



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2009Open to Public
Inspection

A For the 2009 calendar year, or tax year beginning _____, and ending _____

- B Check if applicable
- Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

C Please use IRS label or print or type. See Specific Instructions

NORTH CAROLINA JUSTICE CENTER

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

POST OFFICE BOX 28068

D Employer identification number

56-1348186

City or town, state or country, and ZIP + 4

RALEIGH

NC 27611-8068

E Telephone number
919-856-2570

G Gross receipts \$ 4,306,585

F Name and address of principal officer

MELINDA LAWRENCE

POST OFFICE BOX 28068

RALEIGH

NC 27611-8068

H(a) Is this a group return for

affiliates? Yes NoH(b) Are all affiliates included? Yes No

If "No," attach a list (see instructions)

I Tax-exempt status 501(c) (3) (insert no) 4947(a)(1) or 527J Website ► www.ncjustice.orgK Type of organization Corporation Trust Association Other ►

L Year of formation 1982

M State of legal domicile NC

Part I Summary

- 1 Briefly describe the organization's mission or most significant activities
See Schedule O

- 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)

3 15

4 Number of independent voting members of the governing body (Part VI, line 1b)

4 15

5 Total number of employees (Part V, line 2a)

5 58

6 Total number of volunteers (estimate if necessary)

6 6

7a Total gross unrelated business revenue from Part VIII, column (C), line 12

7a

b Net unrelated business taxable income from Form 990-T, line 34

7b 0

8 Contributions and grants (Part VIII, line 1b)

Prior Year Current Year

4,083,727 4,128,866

9 Program service revenue (Part VIII, line 20)

99,032 115,134

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

17,059 19,935

11 Other revenue (Part VIII, column (A), lines 6d, 6e, 9c, 10c and 11e)

118,116 42,650

12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)

4,317,934 4,306,585

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

288,473 54,360

14 Benefits paid to or for members (Part IX, column (A), lines 4-6)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

3,124,669 3,513,822

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ► 124,359

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)

909,489 771,830

18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)

4,322,631 4,340,012

19 Revenue less expenses Subtract line 18 from line 12

-4,697 -33,427

20 Total assets (Part X, line 16)

Beginning of Current Year End of Year

4,085,622 4,049,544

21 Total liabilities (Part X, line 26)

334,451 319,925

22 Net assets or fund balances Subtract line 21 from line 20

3,751,171 3,729,619

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

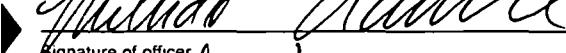
Sign
Here

Signature of officer

Type or print name and title

11/12/10

Date



Melinda Lawrence, Executive Director

Paid
Preparer's
Use OnlyPreparer's
signature

Date

11/12/10

Check if
self-
employedPreparer's identifying number
(see instructions)

435-31-3306

Firm's name (or yours
if self-employed),
address, and ZIP + 4ROMEO, WIGGINS & COMPANY, LLP
8210 Creedmoor Rd., #202
Raleigh, NC 27613

EIN ► 56-1627242

Phone no ► 919-870-5151

May the IRS discuss this return with the preparer shown above? (see instructions)

Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.
DAA

Form 990 (2009)

Q5

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

See Schedule O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

 Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

 Yes No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 1,335,730 including grants of \$) (Revenue \$)

POVERTY LAW ADVOCACY: REPRESENTS INTERESTS OF LOW-INCOME AND WORKING POOR PERSONS; LITIGATES MAJOR CASES NOT HANDLED BY FEDERALLY FUNDED LEGAL SERVICE PROGRAMS; INCLUDES THE NORTH CAROLINA IMMIGRANTS LEGAL ASSISTANCE PROJECT WHICH PROVIDES LEGAL ASSISTANCE FOR THE STATE'S IMMIGRANT POPULATIONS.

4b (Code) (Expenses \$ 584,316 including grants of \$ 6,500) (Revenue \$)

BLUEPRINT NC - ADVOCACY AND ORGANIZING GROUPS DEDICATED TO ACHIEVING A BETTER, FAIRER AND HEALTHIER NORTH CAROLINA THROUGH THE DEVELOPMENT OF AN INTEGRATED COMMUNICATIONS, CIVIC ENGAGEMENT AND POLICY STRATEGY.

4c (Code) (Expenses \$ 476,406 including grants of \$) (Revenue \$)

PUBLIC POLICY ADVOCACY: PROMOTES THE ADOPTION OF STATE LEVEL PUBLIC POLICIES THAT MEET THE NEEDS OF LOW-INCOME, WORKING POOR AND MINORITY INDIVIDUALS AND COMMUNITIES.

4d Other program services (Describe in Schedule O)

(Expenses \$ 1,564,445 including grants of \$ 47,860) (Revenue \$)

4e Total program service expenses ► 3,960,897

Part IV Checklist of Required Schedules

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A
- 2 Is the organization required to complete Schedule B, Schedule of Contributors?
- 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
- 4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 5 **Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III
- 6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I
- 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
- 9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV
- 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V
- 11 Is the organization's answer to any of the following questions "Yes"? If so, 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," complete Schedule D, Part VI
 - Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII
 - 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
 - Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX
 - Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
 - 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? If "Yes," complete Schedule D, Part X
- 12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII
- 12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
 - b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I
- 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II
- 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III
- 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I
- 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II
- 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III
- 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

	Yes	No
1	X	
2	X	
3		X
4	X	
5		
6		X
7		X
8		X
9		X
10		X
11	X	
12	X	
12A		X
13		X
14a		X
14b		X
15		X
16		X
17		X
18	X	
19		X
20		X

Part IV Checklist of Required Schedules (continued)

