

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



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)

OMB No 1545-0047 Open to Public

Department of the Treasury

		ue Service The organization may have to use a copy of						Specii	JII
		2009 calendar year, or tax year beginning		and er		· · · ·			
	heck if ap	USRINS	tate Association for	<u>Justice</u>	e Foun	D Employer id	entification nu	mber	
∐ A	ddress o	change label or Doing Business As				91-1940182			
×Σ	lame cha	ange pnnt or Number and street (or P O box if mail is not de	livered to street address)	Ro	om/suite	E Telephone n	umber		
Πı	nitial retu	■ type.				(206) 464-10	11		
Πī	erminate	ed Specific City or town, state or country, and ZIP + 4				(200) 101 10			
==	mended	instruc-	WA 98	<u>101</u> -13	324	G Gross receip	its \$		522,117
=			VVA 30	101-10	1				
LJ ^	pplicatio	on pending F Name and address of principal officer.			H(a) Is t	this a group return	for affiliates?	=	s <u>X</u> No
		Gerhard Letzing 1809 Seventh Avenue #1500,	Seattle, WA 98101		H(b) Are	e all affiliates inclu	ded?	X Yes	s No
I T	ax-exer	mpt status: X 501(c) (3) ◀ (insert no) 4947	(a)(1) or 527		If "	'No," attach a list	(see instructions	s)	
	/ebsite		<u> </u>		H(a) Gr	oup exemption nu	mber >		
		rganization X Corporation Trust Association O	ther >	L Year	of forma	tion 1999	M State of leg	al domicil	le WA
P	art I	Summary							
	1	Briefly describe the organization's mission or most signif	icant activities: Pre	eparati	on of A	Amicus brief re	ports for the	State	
		Supreme Court							
9 <u>5</u>	₽								
- EE	<u>}</u>								
& Governanc	-	Charlethin have be seen and the department in	to anarations or disp			than 25% of	its not seed		
တို့	2	Check this box • I if the organization discontinued i					_	5	7
	1 3	Number of voting members of the governing body (Part					3		
ΞŢ.	4	Number of independent voting members of the governing	-				4		
≩ □	5	· · · · · · · · · · · · · · · · · · ·				· ·	5		0
Ť	6		<u></u>				6		
\overline{u}	7a	Total gross unrelated business revenue from Part VIII, co	olumin(C) time (2/1		٠ ا		7a		0
	b	Total gross unrelated business revenue from Part VIII, concept unrelated business taxable income from Form 990 T	Jine 34-ULIVE	J.	<u>. l .</u>	<u> </u>	7b		0
Revenue CANINE CACTURITIES]	ပ္တု	Prior Year	С	urrent Ye	ar
Ö	8	Contributions and grants (Part VIII, line 1h)	E - NOV 1 9 20	n. I	<u>සි </u>	43,	057		480,135
(3)	9	Program service revenue (Part VIII, line 2g) .	A CA	.	Ø.		0		
ven	10		701361636163	الترجيح	雪	50.	690		41,982
å	11	Investment income (Part VIII, column (A), lines 3, 4, and Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c,	1022 1 1 EN	UT I			0		0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, co				93	747		522,117
	13	Grants and similar amounts paid (Part IX, column (A), lir					0		0
	14						0		
		Benefits paid to or for members (Part IX, column (A), line	•				0		
es	15	Salaries, other compensation, employee benefits (Part I)		5-10)					0
ŠUŠ	16a	Professional fundraising fees (Part IX, column (A), line 1	•		factor for the	GREE ANNEE DE STATE DANS AN	U	non beautiful d	U
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25)		의					
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f		.		128,			<u> 151,859</u>
	18	Total expenses. Add lines 13-17 (must equal Part IX, co	lumn (A), line 25) .	.		128,			<u> 151,859</u>
	19	Revenue less expenses. Subtract line 18 from line 12.	<u> </u>			-35,		:	<u>370,258</u>
c o	ļ			į	Beginr	ning of Current Y	ear E	nd of Yea	<u> </u>
sets	20	Total assets (Part X, line 16)		l l		1,436,	827	1 <u>,</u> 8	807,085
AB	21	Total liabilities (Part X, line 26)		[7,	000		7,000
Net Assets or Fund Balances	22	Net assets or fund balances Subtract line 21 from line 2	0,	<u> [</u>		1,429,	827	1,8	800,085
Pai	rt II	Signature Block				<u> </u>			
		Under penalties of perjury, I declare that I have examined this return	including accompanying s	schedule	s and sta	atements, and to t	he best of my kr	owledge	
		and belief, this true, correct, and complete Declaration of preparer (other than officer) is based	on all in	formatio	n of which prepare	r has any knowl	edge.	
C:	_	you held					12-20	10	
Sig		Signature of officer ,				Date			
Her	е	1 / Flerhard Getzing	Execut	ive –	Dive	ctor			
		Type or print name and title							
		Preparer's	Date ,	Ch	eck if	F	Preparer's identif	ying numl	oer
Paic	i	suppature	1././.	sel		. IVI I	see instructions)		
	parer's	Gross o Dech	11/9/10	em	ployed	►X F	200359802		
•	Only	Arthur O Beck CPA	·			EIN_ ▶ 9	1-0063072		
236	,	if self-employed), address, and ZIP + 4 310-120th Avenue NE, Ste 20	1. Bellevue. WA 98	005			425) 453-049	98	
N/01	the IP	RS discuss this return with the preparer shown above? (see						7	□ Na
ividy	are in	o discuss this return with the preparer shown above? (se	:-	• •	• •	• • • •	<u>· · · </u>	Yes	<u> </u>

