expenses				_			
		Gain or (loss) Net gain or (loss)			•	-			
	8a	Gross income from f	undraising ev						
ne		(not including \$ contributions reporte		of					
₽ S		See Part IV, line 18							
Other Revenue		Less direct expense							
her		Net income or (loss) Gross income from g			ents •				
ō	Ju	See Part IV, line 19	· · ·	.103					
				a					
		Less direct expense Net income or (loss)		b Lactivit	185				
		Gross sales of invent		, activit	les •				
		returns and allowand	ces	-1					
	b	Less cost of goods s	sold	a b		_			
		Net income or (loss)							
ŀ		Miscellaneous			Business Code				
	11:	a							
	Ь								
	С								
	_	All II							
		All other revenue . Total. Add lines 11a			<u> </u>	1			
	12	Total revenue. See	: IIISUI UCTIONS	• •		270,35	0	0	0 70,350

orn	n 990 (2018)				Page 10
	Statement of Functional Expenses con 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	inizations must comp	olete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX .			🗆
	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) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	4,224,642	4,224,642	general enpenees	
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4	Benefits paid to or for members				_
5	Compensation of current officers, directors, trustees, and key employees				
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				
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
	Legal	107,919		107,919	
c	Accounting	45,500		45,500	_
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	271,872	271,872		
12	Advertising and promotion				
13	Office expenses	2,658	2,658		
14	Information technology	1,238	1,238		_
15	Royalties				
16	Occupancy				
	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				_
22	Depreciation, depletion, and amortization				_
23	Insurance	5,954		5,954	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	a TAX ON 527 EXPENDITURES	20,000		20,000	
	b				
	с				
	d				
	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	4,679,783	4,500,410	179,373	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)				

3

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balance

Assets or 30

Net

1	Cash-non-intere
	Check If Schedu

st-bearing . Savings and temporary cash investments . Pledges and grants receivable, net . .

Investments—publicly traded securities .

Intangible assets

Other assets See Part IV, line 11 .

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25 .

Investments—other securities See Part IV, line 11 .

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 📙 and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Investments-program-related See Part IV, line 11

Accounts receivable, net .

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L

Notes and loans receivable, net . Inventories for sale or use . Prepaid expenses and deferred charges

contains a response or note to any line in this Part IX .

10a Land, buildings, and equipment cost or other 10a basis Complete Part VI of Schedule D Less accumulated depreciation

10b

(A)

Beginning of year

4.573.963

19.243

12

13

14

15

16

17 18

19

20

21

22 23

24

25

26

27 28

29

32

33

34

0 30

0 31

4,554,720

4,554,720

4,573,963

19.243

1

2

3

4

5

6

4,573,963

Page **11**

2,128,075

2.908

2.130.983

1.971.510

1.985.696

0

145,287

145,287

2,130,983

Form **990** (2018)

14,186

(B)

End of year

Form	990 (2018)				Page 12
Pai	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1			270,350
2	Total expenses (must equal Part IX, column (A), line 25)	2		4	,679,783
3	Revenue less expenses Subtract line 2 from line 1	3		-4	,409,433
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4	,554,720
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 in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			145,287
Pa	TXII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				
	Accounting method used to prepare the Form 990	on a	2a	Yes	No No
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	basıs,			
	El Separate basis El Consolidated basis El Both Consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Audit Act and OMB Circular A-133?	ngle	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requadit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ıred	3b		

Additional Data

Software ID:

Software Version:

EIN: 82-3247136 Name: ACCOUNTABLE JUSTICE ACTION FUND

Form 990 (2018)

Form 990, Part III, Line 4a: THE ORGANIZATION MADE GRANTS TO SECTION 501(C)(4) SOCIAL WELFARE ORGANIZATIONS AND SECTION 527 POLITICAL ORGANIZATIONS FOR GENERAL SUPPORT OR SPECIFIC PROJECTS. THE ORGANIZATION MADE DISTRIBUTIONS TO RESEARCH AND EFFECT CHANGE IN THE CRIMINAL JUSTICE AREA AND RELATED FIELDS. WITH GRANTS FROM THE ORGANIZATION, GRANTEES MAY CONDUCT A RANGE OF ACTIVITIES, INCLUDING RESEARCH, PUBLIC EDUCATION AND ADVOCACY, DIRECT OR GRASSROOTS LOBBYING, OR PERMISSIBLE AMOUNTS OF POLITICAL ACTIVITY, ALL FOR THE PURPOSE OF SUPPORTING CRIMINAL JUSTICE REFORM AND PROMOTING SOCIAL WELFARE