- 21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II
- 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III
- 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
- 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 25
- b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?
- c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?
- d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?
- 25a **Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I
- 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
- 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II
- 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III
- 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)
- a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV
- b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV
- c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV
- 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M
- 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M
- 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I
- 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II
- 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I
- 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1
- 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2
- 36 **Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2
- 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
- 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O

	Yes	No
21	X	
22		X
23	X	
24a		X
24b		
24c		
24d		
25a		X
25b		X
26		X
27		X
28a		X
28b		X
28c		X
29		X
30		X
31		X
32		X
33		X
34		X
35		X
36		X
37		X
38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

- 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable
- | | |
|----|----|
| 1a | 31 |
| 1b | 0 |
- 1c
- 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return
- | | |
|----|----|
| 2a | 58 |
|----|----|
- 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)
- 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?
- b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O
- 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?
- b If "Yes," enter the name of the foreign country ►
See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts
- 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?
- b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?
- c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?
- 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?
- b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
- 7 **Organizations that may receive deductible contributions under section 170(c).**
- a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?
- b If "Yes," did the organization notify the donor of the value of the goods or services provided?
- c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?
- d If "Yes," indicate the number of Forms 8282 filed during the year
- | | |
|----|--|
| 7d | |
|----|--|
- e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?
- f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?
- g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?
- h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?
- 8 **Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?
- 9 **Sponsoring organizations maintaining donor advised funds.**
- a Did the organization make any taxable distributions under section 4966?
- b Did the organization make a distribution to a donor, donor advisor, or related person?
- 10 **Section 501(c)(7) organizations.** Enter
- a Initiation fees and capital contributions included on Part VIII, line 12
- b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities
- 11 **Section 501(c)(12) organizations.** Enter
- a Gross income from members or shareholders
- b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)
- 12a **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?
- b If "Yes," enter the amount of tax-exempt interest received or accrued during the year
- | | |
|-----|--|
| 12b | |
|-----|--|

	Yes	No
1c	X	
2b	X	
3a		X
3b		
4a		X
5a		X
5b		X
5c		
6a		X
6b		
7a		X
7b		
7c		X
7d		
7e		X
7f		X
7g		X
7h		X
8		
9a		
9b		
10a		
10b		
11a		
11b		
12a		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

- 1a Enter the number of voting members of the governing body 1a 15
- b Enter the number of voting members that are independent 1b 15
- 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 X
- 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 X
- 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 X
- 5 Did the organization become aware during the year of a material diversion of the organization's assets? 5 X
- 6 Does the organization have members or stockholders? 6 X
- 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a X
- b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b X
- 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following
 - a The governing body 8a X
 - b Each committee with authority to act on behalf of the governing body? 8b X
- 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

- 10a Does the organization have local chapters, branches, or affiliates? 10a X
- b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b
- 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 X
- 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a X
- 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12b X
- b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c X
- c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 13 X
- 13 Does the organization have a written whistleblower policy? 14 X
- 14 Does the organization have a written document retention and destruction policy? 15 X
- 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?
 - a The organization's CEO, Executive Director, or top management official 15a X
 - b Other officers or key employees of the organization

If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 15b X
- 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X
- b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b X

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► NC
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available Check all that apply

Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► MARY COLEMAN
224 S DAWSON STREET
RALEIGH NC 27611
919-856-2174

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
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. Use Schedule J-2 if additional space is needed.

- 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. 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.

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 the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated			
DR. REV. WILLIAM DIRECTOR	1.00	X					0	0	0
ASA L BELL, JR DIRECTOR	1.00	X					0	0	0
DHAMIAN BLUE DIRECTOR	1.00	X					0	0	0
ANITA BROWN-GRAHAM DIRECTOR	1.00	X					0	0	0
JEAN CARY CO-CHAIR	1.00	X					0	0	0
CHRISTOPHER GRAEBE DIRECTOR	1.00	X					0	0	0
RICHARD HOOKER, JR DIRECTOR	1.00	X					0	0	0
FIORELLA HORNA-GUERRA DIRECTOR	1.00	X					0	0	0
KENNETH JERALD JONES, SR DIRECTOR	1.00	X					0	0	0
RAQUEL LYNCH CO-CHAIR	1.00	X					0	0	0
GENE NICHOL DIRECTOR	1.00	X					0	0	0
DR. GREGORY MOSS, SR. DIRECTOR	1.00	X					0	0	0
ORAGE QUARLES III DIRECTOR	1.00	X					0	0	0
REV J. GEORGE REED DIRECTOR	1.00	X					0	0	0
GERALDINE SUMTER DIRECTOR	1.00	X					0	0	0
MELINDA LAWRENCE EXEC DIRECTOR	40.00		X				108,266	0	14,406
MARY COLEMAN CFO	40.00		X				78,309	0	12,586

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

1b Total

186,575

26,992

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ► 1

- 3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
 - 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
 - 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