_		-1940182	Page Z
12	art III Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission:		
	Preparing Amicus briefs for the State Supreme Court		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X 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	X No
	If "Yes," describe these changes on Schedule O.		٠.٠٠
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 amour		nd
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	or granne or	
42	(Code:) (Expenses \$ 140,325 including grants of \$ 0) (Revenue \$	480	135 \
70	Preparation of Amicus brief reports for the State Supreme Court. Contract labor		
	payments were made to attorneys for these briefs.		
4b	(Code: 0 including grants of \$ 0 (Revenue \$		0)
		· • • • • • • • • • • • • • • • • • • •	
			·
	•		
		 .	
	. <u></u>		
4c	(Code.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$	·	<u>. 0</u>)
	•••••••••••••••••••••••••••••••••••••••		
4d	Other program services. (Describe in Schedule O.)		_
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	
4e	Total program service expenses ► 140,325		

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	}	ŀ	l
	complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C,			
	Part II	4	ļ	X
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	5_		
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	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
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? <i>If</i> "Yes," complete Schedule D, Part IV	9		×
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			<u> </u>
	quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	11		v
_	VII, VIII, IX, or X as applicable			X
•	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.		12.	
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	50)	SE	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	2	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets		i Philip Min	
_	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			A)e e
	Schedule D, Parts XI, XII, and XIII.	12		Х
12A	Was the organization included in consolidated, independent audited financial statements for the tax Yes No			
	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	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	14b		Х
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	15		Х
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	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	l l		
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	10		v
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes " complete Schedule H	20		X

	t IV Checklist of Required Schedules (continued)	940102	·	age 4
Га	Checklist of Required Schedules (continued)	т	Yes	No
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	21	1	x
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	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		<u> </u>	
	organization's current and former officers, directors, trustees, key employees, and highest compensated	1	İ	ĺ
	employees? If "Yes," complete Schedule J.	23		_ X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines		İ	
	24b through 24d and complete Schedule K If "No," go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year)
	to defease any tax-exempt bonds?	24c	<u> </u>	X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	ļ	Х
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			١.,
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<u> </u>	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	ľ	İ	1
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	256		
26	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20		<u> </u>
21	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			}
	If "Yes," complete Schedule L, Part III	27	ŀ	Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	4.1	cv ²	
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):		3 565	20.00
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	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,	ĺ		
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			.,
- 4	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	24	!	v
22	Part I	31		_X_
32	If "Yes," complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		_^
55	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
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	34		Х
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	35		Х
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	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		_X_
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	38	X 990	
		_	OHIO.	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance				
				Yes	No
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 2	2		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b (
C	Did the organization comply with backup withholding rules for reportable payments to vendors a	nd reportable		٠	
	gaming (gambling) winnings to prize winners?		1c	Х	
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(
b	If at least one is reported on line 2a, did the organization file all required federal employment tax	returns?	2b		
	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 co	overed by	1. 1. 5	<u> </u>	
	this return?		3a		X
þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		_3b_		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or or				
	over, a financial account in a foreign country (such as a bank account, securities account, or oth	er financial			l
	account)?		4a		Х
þ	If "Yes," enter the name of the foreign country: ▶		E . T	1 2,	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of For	eign Bank		1.	p.
	and Financial Accounts.			105	
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year		<u>5a</u>		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra		_5b	— —	X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	Regarding			
	Prohibited Tax Shelter Transaction?		5c	\vdash	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and				
	organization solicit any contributions that were not tax deductible?		_6a		X
	If "Yes," did the organization include with every solicitation an express statement that such control	ibutions or	l	. 1	ĺ
	gifts were not tax deductible?		6b		e ene
	Organizations that may receive deductible contributions under section 170(c).			£	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	tor goods		S	
	and services provided to the payor?		7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which required to file Form 8282?	il was	7.0		v
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	7c	- (°	X
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums o		2.2	4	
е	benefit contract?		7e	4 - 3	Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit of		7f	-	X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as requ		7g	-	X
•	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 10				
	required?		7n	. 1	Х
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) support		-		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsor				
	organization, have excess business holdings at any time during the year?		8		Х
	Sponsoring organizations maintaining donor advised funds.				
	Did the organization make any taxable distributions under section 4966?		9a		Х
	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		Х
	Section 501(c)(7) organizations. Enter:				
		10a			, 2
		10b			73.
	Section 501(c)(12) organizations. Enter.	1			
		11a			·
	Gross income from other sources (Do not net amounts due or paid to other sources]			٠.
		11b	التد		ζ.
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of		12a		
b	If "Yes." enter the amount of tax-exempt interest received or accrued during the year	12b		الاحيد	

