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Form **990-EZ****Short Form**
Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2009Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

Open to Public Inspection**A** For the 2009 calendar year, or tax year beginning 7/01, 2009, and ending 6/30, 2010**B** Check if applicable:

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

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

C RESTORATIVE JUSTICE COMMUNITY ACTION
1201 MARQUETTE AVE #330
MINNEAPOLIS, MN 55403

D Employer identification number

87-0749129

E Telephone number

612-746-0788

F Group Exemption Number

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method: ☐ Cash ☒ Accrual
Other (specify) ►**I** Website: ► www.rjca-inc.org**H** Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)**J** Tax-exempt status (check only one) — ☒ 501(c) (3) (insert no.) ☐ 4947(a)(1) or ☐ 527**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ

► \$ 330,582.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

1 Contributions, gifts, grants, and similar amounts received	1	307,048.
2 Program service revenue including government fees and contracts	2	15,998.
3 Membership dues and assessments	3	
4 Investment income	4	163.
5a Gross amount from sale of assets other than inventory	5a	4,432.
b Less cost or other basis and sales expenses	5b	4,079.
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	353.
6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ☐		
a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	2,941.
b Less direct expenses other than fundraising expenses	6b	5,856.
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	-2,915.
7a Gross sales of inventory, less returns and allowances	7a	
b Less cost of goods sold	7b	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8 Other revenue (describe ► _____)	8	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	320,647.
10 Grants and similar amounts paid (attach schedule)	10	
11 Benefits paid to or for members	11	
12 Salaries, other compensation, and employee benefits	12	296,263.
13 Professional fees and other payments to independent contractors	13	47,031.
14 Occupancy, rent, utilities, and maintenance	14	29,923.
15 Printing, publications, postage, and shipping	15	3,309.
16 Other expenses (describe ► See Statement 2)	16	20,968.
17 Total expenses. Add lines 10 through 16	17	397,494.
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-76,847.
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	127,613.
20 Other changes in net assets or fund balances (attach explanation)	20	
21 Net assets or fund balances at end of year. Combine lines 18 through 20.	21	50,766.

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	28,925.	21,929.
23 Land and buildings		
24 Other assets (describe ► See Statement 3)	162,996.	90,984.
25 Total assets	191,921.	112,913.
26 Total liabilities (describe ► See Statement 4)	64,308.	62,147.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	127,613.	50,766.

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

Form 990-EZ (2009)

69 20

Part III Statement of Program Service Accomplishments (See the instructions.)What is the organization's primary exempt purpose? See Statement 5

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title

Expenses
(Required for section 501(c)(3) and (4) organizations and section 4947(a)(1) trusts; optional for others.)

28	<u>See Statement 6</u>		
	(Grants \$) If this amount includes foreign grants, check here	☐	28a 298,586.
29	<u>See Statement 7</u>		
	(Grants \$) If this amount includes foreign grants, check here	☐	29a
30	<u>See Statement 8</u>		
	(Grants \$) If this amount includes foreign grants, check here	☐	30a
31	Other program services (attach schedule) <u>See Statement 9</u>		
	(Grants \$) If this amount includes foreign grants, check here	☐	31a
32	Total program service expenses (add lines 28a through 31a)	☐	32 298,586.

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instrs.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
JOSH WILLIAMS 1201 MARQUETTE AVE SUITE 330 MINNEAPOLIS, MN 55403	Director 1.00	0.	0.	0.
CYNTHIA PROSEK 1201 MARQUETTE AVE SUITE 330 MINNEAPOLIS, MN 55403	Secretary 1.00	0.	0.	0.
JIM WEAVER 1201 MARQUETTE AVE SUITE 330 MINNEAPOLIS, MN 55403	Director 1.00	0.	0.	0.
KIMBERLY SPATES 1201 MARQUETTE AVE SUITE 330 MINNEAPOLIS, MN 55403	Chair 1.00	0.	0.	0.
MARIANA SHULSTAD 1201 MARQUETTE AVE SUITE 330 MINNEAPOLIS, MN 55403	Director 1.00	0.	0.	0.
JERRY CLARK 1201 MARQUETTE AVE SUITE 330 MINNEAPOLIS, MN 55403	VICE CHAIR 1.00	0.	0.	0.
TIM KINGSLEY 1201 MARQUETTE AVE SUITE 330 MINNEAPOLIS, MN 55403	Director 1.00	0.	0.	0.
MIKE STEWART 1201 MARQUETTE AVE SUITE 330 MINNEAPOLIS, MN 55403	Director 1.00	0.	0.	0.
SALLY WINGERT 1201 MARQUETTE AVE SUITE 330 MINNEAPOLIS, MN 55403	Director 1.00	0.	0.	0.
FRED REUNING 1201 MARQUETTE AVE SUITE 330 MINNEAPOLIS, MN 55403	Director 1.00	0.	0.	0.
JAY HEFFERN 1201 MARQUETTE AVE SUITE 330 MINNEAPOLIS, MN 55403	Treasurer 1.00	0.	0.	0.
JENNIFER MCDONALD 1201 MARQUETTE AVE SUITE 330 MINNEAPOLIS, MN 55403	Executive Direc 40.00	65,000.	0.	0.