- 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►

8

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts						
1a Federated campaigns	1a					
b Membership dues	1b					
c Fundraising events	1c					
d Related organizations	1d					
e Government grants (contributions)	1e					
f All other contributions, gifts, grants, and similar amounts not included above	1f	4,128,866				
g Noncash contributions included in lines 1a-1f		\$				
h Total. Add lines 1a-1f		►	4,128,866			
Program Service Revenue						
		Busn. Code				
2a CONTRACT SERVICES		900099	101,725	101,725		
b ATTORNEY FEES		900099	10,880	10,880		
c DUES		900099	2,529	2,529		
d						
e						
f All other program service revenue						
g Total Add lines 2a-2f		►	115,134			
3 Investment income (including dividends, interest, and other similar amounts)			►	19,935		19,935
4 Income from investment of tax-exempt bond proceeds			►			
5 Royalties			►			
	(i) Real	(ii) Personal				
6a Gross Rents						
b Less rental exps						
c Rental inc or (loss)						
d Net rental income or (loss)		►				
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
b Less cost or other basis & sales exps						
c Gain or (loss)						
d Net gain or (loss)		►				
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a	28,250				
b Less direct expenses	b					
c Net income or (loss) from fundraising events	►	28,250	28,250			
9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses	b					
c Net income or (loss) from gaming activities	►					
10a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory	►					
Miscellaneous Revenue	Busn. Code					
11a MISCELLANEOUS INCOME	900099	14,400				14,400
b						
c						
d All other revenue						
e Total. Add lines 11a-11d	►	14,400				
12 Total Revenue. See instructions	►	4,306,585	143,384	0	34,335	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 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 governments and organizations in the U S See Part IV, line 21	54,360	54,360		
2 Grants and other assistance to individuals in the U S See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	186,575	121,941	50,674	13,960
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,514,527	2,336,735	125,058	52,734
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	171,995	155,896	11,042	5,057
9 Other employee benefits	421,202	381,783	27,063	12,356
10 Payroll taxes	219,523	198,976	14,093	6,454
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other	13,912	12,828	1,084	
12 Advertising and promotion				
13 Office expenses	139,056	131,937	1,175	5,944
14 Information technology				
15 Royalties				
16 Occupancy	123,211	111,499	7,790	3,922
17 Travel	40,970	37,107	1,283	2,580
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	56,414	53,050	992	2,372
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	31,916	28,405	2,554	957
23 Insurance	19,065	18,276	789	
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a STAFF/BOARD DEVELOPMENT	20,546	19,136	1,240	170
b FEES/ORGANIZATION DUES	18,836	14,524	2,843	1,469
c LIBRARY	15,524	15,442	82	
d DEFENDERS FOR JUSTICE EXP	15,062			15,062
e TECHNOLOGY/COMPUTERS	8,434	7,900	524	10
f All other expenses	9,003	7,980	813	210
25 Total functional expenses. Add lines 1 through 24f	4,340,012	3,960,897	254,756	124,359
26 Joint costs. Check here ► <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	1,761,032	1	1,030,652
	2 Savings and temporary cash investments	320,550	2	326,958
	3 Pledges and grants receivable, net	1,809,584	3	2,462,583
	4 Accounts receivable, net	9,478	4	7,655
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	22,189	9	11,426
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	312,641		
	b Less accumulated depreciation	180,754	97,604	131,887
	11 Investments—publicly traded securities	65,185	11	78,383
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11		15	
	16 Total assets Add lines 1 through 15 (must equal line 34)	4,085,622	16	4,049,544
Liabilities	17 Accounts payable and accrued expenses	265,577	17	287,125
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities Complete Part X of Schedule D	68,874	25	32,800
	26 Total liabilities Add lines 17 through 25	334,451	26	319,925
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	578,910	27	599,145
	28 Temporarily restricted net assets	3,172,261	28	3,130,474
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	3,751,171	33	3,729,619
	34 Total liabilities and net assets/fund balances	4,085,622	34	4,049,544

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990 Cash Accrual Other _____

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c 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?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both

Separate basis Consolidated basis Both consolidated and separate basis

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?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2009)

SCHEDULE A
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

NORTH CAROLINA JUSTICE CENTER

Employer identification number
56-1348186

Part I Reason for Public Charity Status (All organizations must complete this part) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
 4 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 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
 9 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III)
 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III—Functionally integrated d Type III—Other
 e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
 f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 (ii) A family member of a person described in (i) above?
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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

Schedule A (Form 990 or 990-EZ) 2009

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,005,804	2,734,350	3,352,118	4,197,104	4,128,866	16,418,242
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	2,005,804	2,734,350	3,352,118	4,197,104	4,128,866	16,418,242
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)						7,980,434
6 Public support. Subtract line 5 from line 4						8,437,808

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	2,005,804	2,734,350	3,352,118	4,197,104	4,128,866	16,418,242
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	51,349	85,135	96,897	17,059	19,935	270,375
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 IV)	31,384	35,884	58,823	13,144	14,400	153,635
11 Total support. Add lines 7 through 10						16,842,252
12 Gross receipts from related activities, etc (see instructions)					12	647,341
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► <input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	50.10 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	51.60 %
16a 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization	► <input checked="" type="checkbox"/>	
b 33 1/3 % support test—2008. 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	► <input type="checkbox"/>	
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	► <input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 9 of Part I.)
Section A. Public Support

Calendar year (or fiscal year beginning in) ►

	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or 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						
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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►

	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
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 IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%
19a 33 1/3 % support tests—2009. 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 and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2009 **NORTH CAROLINA JUSTICE CENTER** **56-1348186** **Page 4**

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Part II, Line 10 - Other Income Detail

OTHER INCOME \$ 153,635

SCHEDULE C
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Political Campaign and Lobbying Activities**

OMB No 1545-0047

2009**Open to Public
Inspection**

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

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

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

Name of organization

NORTH CAROLINA JUSTICE CENTER

Employer identification number

56-1348186**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures
- 3 Volunteer hours

► \$ _____
_____**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 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?

