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# Form 990

# **Return of Organization Exempt From Income Tax**

OMB No 1545-0047 2011

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(HTA)

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

<u>A</u>	For the	2011 cal	endar year, or tax year beginning , and ending		
<u>B</u> (	Check if a	applicable	C Name of organization Alliance for a Just Society D	Employer ide	ntification number
	Address (	change	Doing Dunyage As	-1635554	
	Name ch	ange		Telephone nu	mber
□ ı	nıtıal retu	ım		06) 568-540	0
	Ferminat	ed	City or town, state or country, and ZIP + 4		
	Amended	retum	Seattle WA 98118 G	Gross receipts	1,909,338
	Application	on pending	F Name and address of principal officer H(a) is this a	a group return f	or affiliates? Yes X No
			LeeAnn Hall 3518 S Edmunds St, Seattle, WA 98118 H(b) Are all	affiliates includ	ed? Yes No
ı T	ax-exem	pt status	X 501(c)(3) 501(c) ( ) ◀ (insert no ) 4947(a)(1) or 527 If "No,"	" attach a list (s	see instructions)
JV	Vebsite	: ▶ allia		exemption num	ber ▶
		rganization			M State of legal domicile WA
P	art l	Sui	mmary	1004	W
	1		describe the organization's mission or most significant activities: AJS invested in	n public edu	cation.
	1	-	h and training that advanced community based campaigns which expanded health		
9			and small business access to credit, and stopped predatory banking practices.		
Ē					
Activities & Governance	2	Check t	his box   if the organization discontinued its operations or disposed of more than 25% of its	net assets.	
<u>ن</u> مع	3		r of voting members of the governing body (Part VI, line 1a)		3 22
Se	4	Number	r of independent voting members of the governing body (Part VI, line 1b)	4	
ž	5	Total nu	umber of individuals employed in calendar year 2011 (Part V, line 2a)	5	18
AC	6		umber of volunteers (estimate if necessary)		610
	7a		nrelated business revenue from Part VIII, column (C), line 12		
	b	Net unr	elated business taxable income from Form 990-T, line 34	7	
				ior Year	Current Year
e	8		utions and grants (Part VIII, line 1h)	2,071,7	
Revenue	9		m service revenue (Part VIII, line 2g)	54,28	
8	10 11		nent income (Part VIII, column (A), lines 3, 4, and 7d)	6,82	
	12		evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,133,09	35 756 92 1,908,949
	13		and similar amounts paid (Part IX, column (A), lines 1–3).	2,133,0	
	14		s paid to or for members (Part IX, column (A) RME 4 FIVED	2.00,0	200,000
	15	Salaries	, other compensation, employee benefits (Part IX, column (A), lines 5-19)	699,32	20 766,968
JSei	16a	Profess	ional fundraising fees (Part IX, column (%), line 11e)		2,750
Expenses	b		ndraising expenses (Part IX, column ((D)) line 26ly € 1 7 2012 832 33	··	
Щ	17	Other e	xpenses (Part IX, column (A), lines 11a-11d, 11f-24e)	411,22	20 571,212
	18	Total ex	re less expenses. Subtract line 18 from line 12.	1,346,9 <sup>-</sup>	1,640,430
	19	Revenu		786,1	
Assets or			<del></del>	of Current Yea	
SS6 Rala	20		ssets (Part X, line 16)	3,650,3	
e de la	21 22		abilities (Part X, line 26)	744,98	
Pa	rt II		sets or fund balances. Subtract line 21 from line 20	2,905,3	58 3,173,877
Ųnd	er penalt	es of penu	ry, I declare that, have examined this leturn, including accompanying schedules and statements, and to the	e best of my kno	owledge
and	belief, it	is true, com	ect/and complete Declaration of preparer (other man officer) is based on all information of which preparer	has any knowle	odge
Sig	ın		Tull Fall	8	-15-12
He	-		Stignature of officer  Lall Syacutara Discrete	Date	
			LEENIN MAIL CRACLINE DIRECTOR		
		Pon	Type or print name and title  nt/Type preparer's name  Preparer's signature  Date		PTIN
Pa	id				k 🗓 ɪf
	eparei	r Kat	thryn Donaldson (UUV) (JWW) 8/12/2	2012 self-e	employed P01318306
	e Only	1	n's name ▶ Firm	m's EIN 🕨	
			n's address ▶ 1924 SE 35th Ave, Portland, OR 97214 Pho	none no (50	03) 233-6078
Ma	y the II	RS discu	ss this return with the preparer shown above? (see instructions)		X Yes No
			luction Act Notice, see the separate instructions.		Form <b>990</b> (2011)