Political Campaign and Lobbying Activities

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

Employer identification number

82-3247136

(d) Amount paid from

OMB No 1545-0047

DLN: 93493196051360

Open to Public Inspection

271,872

652.504

(e) Amount of political

Department of the Treasury Internal Revenue Service

Name of the organization

Part I-A

ACCOUNTABLE JUSTICE ACTION FUND

If "Yes," describe in Part IV

(a) Name

SCHEDULE C (Form 990 or 990-

EZ)

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

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

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

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

(Proxy Tax) (see separate instructions), then

Section 527 organizations Complete Part I-A only

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

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

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

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

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Part I-B 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? ☐ Yes ☐ No

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

Enter the amount directly expended by the filing organization for section 527 exempt function activities

(b) Address

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

Did the filing organization file Form 1120-POL for this year? √ Yes 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(c) EIN

filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-(1) NEW NATION RISING PAC 82-0697735 PO BOX 562 191,950 NEW YORK, NY 10030 3

Calendar year (or fiscal year (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) Total beginning in) Lobbying nontaxable amount

Lobbying ceiling amount (150% of line 2a, column(e))

2a Total lobbying expenditures Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

expenditure next year?

Return Reference

Part IV

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Supplemental Information

activity

(b)

Amount

(a)

No

Yes

<u>4</u>

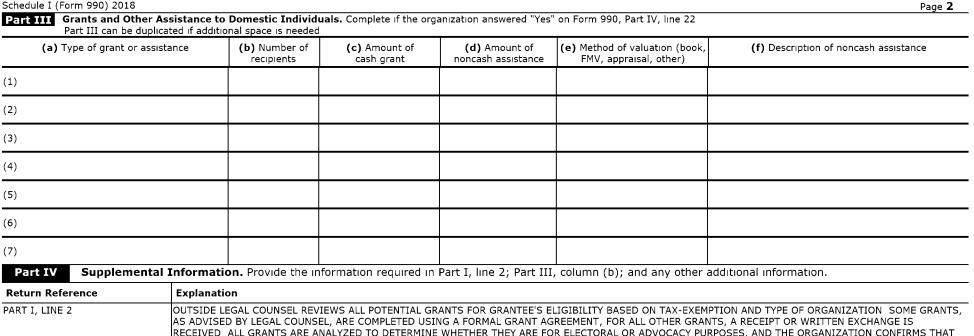
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year C Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

DLN: 93493196051360 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number ACCOUNTABLE JUSTICE ACTION FUND 82-3247136 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018



THE FUNDED ACTIVITY HAS OCCURRED

Schedule I (Form 990) 2018

Additional Data

INC

1620 L ST NW WASHINGTON, DC 20036

				TICE ACTION FUND			
Form 990,Schedule I, Part (a) Name and address of organization or government	II, Grants and (b) EIN	Other Assistance to (c) IRC section If applicable	Domestic Organiza (d) Amount of cash grant	tions and Domest (e) Amount of non- cash assistance	ic Governments. (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLOROFCHANGEORG 1714 FRANKLIN ST STE 100- 136 OAKLAND, CA 94612	20-4496889	501(C)(4)	800,000				CRIMINAL JUSTICE REFORM
LEADERSHIP CONFERENCE ON CIVIL AND HUMAN RIGHTS	52-0789800	501(C)(4)	200,000				CRIMINAL JUSTICE REFORM

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

SUPPORT WORK ON DA IFI ECTIONS IN

ALABAMA

MOVEMENT VOTER PROJECT	37-1697474	501(C)(4)	100,000		SUPPORT WORK ON DA
PO BOX 749			·		ELECTIONS IN
NORTHAMPTON MA 01061					PENNSYI VANTA

191.950

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

527

NEW NATION RISING PAC

NEW YORK, NY 10030

PO BOX 562

82-0697735

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

NEW VIRGINIA MAJORITY 3801 MOUNT VERNON AVE ALEXANDRIA, VA 22305	26-1377619	501(C)(4)	70,000		CRIMINAL JUSTICE REFORM

IFI ECTIONS IN

VIRGINIA

NEW VIRGINIA MAJORITY 26-1377619 501(C)(4) 75,000 SUPPORT WORK ON DA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3801 MOUNT VERNON AVE ALEXANDRIA, VA 22305