► \$ _____
► \$ _____
 Yes No
 Yes No

- 4a Was a correction made?
b If "Yes," describe in Part IV

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- 4 Did the filing organization file Form 1120-POL for this year?
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made 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

► \$ _____
► \$ _____
► \$ _____
► \$ _____
 Yes No

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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

Schedule C (Form 990 or 990-EZ) 2009

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group

B Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	14,345													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	19,536													
c	Total lobbying expenditures (add lines 1a and 1b)	33,881													
d	Other exempt purpose expenditures	4,306,131													
e	Total exempt purpose expenditures (add lines 1c and 1d)	4,340,012													
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	367,001													
<table border="1"> <tr> <td>If the amount on line 1e, column (a) or (b) is...</td> <td>The lobbying nontaxable amount is:</td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>		If the amount on line 1e, column (a) or (b) is...	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is...	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)	91,750													
h	Subtract line 1g from line 1a If zero or less, enter -0-	0													
i	Subtract line 1f from line 1c If zero or less, enter -0-	0													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount	290,084	303,239	366,132	367,001	1,326,456
b Lobbying ceiling amount (150% of line 2a, column(e))					1,989,684
c Total lobbying expenditures	14,791	21,175	50,120	33,881	119,967
d Grassroots nontaxable amount	72,521	75,810	91,533	91,750	331,614
e Grassroots ceiling amount (150% of line 2d, column (e))					497,421
f Grassroots lobbying expenditures	3,272	6,201	24,916	14,345	48,734

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

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
i Other activities? If "Yes," describe in Part IV			
j 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			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

- 1 Were substantially all (90% or more) dues received nondeductible by members?
 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?
 3 Did the organization agree to carryover lobbying and political expenditures from the prior year?

	Yes	No
1		
2		
3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

- 1 Dues, assessments and similar amounts from members
 2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).
 a Current year
 b Carryover from last year
 c Total
 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues
 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?
 5 Taxable amount of lobbying and political expenditures (see instructions)

1	
2a	
2b	
2c	
3	
4	
5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1.

Also, complete this part for any additional information

Part IV Supplemental Information (continued)

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990 ► See separate instructions.

OMB No 1545-0047

2009Open to Public
Inspection

Name of the organization

NORTH CAROLINA JUSTICE CENTER

Employer identification number

56-1348186**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)

- Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area
 Protection of natural habitat Preservation of certified historic structure
 Preservation of open space

2 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
2a	
2b	
2c	
2d	

- a Total number of conservation easements
b Total acreage restricted by conservation easements
c Number of conservation easements on a certified historic structure included in (a)
d Number of conservation easements included in (c) acquired after 8/17/06

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► — — — —

4 Number of states where property subject to conservation easement is located ► — — — —

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

 Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year

► — — — —

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

► \$ — — — —

8 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)?

 Yes No

9 In Part XIV, 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" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, 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) Revenues included in 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 SFAS 116 relating to these items

- a Revenues included in Form 990, Part VIII, line 1
b Assets included in Form 990, Part X

► \$ — — — —
► \$ — — — —

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a Public exhibition
 b Scholarly research
 c Preservation for future generations

- d Loan or exchange programs
 e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ► _____ %

b Permanent endowment ► _____ %

c Term endowment ► _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

	Yes	No
3a(i)		
3a(ii)		
3b		

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		312,641	180,754	131,887
e Other				

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ► 131,887

Part VII Investments—Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

Part IX Other Assets. See Form 990, Part X, line 15.

Total. (Column (b) must equal Form 990, Part X, col (B) line 15)

Part X Other Liabilities. See Form 990, Part X, line 25

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

32,800

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	4,306,585
2 Total expenses (Form 990, Part IX, column (A), line 25)	2	4,340,012
3 Excess or (deficit) for the year Subtract line 2 from line 1	3	-33,427
4 Net unrealized gains (losses) on investments	4	11,875
5 Donated services and use of facilities	5	
6 Investment expenses	6	
7 Prior period adjustments	7	
8 Other (Describe in Part XIV)	8	
9 Total adjustments (net) Add lines 4 through 8	9	11,875
10 Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	-21,552

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1 Total revenue, gains, and other support per audited financial statements	1	4,348,949
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments	2a	11,875
b Donated services and use of facilities	2b	30,489
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIV)	2d	
e Add lines 2a through 2d	2e	42,364
3 Subtract line 2e from line 1	3	4,306,585
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV)	4b	
c Add lines 4a and 4b	4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	4,306,585

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1 Total expenses and losses per audited financial statements	1	4,370,501
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities	2a	30,489
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIV)	2d	
e Add lines 2a through 2d	2e	30,489
3 Subtract line 2e from line 1	3	4,340,012
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV)	4b	
c Add lines 4a and 4b	4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	4,340,012

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Part XIV Supplemental Information (continued)

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

2009

**Open To Public
Inspection**

Name of the organization

Employer identification number
56-1348186

NORTH CAROLINA JUSTICE CENTER

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

Total

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a List events with gross receipts greater than \$5,000.

	(a) Event #1 DEFENDERS FOR J (event type)	(b) Event #2 (event type)	(c) Other events None (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts 28,250			28,250
	2 Less Charitable contributions			
	3 Gross revenue (line 1 minus line 2) 28,250			28,250
Direct Expenses	4 Cash prizes			
	5 Noncash prizes			
	6 Rent/facility costs			
	7 Food and beverages			
	8 Entertainment			
	9 Other direct expenses			
	10 Direct expense summary Add lines 4 through 9 in column (d)			► ()
	11 Net income summary Combine line 3, column (d), and line 10			► 28,250

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1 Gross revenue			
Direct Expenses	2 Cash prizes			
	3 Noncash prizes			
	4 Rent/facility costs			
	5 Other direct expenses			
	6 Volunteer labor <input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d)			► ()
	8 Net gaming income summary Combine line 1, column d, and line 7			►

9 Enter the state(s) in which the organization operates gaming activities

- a Is the organization licensed to operate gaming activities in each of these states?
b If "No," Explain

	Yes	No
9a		
10a		
11		
12		

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

- b If "Yes," Explain

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

13 Indicate the percentage of gaming activity operated in

- a The organization's facility
- b An outside facility

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records

	Yes	No
13a	%	
13b	%	

Name ►

Address ►

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

b If "Yes," enter the amount of gaming revenue received by the organization ► \$

amount of gaming revenue retained by the third party ► \$

c If "Yes," enter name and address of the third party

Name ►

Address ►

16 Gaming manager information

Name ►

Gaming manager compensation ► \$

Description of services provided ►

 Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$

15a

17a

Grant III Grants and Out-

Part III
Grants and Other Assistance to Individuals in the United States. Continue Part IV and Schedule I-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash or grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
---------------------------------	--------------------------	-----------------------------	-----------------------------------	---	--