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

Sec	tion A. Governing Body and Management				T	
1.	Enter the number of voting members of the governing hade	1 4-	1	-	Yes	No
1a b	Enter the number of voting members of the governing body	1a 1b		7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business re		hin with			
_	any other officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or			<u> </u>	 	 ^
-	supervision of officers, directors or trustees, or key employees to a management company of			3		x
4	Did the organization make any significant changes to its organizational documents since the prior Form		-	4	 	X
5	Did the organization become aware during the year of a material diversion of the organization			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				1	
-	of the governing body?			7a		x
b	Are any decisions of the governing body subject to approval by members, stockholders, or o			7b		X
8	Did the organization contemporaneously document the meetings held or written actions under			-67.5 <u>7</u> .		
	the year by the following.		J		7 m	ان ازد د میاند
а	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	ot be re	eached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedu			9a		x
Sect	tion B. Policies (This Section B requests information about policies not required by the	e Inte	rnal			
Reve	enue Code.)					
					Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a		<u>X</u>
b	If "Yes," does the organization have written policies and procedures governing the activities affiliates, and branches to ensure their operations are consistent with those of the organization			10ь		
11	Has the organization provided a copy of this Form 990 to all members of its governing body form?		-	11	х	
11A						1. 4
12a	· · · · · · · · · · · · · · · · · · ·			12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests					
-	rise to conflicts?		_	12b	x	
С	Does the organization regularly and consistently monitor and enforce compliance with the po					
	describe in Schedule O how this is done			12c	X	
13	Does the organization have a written whistleblower policy?			13	X	
14	Does the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and				7.7.0	1
	independent persons, comparability data, and contemporaneous substantiation of the delibe	ration a	and decision?		**** ***	
а	The organization's CEO, Executive Director, or top management official			15a		
b	Other officers or key employees of the organization			15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a	arrange	ement			
	with a taxable entity during the year?			16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization					
	its participation in joint venture arrangements under applicable federal tax law, and taken ste		-		ية يعود	1.04
	the organization's exempt status with respect to such arrangements?	<u> </u>		16b		
	ion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ► WA		- /= A - A - A - A - A - A - A - A - A - A	:		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	nd 990	-ı (501(c)(3)s	only)		
	available for public inspection. Indicate how you make these available. Check all that apply.					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing docur	nents,	conflict of inte	rest		
	policy, and financial statements available to the public.			41		
20	State the name, physical address, and telephone number of the person who possesses the b					
	organization: ► Gerhard Letzing 1809 Seventh Avenue #1500 Seattle WA 98101-1324		(206) 464-	1077		
	1809 Sevenin Avenue #1500 Seattle VVA 98101-1324					

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.

X Check this box if the organization did not compensate any current officer, director, or trustee.

(A)	(B) (C)						(D)	(E)	(F)	
Name and Title	Average		on (c		_	that ap		Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
FRANK LADENBURG PRES	10.							0	0	0
ROGER FELICE VICE PRES	10.							0	0	0
JANET L. RICE SEC/TREAS	10	l 						0	0	0
										

Part VII Section A. Officers, Directors, Tru (A)	(B)			(C)			(D)	(E)	(F)	
. Name and title	Average		_			hat ap	1/cportable		Reportable	Estimated	
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
								_			
								-			
					,						
										·	
1b Total							•	0	0		
Total number of individuals (including but no reportable compensation from the organization)		e lis	ted a	bove 0	e) wh	no re	ceive	ed more than \$1	00,000 in	Yes No	
3 Did the organization list any former officer, a employee on line 1a? If "Yes," complete Sci					yee,		-	st compensated	[
4 For any individual listed on line 1a, is the su the organization and related organizations gundividual									ıch		
5 Did any person listed on line 1a receive or a services rendered to the organization? If "Ye											
Section B. Independent Contractors											
Complete this table for your five highest com- compensation from the organization	pensated indep	end	ent c	ontra	acto	rs tha	at rec	ceived more tha	n \$100,000 of		
(A) Name and business a	ddress							(B) Description of serv	ices Cor	(C) npensation	
	·			_	_						
						\dashv					
Total number of independent contractors (incompret than \$100,000 in compensation from the contractors)			d to	thos	e lis	ted a	bove	e) who received			