Form 9	90 (2011)	Alliance for a Just Society	91-1635554	Page 2
Pa	rt III	Statement of Program Service Accomplishments		
	<del></del>	Check if Schedule O contains a response to any question in this Part III		. X
1	Briefly d	escribe the organization's mission:	<del></del>	
-		ess economic, racial and social ineguities by strengthening community organizations.		
		cuting regional and national campaigns.		
			·	
2	Did the	organization undertake any significant program services during the year which were not listed or	1	
_		Form 990 or 990-EZ?		X No
	-	describe these new services on Schedule O.		<u></u>
3		organization cease conducting, or make significant changes in how it conducts, any program		
		?	Yes	X No
		describe these changes on Schedule O.	· · L les	
4		e the organization's program service accomplishments for each of its three largest program serv	ices as measure	d by
•		es. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to re		
	•	and allocations to others, the total expenses, and revenue, if any, for each program service repor	•	J1
	grants c	ind allocations to others, the total expenses, and revenue, it ally, for each program service repor	teu.	
4a	(Code:	) (Expenses \$ 490,320 including grants of \$ 219,500 ) (Reven	uo \$	0)
44		TREET ALLIANCE NETWORK. AJS provided staff training, strategic planning assistance, resea		
		argenium arrange and national accordination for small breakers applitions in 45 states		
	across	he MSA network. With AJS support, MSA partners conducted outreach to thousands of small	•••••	
	busines	s owners, educated business owners about issues of importance to small businesses and local	••••••	• • • • • • • • • • • • • • • • • • • •
		ies, and involved small business owners in over 50 public education events. AJS worked with		
		iliates to conduct door-to-door surveys of small business owners in 9 states, and wrote		
		n reports for release in 4 states educating the public about small business views on health		
		ues, access to credit, and alternative lending models. AJS provided training and		
	network	ing opportunities for 150 small business owners to build spokesperson skills and make new	· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •
		ions across a national network through events and activities relating to a range of issues,		
		tion reform.		
4b		) (Expenses \$ 469,854 including grants of \$ 80,000 ) (Reven		
	KESEA	RCH, ISSUE EDUCATION & OUTREACH. AJS supported community organizations in their effor	ts to	
	educate	the public about access to health care, racial equity in health, budget equity, living		
	wage jo	bs, and other issues related to economic and racial justice. To support these efforts, we		
		d and distributed the following research reports: Food Choices: Families or Corporations;		
		om Main Street: Small Business Views on Credit and Lending; Guide to Money in Politics:		
		ch Tools for Issue Campaigns; Medicaid Matters to Idaho Counties; State Investment in		
		d Means Jobs and Economic Activity; Protecting Montana's Future Montanans Talk About		
		nvestments; and Keeping the Fox out of the Henhouse: Protecting New Health Insurance		
		ges from Health Insurance Conflict of Interest. We distributed our reports on our website.		
		events and community forums, at press events, and other methods. In addition, we		
		ed to coordinate a 37-organization network (HROP)		
4c	(Code:	) (Expenses \$ 236,235 including grants of \$ 0 ) (Reven		0)
		NG & ORGANIZATIONAL DEVELOPMENT. AJS held 35 trainings/workshops/educational forum		
		ants. Leaders & staff from more than 35 organizations nationwide participated in these trainings.		
		s (public speaking, community organizing, etc), issue trainings on topics ranging from racial disp		
		he recession, and supervision & time management. Events included sessions of AJS' training in		
		thip Academy, to develop the skills & political analysis of a core set of community leaders in 6 st		
		eaders in 3 states, working with 3 Native senior organizers to adapt community organizing princi		
		tensive training session on leadership that was attended by 18 executive directors and key staff		
		ations. AJS partnered with the Leadership Center for the Common Good to provide 76 senior or		
		ing campaigns. AJS organized other trainings including: trainings for annual meetings in OR, W.		
		s for staff & leaders on the role of state banks, health disparities work & other health issues; a ca		
		to examine successful campaigns where race & racism were central; a forum on Health Equity is		
		c multi-media interventions. Southside Commons, AJS' community center, was utilized by 30 or	ganizations for ev	ents/meetiı
4d	-	rogram services. (Describe in Schedule O.)		
	(Expens		4,100)	
Δa	Total n	rogram service expenses ► 1.385.058		

### Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Х 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . 2 Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 Х Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, 5 Χ Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 6 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 . . . . . . . . . Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Х 8 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes." Χ Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . . . . . 10 Χ If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more 11b Х c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more Х d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Part X..... 11f Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional . 12b Х Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E........ Χ 13 b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . 14b Х 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, Parts II and IV . . . . . 15 Х 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, Parts III and IV . . . . . . . . . . . 16 Χ Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)....... 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Х Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . . . . . . . . . . . . . . b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . .

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	245		X
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	23a		
-	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	251		v
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	25b		X
	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,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			.,
20	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			, ` ´ `
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	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 (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N.	"		
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32	.	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		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	x	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		x
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		Х
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	Х	
		Form	990	(2011)

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
	Official Confidence of Confidence to any question in the Fart V	<u>· · · · · · · · · · · · · · · · · · · </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	ĺ		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	L	L	
	gaming (gambling) winnings to prize winners?	1c	Х	<u> </u>
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 18		L	ļ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		ļ	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<u>3a</u>		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<b> </b>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4-		l
_	account)?	4a		X
Ь	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	l		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<del> </del>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		^
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-	<del>                                     </del>	
ou	organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	l	Ì	
	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ĺ		
	required to file Form 8282?	7c	<u> </u>	X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	L	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h	<u> </u>	<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	ł		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	-		ļ
•	organization, have excess business holdings at any time during the year?	8		-
9 a	Did the organization make any taxable distributions under section 4966?	9a	<del> </del>	<del> </del>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	<del>                                     </del>
10	Section 501(c)(7) organizations. Enter:			<del>                                     </del>
а	Initiation fees and capital contributions included on Part VIII, line 12	ĺ		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	l		
11	Section 501(c)(12) organizations. Enter:	ĺ		
а	Gross income from members or shareholders	ĺ		1
b	Gross income from other sources (Do not net amounts due or paid to other sources		1	i
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	l	1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>		<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O.	1	1	
Ь	Enter the amount of reserves the organization is required to maintain by the states in which	ĺ		1
_	the organization is licensed to issue qualified health plans	ł		
C	Enter the amount of reserves on hand	445	<del> </del>	-
14a b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b	-	X
U	ii 100, mas it med a 1 omi 120 to report mese payments: ii 140, provide an explanation in schedule O	170	<u> </u>	i

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No Enter the number of voting members of the governing body at the end of the tax year . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent . . . 20 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . . 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Х Are any governance decisions of the organization reserved to (or subject to approval by) members, Χ Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?. X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13.......... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Х 14 Х Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a Χ 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 arrangement 16a Χ If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 OR, WA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► LeeAnn Hall 3518 S Edmunds St, Seattle, WA 98118

Form 990 (2011)	Alliance for a Just Society	91-1635554	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Emplo	oyees, Highest Compensated	
	Employees, and Independent Contractors		

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

Check if Schedule O contains a response to any question in this Part VII.