Category	Sub-Category	Item	Quantity	Unit	Cost	Profit Margin	Total Profit
Electronics	Smartphones	iPhone 12	100	Unit	\$700	30%	\$21,000
Electronics	Smartphones	Samsung Galaxy S21	150	Unit	\$600	25%	\$18,750
Electronics	Smartphones	Google Pixel 6	50	Unit	\$800	35%	\$14,000
Electronics	Tablets	Apple iPad Air	80	Unit	\$500	20%	\$8,000
Electronics	Tablets	Microsoft Surface Go	60	Unit	\$400	15%	\$6,000
Electronics	Tablets	Amazon Kindle Paperwhite	40	Unit	\$300	10%	\$4,000
Electronics	Accessories	Apple AirPods Pro	120	Unit	\$200	40%	\$9,600
Electronics	Accessories	Samsung Galaxy Buds	90	Unit	\$150	30%	\$6,750
Electronics	Accessories	Google Pixel Buds	60	Unit	\$180	35%	\$6,300
Home Goods	Decor	Smart Home Light Bulbs	180	Unit	\$10	5%	\$1,800
Home Goods	Decor	Smart Home Thermostats	120	Unit	\$20	10%	\$1,200
Home Goods	Decor	Smart Home Cameras	90	Unit	\$30	15%	\$1,350
Home Goods	Decor	Smart Home Sirens	60	Unit	\$40	20%	\$2,400
Home Goods	Decor	Smart Home Sensors	40	Unit	\$50	25%	\$1,000
Home Goods	Decor	Smart Home Power Strips	30	Unit	\$60	30%	\$1,800
Home Goods	Decor	Smart Home Cables	20	Unit	\$70	35%	\$1,400
Home Goods	Decor	Smart Home Hubs	10	Unit	\$80	40%	\$800
Home Goods	Decor	Smart Home Routers	8	Unit	\$90	45%	\$720
Home Goods	Decor	Smart Home Switches	5	Unit	\$100	50%	\$500
Home Goods	Decor	Smart Home Sensors	3	Unit	\$120	55%	\$360
Home Goods	Decor	Smart Home Power Strips	2	Unit	\$140	60%	\$280
Home Goods	Decor	Smart Home Cables	1	Unit	\$160	65%	\$160
Home Goods	Decor	Smart Home Hubs	1	Unit	\$180	70%	\$180
Home Goods	Decor	Smart Home Routers	1	Unit	\$200	75%	\$200
Home Goods	Decor	Smart Home Switches	1	Unit	\$220	80%	\$220
Home Goods	Decor	Smart Home Sensors	1	Unit	\$240	85%	\$240
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$260	90%	\$260
Home Goods	Decor	Smart Home Cables	1	Unit	\$280	95%	\$280
Home Goods	Decor	Smart Home Hubs	1	Unit	\$300	100%	\$300
Home Goods	Decor	Smart Home Routers	1	Unit	\$320	105%	\$320
Home Goods	Decor	Smart Home Switches	1	Unit	\$340	110%	\$340
Home Goods	Decor	Smart Home Sensors	1	Unit	\$360	115%	\$360
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$380	120%	\$380
Home Goods	Decor	Smart Home Cables	1	Unit	\$400	125%	\$400
Home Goods	Decor	Smart Home Hubs	1	Unit	\$420	130%	\$420
Home Goods	Decor	Smart Home Routers	1	Unit	\$440	135%	\$440
Home Goods	Decor	Smart Home Switches	1	Unit	\$460	140%	\$460
Home Goods	Decor	Smart Home Sensors	1	Unit	\$480	145%	\$480
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$500	150%	\$500
Home Goods	Decor	Smart Home Cables	1	Unit	\$520	155%	\$520
Home Goods	Decor	Smart Home Hubs	1	Unit	\$540	160%	\$540
Home Goods	Decor	Smart Home Routers	1	Unit	\$560	165%	\$560
Home Goods	Decor	Smart Home Switches	1	Unit	\$580	170%	\$580
Home Goods	Decor	Smart Home Sensors	1	Unit	\$600	175%	\$600
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$620	180%	\$620
Home Goods	Decor	Smart Home Cables	1	Unit	\$640	185%	\$640
Home Goods	Decor	Smart Home Hubs	1	Unit	\$660	190%	\$660
Home Goods	Decor	Smart Home Routers	1	Unit	\$680	195%	\$680
Home Goods	Decor	Smart Home Switches	1	Unit	\$700	200%	\$700
Home Goods	Decor	Smart Home Sensors	1	Unit	\$720	205%	\$720
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$740	210%	\$740
Home Goods	Decor	Smart Home Cables	1	Unit	\$760	215%	\$760
Home Goods	Decor	Smart Home Hubs	1	Unit	\$780	220%	\$780
Home Goods	Decor	Smart Home Routers	1	Unit	\$800	225%	\$800
Home Goods	Decor	Smart Home Switches	1	Unit	\$820	230%	\$820
Home Goods	Decor	Smart Home Sensors	1	Unit	\$840	235%	\$840
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$860	240%	\$860
Home Goods	Decor	Smart Home Cables	1	Unit	\$880	245%	\$880
Home Goods	Decor	Smart Home Hubs	1	Unit	\$900	250%	\$900
Home Goods	Decor	Smart Home Routers	1	Unit	\$920	255%	\$920
Home Goods	Decor	Smart Home Switches	1	Unit	\$940	260%	\$940
Home Goods	Decor	Smart Home Sensors	1	Unit	\$960	265%	\$960
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$980	270%	\$980