0

41.982

522,117

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 re	quired to complete	columns (B), (C),	and (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	. 0	j		
2	Grants and other assistance to individuals in	<u>-</u>			
_	the U.S. See Part IV, line 22	0	1		
3	Grants and other assistance to governments,		 	67.7	
_	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			End through the said
5	Compensation of current officers, directors,			School Street Street Street Street Street Street	
	trustees, and key employees	0			}
6	Compensation not included above, to disqualified				
Ü	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan contributions (include section 401(k)		 		
Ŭ	and section 403(b) employer contributions)	0	Í		
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees).			· · · · · · · · · · · · · · · · · · ·	<u></u>
	, , , , ,	0			
a	Management	1,905			
b	Legal	1,905			
C	Accounting	<u>0</u>			
d	Lobbying	-			
e	Professional fundraising services See Part IV, line 17	0		The Late of the Control of the Contr	
f	Investment management fees	0			
9 12	Other	0		·····	<u> </u>
13	Advertising and promotion	289			
14	Office expenses	0			
15	Information technology	0			
16	Royalties	0			
17	Occupancy	0			
1 <i>7</i> 18					
10	Payments of travel or entertainment expenses	0			
40	for any federal, state, or local public officials	<u> </u>			
19	Conferences, conventions, and meetings	<u>0</u>			
20	Interest	0			
21	Payments to affiliates	0	0		
22	Depreciation, depletion, and amortization	0		0	0
23 24	Insurance				
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.)				
_	PROMOTIONAL MATERIALS	0			
a b	TRAVEL AND ACCOMODATIONS	1,273	1,273	·····	
	RESEARCH DATA	3,816			
Q C	PROFESSIONAL CONTRACTORS	133,042	133,042		
d	TAXES - BUSINESS	133,042	133,042		
e #	All other expenses PORTFOLIO FEES	11,534		11,534	
75 75		151,859	140,325	11,534	0
25	Total functional expenses. Add lines 1 through 24f	101,009	140,323	11,004	
26	Joint costs. Check here ► if following			ļ	
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising	1		[
	solicitation	J			

P	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	2,139	1	166,886
	2	Savings and temporary cash investments	1,434,688	2	1,640,199
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
	_	Schedule L	0	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	
Ŋ	7	Notes and loans receivable, net	0		0
Assets	8	Inventories for sale or use		8	<u> </u>
As	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or 10a 0		Š	
	100	other basis. Complete Part VI of Schedule D	A Commence of the Commence of	3 'a	经第二人次选 蓝绿斑
	h	Less: accumulated depreciation 10b	0	10c	0
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0		0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,436,827	16	1,807,085
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	0	20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	ซ์ย ซ	The state of the state of
iab		employees, highest compensated employees, and disqualified		9	- A
_		persons. Complete Part II of Schedule L	0	22	
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	7,000	24	7,000
	25	Other liabilities. Complete Part X of Schedule D	0	25	0
	26_	Total liabilities. Add lines 17 through 25	7,000	26	7,000
Š.		Organizations that follow SFAS 117, check here ▶ and			(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
JCe		complete lines 27 through 29, and lines 33 and 34.	The state of the s		· 李、京州中部 安之在。
ala	27	Unrestricted net assets		27	
ä	28	Temporarily restricted net assets		28	
our .	29	Permanently restricted net assets		29	2.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ► X	Bright Bright	2 %	12 Brown Carlotte Committee Committee Committee Committee Committee Committee Committee Committee Committee Co
S		and complete lines 30 through 34.	(神経をとうできない)と	25 2 1527	Programme Town Town South
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et	32	Retained earnings, endowment, accumulated income, or other funds .	1,429,827	32	1,800,085
Z	33	Total net assets or fund balances	1,429,827	33	1,800,085
	34	Total liabilities and net assets/fund balances	1,436,827	34	1,807,085

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form 990 (2009)

3b

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

200

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

4947(a)(1) nonexempt charitable trust.