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (C) Position (A) (B) (do not check more than one (D) (E) (F) Estimated Name and Title Average box, unless person is both an Reportable Reportable hours per officer and a director/trustee) compensation compensation amount of

	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Beverly Deleonardis										
Chair & Board member	2.00	X	Ļ	X		ļ	ļ	0	0	0
(2) Adan Ramirez Vice-Chair & Board member	2.50	Х		x				0	0	0
(3) Deana Knutsen					Ī					
Sec/Treas & Board member	3.75	Х		X		į		<u> </u>	О	0
(4) Danny Hosang										
Board member	2 00	Х	L				L	0	o	0
(5) Ramon Ramirez										
Board member	3 00	Х	L		<u> </u>			0	0	0
(6) Javier Valdes			l							
Board member	2.50	X	<u> </u>	<u> </u>		ļ		0	0	0
(7) Cesar Palomeque										
Board member	2.00	Х	<u> </u>	<u> </u>		ļ	<u> </u>	0	0	0
(8) Molly Moody Board member & Project director	42.50	х						42,000	0	9,302
(9) Michaelynn Hawk										
Board member & Project director	42.00	Х				<u> </u>		24,700	0	0
(10) Rinku Sen										
Board member	2.00	Х	L			<u> </u>		0	0	0
(11) Jesse Graham						1				
Board member	3.00	Х			<u> </u>	<u> </u>		0	0	0
(12) Tim Conmee			1	1		1	1	1		
Board member	2.00	X	L.		L	ļ	L		0	0
(13) Baher Butti			1			1				
Board member	2.00	X	L	<u> </u>	L_	<u> </u>		0	0	0
(14) Kayse Jama			1	1						