Home Goods	Decor	Smart Home Cables	1	Unit	\$1,000	275%	\$1,000
Home Goods	Decor	Smart Home Hubs	1	Unit	\$1,020	280%	\$1,020
Home Goods	Decor	Smart Home Routers	1	Unit	\$1,040	285%	\$1,040
Home Goods	Decor	Smart Home Switches	1	Unit	\$1,060	290%	\$1,060
Home Goods	Decor	Smart Home Sensors	1	Unit	\$1,080	295%	\$1,080
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$1,100	300%	\$1,100
Home Goods	Decor	Smart Home Cables	1	Unit	\$1,120	305%	\$1,120
Home Goods	Decor	Smart Home Hubs	1	Unit	\$1,140	310%	\$1,140
Home Goods	Decor	Smart Home Routers	1	Unit	\$1,160	315%	\$1,160
Home Goods	Decor	Smart Home Switches	1	Unit	\$1,180	320%	\$1,180
Home Goods	Decor	Smart Home Sensors	1	Unit	\$1,200	325%	\$1,200
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$1,220	330%	\$1,220
Home Goods	Decor	Smart Home Cables	1	Unit	\$1,240	335%	\$1,240
Home Goods	Decor	Smart Home Hubs	1	Unit	\$1,260	340%	\$1,260
Home Goods	Decor	Smart Home Routers	1	Unit	\$1,280	345%	\$1,280
Home Goods	Decor	Smart Home Switches	1	Unit	\$1,300	350%	\$1,300
Home Goods	Decor	Smart Home Sensors	1	Unit	\$1,320	355%	\$1,320
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$1,340	360%	\$1,340
Home Goods	Decor	Smart Home Cables	1	Unit	\$1,360	365%	\$1,360
Home Goods	Decor	Smart Home Hubs	1	Unit	\$1,380	370%	\$1,380
Home Goods	Decor	Smart Home Routers	1	Unit	\$1,400	375%	\$1,400
Home Goods	Decor	Smart Home Switches	1	Unit	\$1,420	380%	\$1,420
Home Goods	Decor	Smart Home Sensors	1	Unit	\$1,440	385%	\$1,440
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$1,460	390%	\$1,460
Home Goods	Decor	Smart Home Cables	1	Unit	\$1,480	395%	\$1,480
Home Goods	Decor	Smart Home Hubs	1	Unit	\$1,500	400%	\$1,500
Home Goods	Decor	Smart Home Routers	1	Unit	\$1,520	405%	\$1,520
Home Goods	Decor	Smart Home Switches	1	Unit	\$1,540	410%	\$1,540
Home Goods	Decor	Smart Home Sensors	1	Unit	\$1,560	415%	\$1,560
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$1,580	420%	\$1,580
Home Goods	Decor	Smart Home Cables	1	Unit	\$1,600	425%	\$1,600
Home Goods	Decor	Smart Home Hubs	1	Unit	\$1,620	430%	\$1,620
Home Goods	Decor	Smart Home Routers	1	Unit	\$1,640	435%	\$1,640
Home Goods	Decor	Smart Home Switches	1	Unit	\$1,660	440%	\$1,660
Home Goods	Decor	Smart Home Sensors	1	Unit	\$1,680	445%	\$1,680
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$1,700	450%	\$1,700
Home Goods	Decor	Smart Home Cables	1	Unit	\$1,720	455%	\$1,720
Home Goods	Decor	Smart Home Hubs	1	Unit	\$1,740	460%	\$1,740
Home Goods	Decor	Smart Home Routers	1	Unit	\$1,760	465%	\$1,760
Home Goods	Decor	Smart Home Switches	1	Unit	\$1,780	470%	\$1,780
Home Goods	Decor	Smart Home Sensors	1	Unit	\$1,800	475%	\$1,800
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$1,820	480%	\$1,820
Home Goods	Decor	Smart Home Cables	1	Unit	\$1,840	485%	\$1,840
Home Goods	Decor	Smart Home Hubs	1	Unit	\$1,860	490%	\$1,860
Home Goods	Decor	Smart Home Routers	1	Unit	\$1,880	495%	\$1,880
Home Goods	Decor	Smart Home Switches	1	Unit	\$1,900	500%	\$1,900
Home Goods	Decor	Smart Home Sensors	1	Unit	\$1,920	505%	\$1,920
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$1,940	510%	\$1,940
Home Goods	Decor	Smart Home Cables	1	Unit	\$1,960	515%	\$1,960
Home Goods	Decor	Smart Home Hubs	1	Unit	\$1,980	520%	\$1,980
Home Goods	Decor	Smart Home Routers	1	Unit	\$2,000	525%	\$2,000
Home Goods	Decor	Smart Home Switches	1	Unit	\$2,020	530%	\$2,020
Home Goods	Decor	Smart Home Sensors	1	Unit	\$2,040	535%	\$2,040
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$2,060	540%	\$2,060
Home Goods	Decor	Smart Home Cables	1	Unit	\$2,080	545%	\$2,080
Home Goods	Decor	Smart Home Hubs	1	Unit	\$2,100	550%	\$2,100
Home Goods	Decor	Smart Home Routers	1	Unit	\$2,120	555%	\$2,120
Home Goods	Decor	Smart Home Switches	1	Unit	\$2,140	560%	\$2,140
Home Goods	Decor	Smart Home Sensors	1	Unit	\$2,160	565%	\$2,160
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$2,180	570%	\$2,180
Home Goods	Decor	Smart Home Cables	1	Unit	\$2,200	575%	\$2,200
Home Goods	Decor	Smart Home Hubs	1	Unit	\$2,220	580%	\$2,220