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

Part I Reason for Public Charrity Status (All organizations must complete this part) See instructions.	Name of the org	ne of the organization Employer identification number										
The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) 1									<u> </u>			
A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A school described in section 170(b)(1)(A)(iii). (Attach Schedule E.) A nospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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)(V). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(V). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(Vi). (Complete Part II.) 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively to test for public safety. See section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11th. a										<u>nstructio</u>	ns	
2			-	-		_		•	-	:1		
A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).	=	•		•			oea in sec	ction 170	(D)(T)(A)(1).		
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 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). X 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 organization and complete lines 11e through 11h. a Type I b Type II c X Type III—Functionally integrated d Type III—Other e X 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). If the organization received a written determination from the IRS that it is a Type II, or Type III supporting organization, check this box. Since August 17, 2006, has the organization accepted any grif or contribution from any o	=						soction	170/b\/1\	(
hospital's name, city, and state: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.) 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). X 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	=	· ·		· ·						7/h\/4\/	(iii) Estartha	
In section 170(b)(1)(A)(iv). (Complete Part II.) 6	ho	spital's na	me, city, and st	ate.								
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.) A community trust described in section 170(b)(1)(A)(Vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(Vi). (Complete Part II.) 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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					ge or univ	versity ow	ned or op	erated by	a govern	mental ur	nit described	
described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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	6 🗌 A f	federal, sta	ate, or local gov	ernment or governme	ntal unit o	described	in sectio	n 170(b)(1)(A)(v).			
A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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		-		•	-	its suppo	rt from a	governme	ental unit o	or from th	e general public	
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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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						Complete	Part II)					
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	=					•	•	rom contr	ibutions, i	members	hip fees, and gross	
acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) 10												
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												
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	10 🔲 An	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).										
509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a Type I	11 X An	X An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the										
a Type I b Type II c X Type III—Functionally integrated d Type III—Other 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). 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. X X 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) A family member of a person described in (i) above? 11g(ii) X 11g(iii) Type of organization (described on lines 1-9 above or IRC section (see Instructions)) (iv) Did you notify the organization in col (i) organization (iii) Support	•											
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). 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. 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? (iv) Is the organization in col (iv) Is the organization in col (iv) Is the organization in col (iv) Is the organization in col (iv) Is the organization in col (iv) organization in the support? (iv) Is the organization in the support organization in col (iv) organization in the support? (vi) Is the organization in the support organization in the support? (vi) Is the organization in the support organization in the support?	1			_					te lines 1			
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). 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				•				_			• •	
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		_		-								
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? (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (iii) EIN (iii) EIN (iii) EIN (iii) EIN (iiii) Type of organization (iv) Is the organization in col (i) organization in col (i) organization in col (i) organization in col (i) organization in the support? (vi) Amount of support	50	9(a)(1) or	section 509(a)(2).								
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?		•			n from the	e IRS that	ıt is a Ty _l	pe I, Type	II, or Typ	e III supp		
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?	۵.`	•	•		nted any	auft or cor	tribution	from any	of the	· · · ·		
(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?	•	-		the organization acce	pica any	giit or oor	ili ibalion	non any	01 1110			
(ii) A family member of a person described in (i) above?				or indirectly controls,	either alo	ne or toge	ether with	persons	described	in (ii)	Yes No	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?		•				-						
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 (iv) Is the organization in col (i) Isted in your governing document? (vi) Did you notify the organization in col (vi) Is the organization in col (i) organization in col (i) organization in the support (vi) Amount of support (vii) Amount of vicin the organization in col (vi) organi												
(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 (v) Did you notify the organization in col (i) Isted in your governing document? (v) Did you notify the organization in organization in col (i) organization in col (i) organization in the support? (vi) Is the organization in organization in col (i) organization in the support? (vi) Is the organization in organization in col (i) organization in the support? (vi) Is the organization in organization in col (i) organization in the support? (vi) Is the organization in organization in organization in the organization in the organization in col (i) organization in the organization in organization in col (ii) organization in the organization in the organization in the organization in the organization in the organization in col (ii) organization in the org	•										[11g(iii)]	
organization above or IRC section governing document? col (i) of your (i) organized in the support? (see instructions) governing document? col (i) of your (i) organized in the support? U.S.?				(iii) Type of organization	(iv) Is the	organization	(v) Did y	•			1 ' '	
(see instructions)) support? U.S.?	\ <i>'</i>	• •	(, 2	1 '	1 ''		_		1 -		support	
Yes No Yes No Yes No				•		,	sup	port?	U	S ?		
· · · · · · · · · · · · · · · · · · ·					Yes	No	Yes	No	Yes	No	<u> </u>	
WSTLA Legal Educatid 91-0981502 9 X X X 76,116	WSTI A Lega	l Educatio	91-0981502	9	}	×	×		x		76 116	
7.57.B. 1.59.C. 2.50.C. <u> </u>	Locociic	- 0. 000.002		-			<u> </u>		····			
					ļ	ļ			•		0	
						Ĭ		Í			0	
							-					
				 	<u> </u>			<u></u>			0	
						1					0	
Total 76,116	Total											

18

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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 (f) Total (e) 2009 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 0 Tax revenues levied for the organization's 2 benefit and either paid to or expended on its behalf 0 3 The value of services or facilities furnished by a governmental unit to the organization without charge 0 Total. Add lines 1 through 3 0 0 0 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) 0 Public support. Subtract line 5 from line 4. Section B. Total Support (e) 2009 Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (f) Total 7 Amounts from line 4 0 0 0 0 0 0 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 0 9 Net income from unrelated business activities, whether or not the business is regularly carried on 0 10 Other income. Do not include gain or loss from the sale of capital assets 0 (Explain in Part IV). 0 11 Total support. Add lines 7 through 10. 12 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) 13 Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 0.00% 14 0.00% 15 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 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 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% 17a 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. 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 . ▶

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a ,or 17b, check this box and see instructions