**Board member** 

ol

ol

Authors   Auth	Pa	rt VII	Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, a	nd	High	est	Compensated	Employees (co	ntinu	ed)	
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Name aird tate    Average   Name aird tate   Average   Name   Average   Name			(A)	(B)	(dor	not ch				one	(D)	(E)		(F)	
Secretaries Director (see Sched of for total hours)   Secretaries Director (see Sched of or intelled hours)   Secretaries Director (see Schedule J for such individual of semplose)   Secretaries Director (see Schedule J for such individual of semploses)   Secretaries Director (see Schedule J for such individual of semploses)   Secretaries Director (see Schedule J for such individual of semploses)   Secretaries Director (see Schedule J for such individual of semploses)   Secretaries Director (see Schedule J for such individual of semploses)   Secretaries Director (see Schedule J for such individual of semploses)   Secretaries Director (see Schedule J for such individual of semploses)   Secretaries Director (see Schedule J for such individual of semploses)   Secretaries Director (see Schedule J for such individual of semploses)   Secretaries Director (see Schedule J for such individual of semploses)   Secretaries Director (see Schedule J for such individual of semploses)   Secretaries Director (see Schedule J for such individual of semploses)   Secretaries Director (see Schedule J for such individual of semploses on line 137 if "Yes," complete Schedule J for such individual of semploses on line 137 if "Yes," complete Schedule J for such individual of semploses on line 137 if "Yes," complete Schedule J for such individual of semploses on line 137 if "Yes," complete Schedule J for such individual of semploses on line 137 if "Yes," complete Schedule J for such individual of semploses on line 137 if "Yes," complete Schedule J for such individual of semploses on line 137 if "Yes," complete Schedule J for such individual of semploses on line 137 if "Yes," complete Schedule J for such individual of semploses on line 137 if "Yes," complete Schedule J for such individual of semploses on line 137 if "Yes," co				Average	box,	unle	ss pe	erson	ıs bot	n an	Reportable	Reportable		stimated	
155  Ron Williams				•		_		irect	or/trus	tee)			a		ľ
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155  Ron Williams					ĺ	"			Ē	l	1				
19. Sary Delgado	(15)	Ron Willia	ams			$\vdash$	$\vdash$			╫┈	· · · · · · · · · · · · · · · · · · ·				
Board member   S.00   X				2.50	х		l				0	o	ı		0
147  Jason McKain	(16)	Gary Delg	gado												
Board member	Board	member		5.00	X			L	<u> </u>		0	0			0
18   Andrea Shipley   1.25   X	~							İ	1				ı		
Board member   1.25   X				2.00	X	<u> </u>		<u> </u>	<u> </u>		0	0			0
Sob Fulkerson   1.25   X   0   0   0   0   0   0   0   0   0															_
Soard member   1.25 X				1.25	<del>  ^</del>	┈	-	├		-	<u> </u>	0			0
329) Melanie Collins   1.00 X   0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				1 25	🗸					1	,		ı		^
Board member				1.20	<del>  ^</del>	╁╌	-	┢	<del>                                     </del>	-	<u>-</u>				
231   Kelly Conklin				1.00	x	ŀ		ŀ			l 0	٥	ı		0
Board member   1.00   X   0   0   0   0   0   0   0   0						┢		T .		$\vdash$					
3.75   X   0   0   0   0   0   0   0   0   0				1.00	Х			İ			l 0	o			0
23) LeeAnn Hall	(22)	William P						i							
Executive Director (see Sched O for total hours)  44.00	Board	l member		3.75	X	<u> </u>		<u>_</u>		_	0	0			0
Sub-total   Sub-					1					ĺ			ı		
Sub-total   Discrete				44.00		<u> </u>	X	├-			97,500	0		9,	<u> 302</u>
1b Sub-total .	(24)							ļ					ı		
1b Sub-total .	(25)	<del></del>			ļ	╁	-	╁	╁	$\vdash$					
Total from continuation sheets to Part VII, Section A.	323)					1			ļ				ı		
Total from continuation sheets to Part VII, Section A.	1b	Sub-total	I		<u> </u>		٠.			•	164,200	0	· · · · · · · · · · · · · · · · · · ·	18.	604
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	С	Total from													_
reportable compensation from the organization    3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual . 3 X  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual . 4 X  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person . 5 X  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C														18,	604
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	2	Total num	nber of individuals (including but not	limited to those	liste	d ab	OVE	e) w	ho re	ceiv	ved more than \$	100,000 of			
Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		reportable	e compensation from the organizatio	n ▶			0							r	
employee on line 1a? If "Yes," complete Schedule J for such individual	•	Did Abo								- : <b>1</b>		ا د		Yes	No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual													2	<del>}</del>	~
the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual			• •										-3-		<u> </u>
individual													i		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person										CIC	Schedule 5 loi s	Sucri	A	<del> </del>  -	Y
for services rendered to the organization? If "Yes," complete Schedule J for such person										~4 <i>.</i>	· · · · · · ·	adicial cal		<del>                                     </del>	
Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Description of services  Compensation													5	<del>  -</del>	
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation				. co, compicto				-		-			_ <del>_</del>	<u>L.                                    </u>	
year.  (A) Name and business address Description of services Compensation Compensat				ensated indepe	nder	nt co	ontr	acto	ors th	at r	eceived more th	an \$100,000 of			
(A) Name and business address Description of services Compensation C C C C C C C C C C C C C C C C C C C		compens	ation from the organization. Report of	compensation fo	r the	cal	end	ar y	ear e	endi	ing with or within	the organization	n's ta	x	
Name and business address  Description of services  Compensation		year.	······································								· · · · · · · · · · · · · · · · · · ·	<del> </del>			
2 Total number of independent contractors (including but not limited to those listed above) who received				Imen											
2 Total number of independent contractors (including but not limited to those listed above) who received		<del></del>	Name and business add	11033							Description of ser	vices C	ompei	ISAUUTI	
2 Total number of independent contractors (including but not limited to those listed above) who received		<u> </u>		<del></del>		-				-					
2 Total number of independent contractors (including but not limited to those listed above) who received				<del>,</del>				_							
2 Total number of independent contractors (including but not limited to those listed above) who received										T	<del></del>				
· · · · · · · · · · · · · · · · · · ·															
more than \$100,000 of compensation from the organization	2		• ,	-							ve) who receive	d			

Form 990 (2011)