Home Goods	Decor	Smart Home Routers	1	Unit	\$2,240	585%	\$2,240
Home Goods	Decor	Smart Home Switches	1	Unit	\$2,260	590%	\$2,260
Home Goods	Decor	Smart Home Sensors	1	Unit	\$2,280	595%	\$2,280
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$2,300	600%	\$2,300
Home Goods	Decor	Smart Home Cables	1	Unit	\$2,320	605%	\$2,320
Home Goods	Decor	Smart Home Hubs	1	Unit	\$2,340	610%	\$2,340
Home Goods	Decor	Smart Home Routers	1	Unit	\$2,360	615%	\$2,360
Home Goods	Decor	Smart Home Switches	1	Unit	\$2,380	620%	\$2,380
Home Goods	Decor	Smart Home Sensors	1	Unit	\$2,400	625%	\$2,400
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$2,420	630%	\$2,420
Home Goods	Decor	Smart Home Cables	1	Unit	\$2,440	635%	\$2,440
Home Goods	Decor	Smart Home Hubs	1	Unit	\$2,460	640%	\$2,460
Home Goods	Decor	Smart Home Routers	1	Unit	\$2,480	645%	\$2,480
Home Goods	Decor	Smart Home Switches	1	Unit	\$2,500	650%	\$2,500
Home Goods	Decor	Smart Home Sensors	1	Unit	\$2,520	655%	\$2,520
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$2,540	660%	\$2,540
Home Goods	Decor	Smart Home Cables	1	Unit	\$2,560	665%	\$2,560
Home Goods	Decor	Smart Home Hubs	1	Unit	\$2,580	670%	\$2,580
Home Goods	Decor	Smart Home Routers	1	Unit	\$2,600	675%	\$2,600
Home Goods	Decor	Smart Home Switches	1	Unit	\$2,620	680%	\$2,620
Home Goods	Decor	Smart Home Sensors	1	Unit	\$2,640	685%	\$2,640
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$2,660	690%	\$2,660
Home Goods	Decor	Smart Home Cables	1	Unit	\$2,680	695%	\$2,680
Home Goods	Decor	Smart Home Hubs	1	Unit	\$2,700	700%	\$2,700
Home Goods	Decor	Smart Home Routers	1	Unit	\$2,720	705%	\$2,720
Home Goods	Decor	Smart Home Switches	1	Unit	\$2,740	710%	\$2,740
Home Goods	Decor	Smart Home Sensors	1	Unit	\$2,760	715%	\$2,760
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$2,780	720%	\$2,780
Home Goods	Decor	Smart Home Cables	1	Unit	\$2,800	725%	\$2,800
Home Goods	Decor	Smart Home Hubs	1	Unit	\$2,820	730%	\$2,820
Home Goods	Decor	Smart Home Routers	1	Unit	\$2,840	735%	\$2,840
Home Goods	Decor	Smart Home Switches	1	Unit	\$2,860	740%	\$2,860
Home Goods	Decor	Smart Home Sensors	1	Unit	\$2,880	745%	\$2,880
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$2,900	750%	\$2,900
Home Goods	Decor	Smart Home Cables	1	Unit	\$2,920	755%	\$2,920
Home Goods	Decor	Smart Home Hubs	1	Unit	\$2,940	760%	\$2,940
Home Goods	Decor	Smart Home Routers	1	Unit	\$2,960	765%	\$2,960
Home Goods	Decor	Smart Home Switches	1	Unit	\$2,980	770%	\$2,980
Home Goods	Decor	Smart Home Sensors	1	Unit	\$3,000	775%	\$3,000
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$3,020	780%	\$3,020
Home Goods	Decor	Smart Home Cables	1	Unit	\$3,040	785%	\$3,040
Home Goods	Decor	Smart Home Hubs	1	Unit	\$3,060	790%	\$3,060
Home Goods	Decor	Smart Home Routers	1	Unit	\$3,080	795%	\$3,080
Home Goods	Decor	Smart Home Switches	1	Unit	\$3,100	800%	\$3,100
Home Goods	Decor	Smart Home Sensors	1	Unit	\$3,120	805%	\$3,120
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$3,140	810%	\$3,140
Home Goods	Decor	Smart Home Cables	1	Unit	\$3,160	815%	\$3,160
Home Goods	Decor	Smart Home Hubs	1	Unit	\$3,180	820%	\$3,180
Home Goods	Decor	Smart Home Routers	1	Unit	\$3,200	825%	\$3,200
Home Goods	Decor	Smart Home Switches	1	Unit	\$3,220	830%	\$3,220
Home Goods	Decor	Smart Home Sensors	1	Unit	\$3,240	835%	\$3,240
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$3,260	840%	\$3,260
Home Goods	Decor	Smart Home Cables	1	Unit	\$3,280	845%	\$3,280
Home Goods	Decor	Smart Home Hubs	1	Unit	\$3,300	850%	\$3,300
Home Goods	Decor	Smart Home Routers	1	Unit	\$3,320	855%	\$3,320
Home Goods	Decor	Smart Home Switches	1	Unit	\$3,340	860%	\$3,340
Home Goods	Decor	Smart Home Sensors	1	Unit	\$3,360	865%	\$3,360
Home Goods	Decor	Smart Home Power Strips	1	Unit	\$3,380	870%	\$3,380
Home Goods	Decor	Smart Home Cables	1	Unit	\$3,400	875%	\$3,400
Home Goods	Decor	Smart Home Hubs	1	Unit	\$3,420	880%	\$3,420
Home Goods	Decor	Smart Home Routers	1	Unit	\$3,440	885%	\$3,440