Part V Other Information (Note the statement requirements in the instrs for Part V.)

See Statement 10

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33	X
34 Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	35b	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N.	36	X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 0.		
b Did the organization file Form 1120-POL for this year?	37b	X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	X
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A		
39 Section 501(c)(7) organizations Enter		
a Initiation fees and capital contributions included on line 9 39a N/A		
b Gross receipts, included on line 9, for public use of club facilities 39b N/A		
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 0. ; section 4912 0. ; section 4955 0.		
b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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 40b		X
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization 0.		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T 40e		X
41 List the states with which a copy of this return is filed MN		

42a The organization's books are in care of **RON OSTERBAUER** Telephone no **612-746-0780**
 Located at **1201 MARQUETTE AVE, SUITE 330 MINNEAPOLIS MN** ZIP + 4 **55403**

b 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)? **42b** Yes No X

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 a Foreign Bank and Financial Accounts.**

c At any time during the calendar year, did the organization maintain an office outside of the U.S.? **42c** Yes No X

If 'Yes,' enter the name of the foreign country: _____

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** — Check here. **43** ☐ N/A
 and enter the amount of tax-exempt interest received or accrued during the tax year ☐ N/A

44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ **44** Yes No X

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ **45** Yes No X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 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.	46	X
47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II.	47	X
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.	48	X
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	X
b If 'Yes,' was the related organization a section 527 organization?	49b	

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None'.

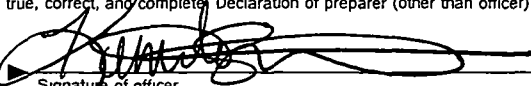
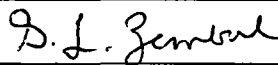
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
None				

f Total number of other employees paid over \$100,000 ▶

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None'.

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000 ▶

Sign Here	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.			
	 Signature of officer		2-2-11 Date	
	KIMBERLY SPATES Type or print name and title		Interim Exe Dir	
Paid Preparer's Use Only	Preparer's signature	GERALD L. ZEMBAL  Date 1/20/11	Check if self-employed ☐	Preparer's Identifying Number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	OBERMEIER & ASSOCIATES, P.A. 14300 NICOLLET CT STE 302 BURNSVILLE, MN 55306-8330		
	EIN	N/A		
	Phone no	952-898-2011		

May the IRS discuss this return with the preparer shown above? See instructions.

☒ Yes ☐ No

BAA Form 990-EZ (2009)

SCHEDULE A
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2009**Open to Public Inspection**

Name of the organization

RESTORATIVE JUSTICE COMMUNITY ACTION

Employer identification number

87-0749129

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 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 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 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
11 g (i)		
11 g (ii)		
11 g (iii)		

h Provide the following information about the supported organizations

(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 U S ?		(vii) Amount of Support
			Yes	No	Yes	No	Yes	No	
Total									

BAA 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 'unusual grants'.)	305,128.	387,163.	304,543.	343,640.	323,046.	1,663,520.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						0.
4 Total. Add lines 1-through 3	305,128.	387,163.	304,543.	343,640.	323,046.	1,663,520.
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)						164,026.
6 Public support. Subtract line 5 from line 4						1,499,494.

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	305,128.	387,163.	304,543.	343,640.	323,046.	1,663,520.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			631.	273.	163.	1,067.
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 (Explain in Part IV) See Part IV			726.			726.
11 Total support. Add lines 7 through 10						1,665,313.
12 Gross receipts from related activities, etc. (see instructions)					12	0.

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. ☐**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	90.0 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	0.0 %

16a 33-1/3 support test – 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. ☒**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. ☐**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. ☐**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. ☐**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. ☐

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 yr 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 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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, 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 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 yr 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 on 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. ☐						

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. ☐		
b 33-1/3 support tests — 2008. If the organization did not check a box on line 14 or 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. ☐		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ☐		

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.