Pari	VIII		<del></del>			91-10330	Page 3
r al	C VIII	Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats str	1a	Federated campaigns	a 0	1			İ
E 5	b	Membership dues	<b>b</b> 0				
S E	С	Fundraising events	<b>c</b> 0				
Contributions, Gifts, Grants and Other Similar Amounts	d		<b>d</b> 0				
, E	A	Government grants (contributions) 1					
Sir	F	All other contributions, gifts, grants, and	10,0 12				ļ
ist Fer			f 1,758,391				
돌중	_		5 0				
on nd	9		·	1 004 022			
	<u>h</u>	Total. Add lines 1a-1f	Business Code	1,804,033		···	<u> </u>
Program Service Revenue		AA					
9.6	2a	Membership Dues	900099	48,000	48,000		
ž	b	Rent for Southside Commons	531120	27,200	27,200		
Š	С	Below Cost Consulting Fees	900099	17,850	17,850		
Ser	d	Reports and Materials Production	511190	3,150	3,150		
E	е	Event Fees	900099	2,527	2,527		
g	f	All other program service revenue		0			
_ 5	g	Total. Add lines 2a-2f		98,727			
	3	Investment income (including dividends, intercother similar amounts)	▶   proceeds ▶	5,433 0			5,433
	5	Royalties		0			
		<u>``</u>	(ii) Personal				Ì
	6a	Gross rents					[
	b	Less: rental expenses					
	C	Rental income or (loss)	0 0				
	d	Net rental income or (loss)		0			<u></u>
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory .	0 0		1		
	ь	Less: cost or other basis			ļ		
		and sales expenses	o o				
	c	Gain or (loss)	0 0		1		į
	4	Net gain or (loss)					l
e	8a	Gross income from fundraising		- U		<del></del>	
Other Revenue		events (not including \$ 0 of contributions reported on line 1c).  See Part IV, line 18					
8		Less: direct expenses				<del></del>	
		Net income or (loss) from fundraising events .		756			756
	9a	Gross income from gaming activities.  See Part IV, line 19.	0				
	b	Less direct expenses	0				<u> </u>
	С	Net income or (loss) from gaming activities .		0			
	10a	Gross sales of inventory, less				<del></del>	
	ļ	returns and allowances	a l ol				
	ь	Less: cost of goods sold					
	1	Net income or (loss) from sales of inventory .		0			
	Ť	Miscellaneous Revenue	Business Code	<u>-</u>			
	11a			0			<del> </del>
	h	•••••		0			
	0	•••••					<del> </del>
	C	All ather sevenies	ļ	0			
	d	All other revenue		0			
	l e	Total. Add lines 11a–11d		0			
	12	Total revenue. See instructions	<u> ▶</u>	1,908,949	98,727	0	6,189

91-1635554

Page 9

91-1635554

### Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX. . . (A) (B) (C) (D) Do not include amounts reported on lines 6b, Total expenses Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 299,500 299.500 2 Grants and other assistance to individuals in the United States. See Part IV, line 22 . . . . . . Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 . . . . . Benefits paid to or for members . . . . . . . . . . 5 Compensation of current officers, directors, 147,444 91,392 26,790 29,262 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . . Other salanes and wages . . . . . . . . . . . . . 463.831 395.787 46.710 21,334 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). . 20,466 17,396 2,047 1,023 62,819 9 73,905 7,391 3,695 Payroll taxes . . . . . . . . . . . . . . . . 61,322 49,057 7,359 4,906 10 Fees for services (non-employees): Management . . . . . . . . . . . . . 0 23,137 23,137 d 0 Professional fundraising services. See Part IV, line 17. . . 2,750 2,750 f 19.352 15.482 3,870 g 12 47,325 37,687 5.869 3.769 13 Office expenses . . . . . . . . . . . . . Information technology . . . . . . . . . . . . . . . . . 14,166 14 9.922 1,526 2,718 15 51.604 16 41,283 6,193 4.128 17 123,924 92,560 25,249 6,115 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . 103,344 95,362 7,882 19 Conferences, conventions, and meetings . . . . 100 20 256 256 21 26,221 20,977 3,146 22 Depreciation, depletion, and amortization . . . . . . 2.098 23 Insurance . . . . . . . . 8,901 5,605 2,736 560 24 Other expenses, Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Media Project Contractors 109,282 109,282 Organizing Project Contractors b 19,850 19,850 Training Contractors 14.820 14.820 5,175 5,175 Research & Writing Contractors e All other expenses Bus Fees & Misc 3,855 1,102 2,078 675 Total functional expenses. Add lines 1 through 24e. 1,640,430 1,385,058 25 172,239 83,133 Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► X if following SOP 98-2 (ASC 958-720). 2,266 1,632 317 317