111 **Supplemental Information** Complete this part to provide the information required in Part 111 and any other additional information

Part I: Line 2 - Procedures for Monitoring the Use of Grant Funds

ORGANIZATIONS RECEIVING GRANTS FROM THE JUSTICE CENTER ARE REQUIRED TO

SUBMIT PROCESS REPORTS SHOWING THE WORK THAT HAS BEEN DONE AS WELL AS A

3

SCHEDULE O
(Form 990)Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2009Open to Public
Inspection

Name of the organization

NORTH CAROLINA JUSTICE CENTER

Employer identification number
56-1348186

Form 990 - Organization's Mission or Most Significant Activities

THIS ORGANIZATION SERVES AS A PUBLIC POLICY ADVOCACY ORGANIZATION. ITS MISSION IS TO REDUCE AND ELIMINATE POVERTY IN NORTH CAROLINA BY HELPING TO ENSURE THAT EVERY HOUSEHOLD GAINS ACCESS TO THE RESOURCES, SERVICES AND FAIR TREATMENT THAT IT NEEDS TO ENJOY ECONOMIC SECURITY.

Form 990, Part III, Line 4d - All Other Achievements

BUDGET AND TAX; POLICY WATCH; HEALTH ACCESS; EDUCATION AND LAW.

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990

THE FORM 990 IS REVIEWED BY THE EXECUTIVE COMMITTEE PRIOR TO ITS FILING.

THE RETURN IS MADE AVAILABLE ELECTRONICALLY TO ALL BOARD MEMBERS.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

The North Carolina Justice Center maintains a comprehensive Conflict of Interest Policy which was adopted by its Board of Directors and which is clearly outlined in its Employee Policy Manual. The Justice Center ensures that this policy is communicated to employees by requiring that they sign a notice stating they know that they are responsible for reading the policies and following them. The Justice Center monitors compliance with the policy by requiring that all contracts that obligate the organization financially or outline services rendered are reviewed and signed by the Executive Director. Furthermore, no Justice Center staff member can enter into a contract unless it is authorized by the Executive Director.

Name of the organization

NORTH CAROLINA JUSTICE CENTER

Employer identification number

56-1348186

Form 990, Part VI, Line 15a - Compensation Process for Top Official

ANNUAL REVIEW CONDUCTED BY BOARD OF DIRECTORS BASED ON GOALS AND

OBJECTIVES.

Form 990, Part VI, Line 15b - Compensation Process for Officers

THE SALARIES OF ALL STAFF ARE REVIEWED ANNUALLY BY THE BOARD OF DIRECTORS

BASED ON RECOMMENDATION OF THE EXECUTIVE DIRECTOR.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

ORGANIZATION'S GOVERNING DOCUMENTS ARE MADE AVAILABLE UPON REQUEST TO THE

ORGANIZATION'S OFFICE.

56-1348186

FYE 12/31/2009

Federal Statements**Taxable Interest on Investments**

Description	Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75
INTEREST INCOME	\$ 19,935		14		
Total	\$ 19,935				

NCJUSTICE NORTH CAROLINA JUSTICE CENTER
56-1348186
FYE: 12/31/2009

Federal Statements

11/12/2010 2:16 PM

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
LITIGATION	\$ 13,601	\$ 13,601	\$ 2,000	\$
CONSULTANTS	61,256	59,256		952
COMPUTER SERVICES	88,939	87,987		150
CONTRACT SERVICES	96,085	92,278		
Total	\$ 259,881	\$ 253,122	\$ 5,657	\$ 1,102

Form 990, Part IX, Line 24f - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
CLASSIFIED ADS/ SUBSCRIPTI	\$ 7,869	\$ 6,983	\$ 676	\$ 210
OTHER	1,134	997	137	
Total	\$ 9,003	\$ 7,980	\$ 813	\$ 210

Form **8868**

(Rev April 2009)

Department of the Treasury
Internal Revenue Service**Application for Extension of Time To File an
Exempt Organization Return**

OMB No 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

► **Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868****Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).**

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete

►

Part I only

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

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print	Name of Exempt Organization	Employer identification number
File by the due date for filing your return. See instructions.	NORTH CAROLINA JUSTICE CENTER	56-1348186
Number, street, and room or suite no. If a P O box, see instructions	POST OFFICE BOX 28068	
City, town or post office, state, and ZIP code. For a foreign address, see instructions	RALEIGH NC 27611-8068	

Check type of return to be filed (file a separate application for each return)

- Form 990
 Form 990-BL
 Form 990-EZ
 Form 990-PF

- Form 990-T (corporation)
 Form 990-T (sec. 401(a) or 408(a) trust)
 Form 990-T (trust other than above)
 Form 1041-A

- Form 4720
 Form 5227
 Form 6069
 Form 8870

- The books are in the care of ► **MARY COLEMAN**

Telephone No ► **919-856-2174**

FAX No ►

- If the organization does not have an office or place of business in the United States, check this box

►

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)

for the whole group, check this box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension will cover

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **08/15/10**, to file the exempt organization return for the organization named above. The extension is for the organization's return for
- calendar year **2009** or
- tax year beginning _____, and ending _____

- 2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$

None

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev 4-2009)

Form 8868 (Rev. 4-2009)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return. See instructions	Name of Exempt Organization NORTH CAROLINA JUSTICE CENTER		Employer identification number 56-1348186
	Number, street, and room or suite no. If a P O box, see instructions POST OFFICE BOX 28068		For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions RALEIGH NC 27611-8068		

Check type of return to be filed (File a separate application for each return)

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ► **MARY COLEMAN**

Telephone No ► **919-856-2174** FAX No ►

- If the organization does not have an office or place of business in the United States, check this box

►

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) for the whole group, check this box ► If it is for part of the group, check this box

If this is

► and attach a

list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **11/15/10**

5 For calendar year **2009**, or other tax year beginning _____, and ending _____

6 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

7 State in detail why you need the extension

Additional time is requested to gather information to prepare a complete and accurate return.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b \$
c Balance Due Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c \$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ►

Title ► **CPA**

Date ► **08/09/10**

Form 8868 (Rev. 4-2009)