This image shows a full page of handwriting practice paper. It features multiple sets of three horizontal lines: a solid top line, a dashed middle line, and a solid bottom line. These lines are repeated down the entire page to provide a guide for letter height and placement. The paper is otherwise blank, with no text or other markings.

Client 88585

RESTORATIVE JUSTICE COMMUNITY ACTION

87-0749129

1/10/11

02 42PM

Statement 1
Form 990-EZ, Part I, Line 5c
Net Gain (Loss) from Noninventory Sales

Publicly Traded Securities

Gross Sales Price: 4,432.
 Cost or Other Basis: 4,079.

Total Gain (Loss) Publicly Traded Securities \$ 353.

Total Net Gain (Loss) From Noninventory Sales \$ 353.

Statement 2
Form 990-EZ, Part I, Line 16
Other Expenses

Depreciation	\$	820.
DEVELOPMENT & TRAINING		1,329.
EQUIPMENT RENTAL		2,135.
Insurance		722.
MARKETING & PUBLICITY		886.
Office Expenses		4,979.
PROJECT EXPENSES		3,491.
TELEPHONE		5,685.
Travel		921.
Total	\$	<u>20,968.</u>

Statement 3
Form 990-EZ, Part II, Line 24
Other Assets

	<u>Beginning</u>	<u>Ending</u>
Furniture and Fixtures	\$ 2,076.	\$ 1,558.
Machinery and Equipment	558.	256.
Pledges and Grants Receivable	156,702.	86,024.
Prepaid Expenses and Deferred Charges	3,326.	2,812.
WEB-BASED REG SERVICES	334.	334.
Total	\$ <u>162,996.</u>	\$ <u>90,984.</u>

Statement 4
Form 990-EZ, Part II, Line 26
Total Liabilities

	<u>Beginning</u>	<u>Ending</u>
Accounts Payable and Accrued Expenses	\$ 24,308.	\$ 42,147.
Secured Mortgages and Notes Payable	40,000.	20,000.
Total	\$ <u>64,308.</u>	\$ <u>62,147.</u>

Client 88585

RESTORATIVE JUSTICE COMMUNITY ACTION

87-0749129

1/10/11

02:42PM

Statement 5
Form 990-EZ, Part III
Organization's Primary Exempt Purpose

TO IMPROVE COMMUNITY LIVABILITY THROUGH RESTORATIVE JUSTICE PRACTICES.

Statement 6
Form 990-EZ, Part III, Line 28
Statement of Program Service Accomplishments

COMMUNITY CONFERENCING AND NET WORKING

The mission of RJCA is to improve community livability through restorative justice practices. By creating a forum in which people impacted by livability crimes and those who commit these crimes can discuss the impact and determine restitution, RJCA achieves its primary objectives of effectively addressing livability crime, preventing community deterioration and further crime, and repairing the harm caused by criminal behavior. RJCA also achieves its secondary objective of fostering community-building by creating relationships as neighbors work together to reinforce norms of acceptable behavior, and as referred participants recognize the impact of their behavior, receive support, and connect with the community in positive ways.

This year, RJCA continued to network with many other restorative justice service providers in an effort to find ways to increase our combined capacities, advocate for restorative justice generally and for each programs specifically, and support the provision of restorative services in the City of Minneapolis, Hennepin County and statewide.

As a result of this networking, on January 1, 2010, the Powderhorn Park Neighborhood Association transferred its Midtown Community Restorative Justice programs to RJCA in order to further build capacity and to more effectively and efficiently provide community-based restorative services in the City of Minneapolis. The programs that were transferred were; Reparative Panels for Adults and Youth Peer Conferencing Program.

This year, a total of 312 people were scheduled to participate in a community conference to resolve a livability offense committed in one of our participating neighborhoods. In each community conference, community members and referred participants discussed the impact of crime and developed restitution agreements, which included volunteer service in the affected neighborhoods and other constructive activities such as writing apology letters, providing donations to local organizations, and personal development. As of June 30th, 2010, RJCA had resolved a total of 2,562 cases utilizing the community conference model since the program's inception in September 1997. Additionally, since the program transfer in January 2010, 29 of 34 people scheduled addressed their offense in a Midtown Community Restorative Justice Reparative Panel.