**Balance Sheet** Part X (A) (B) Beginning of year End of year 1 1,943,975 2 1,724,555 2 3 474,697 3 995,886 23,921 4 4 59,220 Receivables from current and former officers, directors, trustees, key 5 employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) . . . . . . . . 6 0 7 8 Prepaid expenses and deferred charges . . . 6,335 9 305 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 1.324.139 1,201,419 10c b 137,943 1,186,196 11 ol 11 12 12 Investments—other securities. See Part IV, line 11 . . . . . . . . . . . 0 0 13 0 13 0 Ol 14 0 14 o 15 15 0 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . . 3,650,347 16 3,966,162 17 72,228 17 111,905 18 3,705 18 31,097 19 500 19 1,150 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. . . 21 Payables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified 22 23 668,556 23 Secured mortgages and notes payable to unrelated third parties . . . 648.133 24 Unsecured notes and loans payable to unrelated third parties . . . . . 0 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete 25 744,989 Total liabilities. Add lines 17 through 25 . . . . . . 26 792,285 Organizations that follow SFAS 117, check here ► X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 1,770,773 27 1,706,081 28 1,134,585 28 1,467,796 29 29 Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . . . . 31 32 Retained earnings, endowment, accumulated income, or other funds . . . 32 3,173,877 33 2,905,358 Total liabilities and net assets/fund balances . . . 3,650,347 3,966,162

Form 9	990 (2011) Alliance for a Just Society	91-	1635554	Pag	je <b>12</b>
Pari	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	. <u></u>	<u></u>	. [	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	1,908	,949
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	1,640	,430
3	Revenue less expenses. Subtract line 2 from line 1	3		268	,519
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,905	,358
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6	3	<u>3,173</u>	,877
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>	· · ·		<u> </u>
1	Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		-	Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Χ
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	х	ALCOHOLD STATE
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	1			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:			,	
	X Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?	. <b></b> .	. 3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		
			Form	990 (	(2011)

### **SCHEDULE A** (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the	organization							Employe	r identificat	on numb	er	
Alliance for	or a Just Soci		<del> </del>					<u> </u>		<u>335554</u>		
Part I			arity Status (All org						struction	ns.		
. —			ation because it is: (Fo		_		-		_			
1 ∐			rches, or association of			ed in sec	tion 170(	b)(1)(A)(i	).			
2 📙			on 170(b)(1)(A)(ii). (At		•							
3 📗	A hospital or	a cooperative h	nospital service organi	zation des	scribed in	section	170(b)(1)	(A)(iii).				
4		search organiza me, city, and sta	ation operated in conju ate:	inction wit	h a hospi	tal descri	bed in se	ction 170	(b)(1)(A)	(iii). En	ter the	)
5			r the benefit of a collect (Complete Part II.)	ge or univ	ersity owr	ned or ope	erated by	a govern	mental ur	nit desc	ibed	
6	A federal, sta	ate, or local gov	emment or governmer	ntal unit d	escribed i	in sectio:	170(b)(1	I)(A)(v).				
7 X	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			in section 170(b)(1)(	•	omplete f	Part II.)						
9 🗔	•		y receives: (1) more th		-	•	om contrib	outions. n	nembersh	nip fees	and o	aross
	-		ed to its exempt function									-
			ent income and unrelate after June 30, 1975.						tax) from	busines	ses	
10	An organizat	ion organized a	nd operated exclusive	ly to test t	for public	safety. So	ee sectio	n 509(a)(	4).			
11 🗂	An organizat	ion organized a	nd operated exclusive	ly for the	benefit of	to perfor	m the fun	ctions of.	or to car	rv out th	ne	
			blicly supported organi									ion
	<b>509(a)(3)</b> . Cl	heck the box tha	at describes the type o	f supporti	ng organi	zation an	d complet	te lines 1	1e throug	h 11h.		
	a 🔲 Type	1 b	Type II c	🔲 Туре	III-Func	tionally in	tegrated		d 🔲 1	Type III-	Other	
е 🗌			y that the organization on managers and othe			-	•	-		•		tion
	•	section 509(a)(2										
f	If the organiz	zation received	a written determinatior	n from the	IRS that	it is a Typ	e I, Type	II, or Typ	e III supp	orting		
	_	, check this box										. 🔲
g			the organization acce	pted any	gift or con	tribution 1	from any o	of the				
	following per			- *41 1 -						ı		<u> </u>
			or indirectly controls, overning body of the sup								Yes	No
	•		person described in (i)		•					11g(i)		<del>                                     </del>
		•	y of a person describe							11g(ii) 11g(iii)		<del> </del>
h			ation about the suppor							[ · · · · · · · · · · · · · · · · · · ·		L
(i) Name	e of supported	(ii) EIN	(iii) Type of organization	(iv) is the o			ou notify	(vi)	s the	(vii)	Amour	nt of
org	anization		(described on lines 1–9	ın col (i) lis			nization in		tion in col		support	
			above or IRC section (see instructions))	governing	document?		of your port?		zed in the S?			
			,	Yes	No	Yes	No	Yes	No	1		
(A)												0
(B)												0
(C)									<del>                                     </del>	1		