Par	Part III Support Schedule for Organizations Described in Section 509(a)(2)										
~	(Complete only if you checked	<u>the box on line</u>	9 of Part I.)								
	tion A. Public Support	(-) 2005	(h) 2006	(=) 0007	(4) 2000	(-) 0000	(D. T-+-!				
Cali	endar 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	_1	_								
	include any "unusual grants.")	0	0				0				
2	Gross receipts from admissions, merchandise		1		•						
	sold or services performed, or facilities furnished	1	İ			,					
	in any activity that is related to the	1 1					_				
2	organization's tax-exempt purpose .	0	0				0				
3	Gross receipts from activities that are not an						0				
4	unrelated trade or business under section 513 Tax revenues levied for the organization's						0				
7	benefit and either paid to or expended on										
	its behalf		ol	:			0				
5	The value of services or facilities										
	furnished by a governmental unit to the										
	organization without charge	0	0				0				
6	Total. Add lines 1 through 5	0	0	0	0	0	0				
7a	Amounts included on lines 1, 2, and 3		Ì								
	received from disqualified persons						0				
h	Amounts included on lines 2 and 3 received										
~	from other than disqualified persons that	}									
	exceed the greater of \$5,000 or 1% of the	1									
	amount on line 13 for the year						0				
С	Add lines 7a and 7b	0	0	0	0	0	0				
8	Public support (Subtract line 7c from	A TRANSPORT OF THE		Market Annual Property of the Control of the Contro		Market State of the State of th					
<u> </u>	line 6)	The state of the state of			Control of the Control	Part & Ent. Sar .	0				
	tion B. Total Support endar year (or fiscal year beginning in)	(=) 2005 T	(b) 2006	(a) 2007	(4) 2009	(a) 2000	(f) Total				
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total				
9	Amounts from line 6	0	0	0	0	0	0				
10a	Gross income from interest, dividends,	1									
	payments received on securities loans,										
	rents, royalties and income from similar						0				
h	Sources						0				
b	section 511 taxes) from businesses										
	acquired after June 30, 1975			'			0				
С	Add lines 10a and 10b	0	0	0	0	0	0				
11	Net income from unrelated business										
	activities not included in line 10b,										
	whether or not the business is regularly	1					_				
40	carried on						0				
12	Other income. Do not include gain or										
	loss from the sale of capital assets (Explain in Part IV.)	0	اه	[0				
13	Total support. (Add lines 9, 10c, 11,	l									
	and 12)	l ol	ol	ol	o	o	0				
14	First five years. If the Form 990 is for the or	ganization's first	, second, third	, fourth, or fifth	tax year as a	section 501(c)(3	3)				
	organization, check this box and stop here.	-									
Sec	tion C. Computation of Public Support	Percentage									
15	Public support percentage for 2009 (line 8, c		by line 13, co	olumn (f))		15	0.00%				
16	Public support percentage from 2008 Schedu					16	0.00%				
Sec	tion D. Computation of Investment Inc	ome Percenta	ige								
17	Investment income percentage for 2009 (line					17	0 00%				
18	Investment income percentage from 2008 Sc	chedule A, Part I	II, line 17		[18	0.00%				
19a											
	not more than 33 1/3%, check this box and s						▶ ∐				
b	33 1/3% support tests-2008. If the organization of line 18 is not more than 33 1/3%, check this box at						. □				
20							··· [
20	Private foundation. If the organization did n	ot check a box (лінне 14, 19а	, or rap, check	THIS DOX BIID S	see monucuons	· · · P 🔲				

	990 or 990-EZ) 2009	Washington	State Associ	iation for Ju	stice Founda	ation		91-1940182	Page 4
Part IV	Supplemental	Information.	Complete t	this part to	provide the	explanatio	ns required	by Part II, line	10;
	Part II, line 17a								
	•								
•	, ,								
•••••	· · · · · · · · · · · · · · · · · · ·	·							
		• • • • • • • • • • • • • • • • • • • •							• • • • • • • • • • • • • • • • • • • •
				• • • • • • • • • • • • • • • • • • • •					
								••••	
		· 							
••									
									
**									• • • • • • • • • • • • • • • • • • • •
									• • • • • • • • • • • • • • • • • • • •
••									
				•••••					
						••••		· · · · · · · · · · · · · · · · · · ·	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