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

SUPPORT WORK ON PROSECUTOR

ELECTIONS

NEW VIRGINIA MAJORITY	26-1377619	501(C)(4)	200,000			CRIMINAL JUSTICE
3801 MOUNT VERNON AVE					1	REFORM
ALEXANDRIA, VA 22305					1	

13.682

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

TEXAS ORGANIZING PROJECT 27-1482075 501(C)(4)

PO BOX 120296

SAN ANTONIO, TX 78212

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance INAL JUSTICE

CRIMINAL JUSTICE

REFORM

TIDES ADVOCACY PO BOX 29229 SAN FRANCISCO, CA 94129	94-3153687	501(C)(4)	480,000		CRIMINA REFORM

1.971.510

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

TIDES ADVOCACY 94-3153687 501(C)(4)

PO BOX 29229

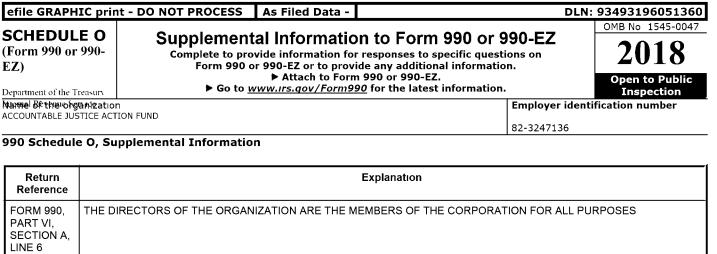
SAN FRANCISCO, CA 94129

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

TIDES ADVOCACY PO BOX 29229	94-3153687	501(C)(4)	120,000		CRIMINAL JUSTICE REFORM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SAN FRANCISCO, CA 94129



Return Explanation

FORM 990,	MEMBERS OF THE BOARD OF DIRECTORS, AS MEMBERS OF THE CORPORATION, HAVE THE POWER TO ELECT
PART VI,	BOARD MEMBERS BY A MAJORITY VOTE OF THE DIRECTORS IN OFFICE
SECTION A,	
LINE 7A	

Return Explanation
Reference

LINE 11B

FORM 990, FORM 990 IS REVIEWED BY LEGAL COUNSEL AND THEN DISTRIBUTED TO THE BOARD OF DIRECTORS PRIOR TO PART VI, FILING SECTION B.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY COVERS DIRECTORS, OFFICERS, KEY EMPLOYEES, COMMITTEE MEMBE RS, SPOUSES OR DOMESTIC PARTNERS OF ANY OF THE LISTED PEOPLE, AND FORMER OFFICERS, DIRECTO RS OR KEY EMPLOYEES WHO SERVED IN SUCH CAPACITY WITHIN THE FIVE PREVIOUS YEARS IN CONNECT ION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, A COVERED PERSON MUST IMMEDIATELY DI SCLOSE TO THE BOARD, COMMITTEE OR BOARD DESIGNEE THE EXISTENCE AND NATURE OF HIS OR HER FI NANCIAL INTEREST OR ANY DISCLOSABLE RELATIONSHIPS ALL NEWLY APPOINTED OR ELECTED BOARD ME MBERS OR OFFICERS SHALL DISCLOSE ALL KNOWN CONFLICTS OF INTEREST AND DISCLOSABLE RELATIONS HIPS UPON ASSUMPTION OF THEIR DUTIES AND, SHOULD A CONFLICT OF INTEREST OR DISCLOSABLE RELATIONSHIP DEVELOP, MUST IMMEDIATELY DISCLOSE TO THE BOARD, COMMITTEE OR BOARD DESIGNEE SUC H ACTUAL OR POSSIBLE CONFLICT OF INTEREST OR DISCLOSABLE RELATIONSHIP AFTER A POTENTIAL C ONFLICT HAS BEEN DISCLOSED, THE BOARD OR COMMITTEE SHALL DETERMINE IF A CONFLICT OF INTERE ST EXISTS IF THE BOARD OR COMMITTEE DETERMINES THAT A COVERED PERSON HAS A FINANCIAL INTEREST, THEN IT WILL BE INVESTIGATED AND DETERMINED BY A MAJORITY VOTE OF THE DISINTERESTED BOARD MEMBERS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTERES TS

Return Explanation
Reference

LINE 15

FORM 990, PART VI, SECTION B.

Return Explanation

FORM 990, PART VI, SECTION C, LINE 19