Referred participants who completed their agreements throughout this fiscal year performed approximately 1,822 hours of service in the neighborhoods where they committed their offenses. They also gave 183 apologies (both written and in-person) and donated \$850 to local organizations. This fiscal year, 83% of referred participants complied with their conference agreements and successfully completed the program. Approximately 86% of referred participants that have participated in a community conference have successfully completed their agreements since the program began in 1997.

Client 88585

RESTORATIVE JUSTICE COMMUNITY ACTION

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Statement 7
Form 990-EZ, Part III, Line 29
Statement of Program Service Accomplishments

COMMUNITY ORIENTATIONS AND COMMUNITY DIRECTED SERVICE PROJECTS

This fiscal year, RJCA coordinated 85 community conferences and 11 reparative panels, which allowed 289 to resolve their cases in a restorative manner (an average of 24 cases handled per month). Staff conducted two four-day restorative justice facilitator trainings this year in adding 13 new volunteer facilitators.

From July 1st, 2009- June 30th, 2010, RJCA involved 255 community members in community conferences/panels to address incidents that affected them and/or their neighborhoods. Community Orientations were introduced this fiscal year. The hour-long Community Orientations are immediately followed by Community Gatherings, a time where new participants can meet current participants and talk about their experiences in community conferences through during a meal and talking circle. RJCA also utilizes monthly "E-Notices" to keep volunteers, community participants, partners and supporters updated on current events and to report on conference outcomes.

As a part of our promotion of restorative justice, RJCA works with the students from the University of Minnesota. Through service learning projects like asset mapping, scheduling outreach opportunities, participating in community events and other community organizing and outreach, students gain experience and RJCA is able to sustain promotion of the use of restorative justice in Minneapolis neighborhoods.

RJCA staff contacts neighborhood organizations in our service area every three months to inquire about potential community service opportunities. Currently, we have 14 community-directed service projects identified in the 1st Precinct/Downtown Area; 20 service projects in the 2nd Precinct/Northeast & Southeast Area; 12 service projects in the 4th Precinct/North Minneapolis Area; and nine service projects in the 5th Precinct.

Statement 8
Form 990-EZ, Part III, Line 30
Statement of Program Service Accomplishments

NORTH MINNEAPOLIS ADVISORY TEAM

During this fiscal year, RJCA formed a North Minneapolis Advisory Team in an effort to increase North Minneapolis participation, attendance, and completion. From the North Minneapolis Advisory Team's recommendations, RJCA staff has recently developed a six-month plan for improving programming in North Minneapolis. This plan has been communicated back to the team and is in the beginning stages of implementation.

These changes include: implementing in-person group intakes for referred participants; creating opportunities for community members to be involved in the conferencing process from start (intake) to finish ("case management"); encouraging a less scripted process with no agreement guidelines allowing facilitators to create an environment that supports a safe space and open dialog for everyone involved; and organizing community circles as a way for conference participants to connect beyond the one-time community conferences.

This fiscal year, 16 North Minneapolis cases were closed by our Case Coordinator. Of the 16 cases closed, 11 were closed successfully upon offender's completion of their agreement, which resulted in 107 hours of service completed in the North Minneapolis community, six apologies given, 30 hours of personal development

Client 88585

RESTORATIVE JUSTICE COMMUNITY ACTION

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Statement 8 (continued)
Form 990-EZ, Part III, Line 30
Statement of Program Service Accomplishments

completed, and two donations to local charities. Our case coordinator worked with all of these individuals to assist them with completing their agreements and sent reminder and warning letters to each outlining what was needed to complete. The North Minneapolis Advisory Team continues to work to find ways in which to improve our completion rates for individuals in North Minneapolis.

Statement 9
Form 990-EZ, Part III, Line 31
Statement of Program Service Accomplishments

Description	Grants	Program Service Expenses
YOUTH PILOT Also during the 2010 Fiscal Year RJCA wrapped up the Youth Pilot, which was designed to test the feasibility of utilizing our current model to conference youth cases. The pilot was run by two William Mitchell College of Law students, who concluded the pilot by writing an evaluation report of the 6-month pilot. Upon completion of the Pilot in December 2009, it was recommended that RJCA table the further development and implementation of a community conferencing program for youth until FY12 and instead focus on sustaining and improving the Youth Peer Conferencing Program transferred from MCRJ to RJCA in January 2010.		
Includes Foreign Grants: No		
Total \$ <u>0.</u> \$ <u>0.</u>		

Statement 10
Form 990-EZ, Part V
Regarding Transfers Associated with Personal Benefit Contracts

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? No