• S	section 501(c)(4), (5), or (6) or	ganizations: Complete Part III	.,			
N	ame of organization			Employe	er Identification number	
	shington State Association	for Justice Foundation		91-1940182		
Pa		the organization is exempt unde			organization.	
1		the organization's direct and indirect				
2						
3	Volunteer hours					
Pa	rt I-B Complete if t	the organization is exempt unde	er section 50°	1(c)(3).		
1	Enter the amount of any	excise tax incurred by the organization	on under sectio	n 4955 ▶ \$		
2		excise tax incurred by organization in				
3		ed a section 4955 tax, did it file Form				
4a	Was a correction made?	·			Yes No	
b	_If "Yes," describe in Part	· IV.			<u> </u>	
Pa		the organization is exempt unde	er section 501	1(c), except section 50°	1(c)(3).	
1	Enter the amount directl	y expended by the filing organization	for section 527	exempt function		
	• • • • • • • • • • • • • • • • • • • •					
2		filing organization's funds contributed				
	·	unction activities				
3		penditures. Add lines 1 and 2. Enter				
4		n file Form 1120-POL for this year?.				
5		sses and employer identification num				
		or each organization listed, enter the ibutions received that were promptly a				
		und or a political action committee (P				
	(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-	
,				0	C	
				0	C	
				0	C	
				0		
		 			,	

Р	Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).					
A B	Check ► if the filing organization belongs to an affiliated group.					
		bying Expenditures leans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals		
1a	Total lobbying expenditures to influence		0			
b	• • •	a legislative body (direct lobbying)		0		
С		a and 1b)	0	0		
d				0		
е	e Total exempt purpose expenditures (add lines 1c and 1d)					
f	Lobbying nontaxable amount. Enter the	amount from the following table in both				
	columns.		0	0		
	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		ing the second s		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	are Brain areas			
	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		in the second of the second		
	Over \$17,000,000	\$1,000,000.				
g						
h	· · · · · · · · · · · · · · · · · · ·					
į		ss, enter -0	0	0		
j	If there is an amount other than zero on section 4911 tax for this year?	either line 1h or line 1i, did the organization file Fo	rm 4720 reporting [Yes No		
	4-Y	ear Averaging Period Under Section 501(h)				

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	(ь) 2007	(c) 2008	(d) 2009	(e) Total	
 2a	Lobbying nontaxable amount	0	0		0	0	
b	Lobbying ceiling amount (150% of line 2a, column(e))					0	
С	Total lobbying expenditures	0	0		0	0	
d	Grassroots nontaxable amount	0	0		0	0	
е	Grassroots ceiling amount (150% of line 2d, column (e))			r grafie er en la sol. Zusta i de la sol.	g in the first profession	0	
f	Grassroots lobbying expenditures	0	0		0	0	

Schedule C (Form 990 or 990-EZ) 2009

-	(election under section 501(h)).	(;	a)		(b)	
		Yes	No	,	lmoun	t
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:					
а	Volunteers?		X			
þ	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		_X_			
С	Media advertisements?		X			
d	Mailings to members, legislators, or the public?		Х			
е	Publications, or published or broadcast statements?	ļ	X			
f	Grants to other organizations for lobbying purposes?		Х			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		X			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .		X			
ì	Other activities? If "Yes," describe in Part IV		X			
J	Total Add lines 1c through 1i			1,4	المراجعة المراجعة	0
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	276.00	X	أشك فأستأن	-	والأستكران وا
þ		Meaning.				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.	********	المعمد	1 3 3 3 A 10	andrid.	A Trice
d	<u> </u>	4/->//	<u> </u>	<u> </u>	g in a.	2 # # Q (\) _F
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6).	1(0)(:	o), or	section	on 	
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	ļ	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				ļ	<u> </u>
3	Did the organization agree to carryover lobbying and political expenditures from the prior year? .			3		
1	Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A "Yes." Dues, assessments and similar amounts from members					
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of		7.3 M			
-	political expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year	•	2b		-	
c	Total		2c			0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	s.	3			
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		3			
	lobbying and political expenditure next year?	.	4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			0
Part						
-	olete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line to complete this part for any additional information.					
		 .	·			
		••••			 .	
					 -	
						
-						

vvasr	lington State Association for Justice Foundation	91-1940182	
	orm 990 or 990-EZ) 2009		Page 4
Part IV	Supplemental Information (continued)		
	· 		
-			
	•••••••••••••••••••••••••••••••••••••••		
• • • • • • • • • • • • • • • • • • • •			
· - • ·			
	·		-
• • • • • • • • • • • • • • • • • • • •			
· - • · ·			
		•••••	
• • • • • • • • • • • • • • • • • • • •			
			_

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047 Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. ► See separate instructions.

Wash	ington State Association for Justice Foundate			91-1940182
Part			Similar Fund	Is or Accounts. Complete if
	the organization answered "Yes" to	p 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 d	_		
	funds are the organization's property, subject		-	
6	Did the organization inform all grantees, dor		-	
	used only for charitable purposes and not for			
_	purpose conferring impermissible private be			
Part	II Conservation Easements. Comp	lete if the organization answ	vered "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) 🔲 l	Preservation of	an historically important land area
	Protection of natural habitat		Preservation of	a certified historic structure
	Preservation of open space	·		
2	Complete lines 2a through 2d if the organization	ation held a gualified conservat	ion contribution	in the form of a conservation
•	easement on the last day of the tax year.	nion held a qualified conservat	ion contribution	in the form of a conservation
	casement on the last day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements .			2a
b	Total acreage restricted by conservation eas			2b
c	Number of conservation easements on a ce			2c
d	Number of conservation easements include			2d
3	Number of conservation easements modifie			
_	during the tax year	-,,		
4	Number of states where property subject to	conservation easement is loca	ted ►	
5	Does the organization have a written policy			handling of
	violations, and enforcement of the conserva		_	
6	Staff and volunteer hours devoted to monito			
	•	•		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing cons	servation easem	ents 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 re	eports conservation easements	s in its revenue a	and expense statement, and
	balance sheet, and include, if applicable, the	_	anization's finan	cial statements that describes
	the organization's accounting for conservation	on easements.		
Part				milar Assets.
	Complete if the organization answered	·		
	If the organization elected, as permitted und			
	art, historical treasures, or other similar asse			
	service, provide, in Part XIV, the text of the f If the organization elected, as permitted und			
	historical treasures, or other similar assets h			
	service, provide the following amounts relati	•		
		-		• \$
	(i) Revenues included in Form 990, Part VIII(ii) Assets included in Form 990, Part X			> \$
2	If the organization received or held works of	art, historical treasures, or other	er similar assets	for financial gain, provide the
	following amounts required to be reported ur			5 . F - · · · · ·
	Revenues included in Form 990, Part VIII, lir			> \$
	Assets included in Form 990, Part X			

Par	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	0	0	4.7.2	0	
b	Buildings	0	0	0	0	
C	Leasehold improvements	0	0	0	0	
d	Equipment	0	0	0	0	
е	Other	0	0	0	0	
	II. Add lines 1a through 1e. (Column (d) mu	ist equal Form 990, P	art X, column (B), lır	ne 10(c).) . ▶	0	

Schedule D (Form 990) 2009		Page
Part VII Investments—Other Securities	s. 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	0	
Closely-held equity interests	0	
Other	0	
	0	
	0	
•••••	0	
••••	0	
	0	
	0	
	0	
	0	***************************************
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related		<u> </u>
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
	0	
	<u> </u>	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	0	The state of the s
Part IX Other Assets. See Form 990, Part IX	art X, line 15.	
(a) Description	(b) Book value
		(
	-	
Total. (Column (b) must equal Form 990, Part X, c	ol. (B) line 15.)	
Part X Other Liabilities. See Form 990		
1. (a) Description of liability	(b) Amount	The state of the s
Federal income taxes		
		
	 	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)		
totali (outumi (u) must equal romi 390, ran A, cor (b) ime 23)		V

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.

	tule D (Form 990) 2009		Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financia	Statemen	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	522,117
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	151,859
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	370,258
4	Net unrealized gains (losses) on investments	4	
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	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	370,258
	Reconciliation of Revenue per Audited Financial Statements With Revenue	per Retur	n
1	Total revenue, gains, and other support per audited financial statements	1 (#.5x)	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	_	
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV.)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	0
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.)	4.0	0
C	Add lines 4a and 4b	4c 5	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		
	* * 	es per Keti	um
1 2	Total expenses and losses per audited financial statements	558.50	
_	Donated services and use of facilities	\$42	
a b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIV.)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	36 5°	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV.)		
c	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	0
	t XIV Supplemental Information		
and.	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a 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 part to provide any additional information		
		••••	
		•••••	

0 1 1 1 0 7	Washington State Association for Justice Foundation	91-1940182
Schedule D (Form		Page 5
Part XIV	Supplemental Information (continued)	
	,	
	•	•••••••••••••••••••••••••••••••••••••••
	•••••	
_		
•		
	• • • • • • • • • • • • • • • • • • • •	

* SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047
2009

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

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Washington State Association for Justice Foundation	91-1940182
Form 990 Part VI Section C Line 19 Governing documents, conflict of interest p	policy, and financial statements
are provided upon reguest.	
Form 990 Part VI Section B Line 12c Compliance with the Organization's confli	ct of interest policy is reviewed
at the annual board retreat.	
·	
	•••••
·	
	•••••
·	
······	
·····	
	•••••

STATE OF WASHINGTON



SECRETARY OF STATE

WASHINGTON STATE ASSOCIATION FOR JUSTICE FOUNDATION GERHARD LETZING 1809 7TH AVE SEATTLE WA 98106

AMENDMENT'

I, Sam Reed, Secretary of State of the State of Washington and custodian of its seal, hereby certify that documents meeting Washington statutory requirements have been filed and processed with the Secretary of State on behalf of:

WASHINGTON STATE ASSOCIATION FOR JUSTICE FOUNDATION

A Washington Non-Profit Corporation

UBI: 601 909 616.

Filing Date: December 12, 2008 Effective Date: December 12, 2008

Previous Name:

WASHINGTON STATE TRIAL LAWYERS ASSOCIATION FOUNDATION



Given under my hand and the seal of the State of Washington at Olympia, the State Capital.

Sam Reed, Secretary of State