0

0

0

0

Total

(D)

(E)

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')		ion A. Public Support					<del></del>	
membership fees received. (Do not include any "unusual grants."). 1,077,791 1,212,070 1,276,216 2,071,754 1,842,075 7,479,906 7 are revenues levided for the organization's benefit and either paid to or expended on its behalf. 0  The value of services or facilities furnished by a governmental unit to the organization without charge. 10,077,791 1,212,070 1,276,216 2,071,754 1,842,075 7,479,906 7 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). 2,729,281 2,750,255 2,	Cale	ndar year (or fiscal year beginning in) 🕒	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
Include any "unusual grants.")   1,077,791   1,212,070   1,276,216   2,071,754   1,842,075   7,479,906   1,842,075   7,479,906   1,842,075   7,479,906   1,842,075   7,479,906   1,842,075   1,842,075   7,479,906   1,842,075   1,842,	1	Gifts, grants, contributions, and			1			
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.  3 The value of services or facilities furnished by a governmental unit to the organization without charge.  4 Total. Add lines 1 through 3 1,077,791 1,212,070 1,276,216 2,071,754 1,842,075 7,479,906 1,077,791 1,212,070 1,276,216 2,071,754 1,842,075 7,479,906 1,077,791 1,000		membership fees received. (Do not						
2 Tax revenues levied for the organization's benefit and either poid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 1,077,791 1,212,070 1,276,216 2,071,754 1,842,075 7,479,906 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) 2,729,281 2,7		include any "unusual grants.")	1,077,791	1,212,070	1,276,216	2,071,754	1,842,075	7,479,906
its behalf a The value of services or facilities furnished by a governmental unit to the organization without charge a Total. Add lines 1 through 3	2	Tax revenues levied for the organization's						
its behalf a The value of services or facilities furnished by a governmental unit to the organization without charge a Total. Add lines 1 through 3		benefit and either paid to or expended on						
3 The value of services or facilities furnished by a governmental unit to the organization without charge		,						0
furnished by a governmental unit of the organization without charge.  1 Total. Add lines 1 through 3	3	The value of services or facilities						·
organization without charge.  4 Total. Add lines 1 through 3  5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).  8 Public support. Subtract line 5 from line 4.  9 Public support Subtract line 5 from line 4.  1 Calendar year (or fiscal year beginning in)  1 A mounts from line 4.  1 Calendar year (or fiscal year beginning in)  1 Calendar year (or fiscal year beginning in)  2 Calendar year (or fiscal year beginning in)  3 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  4 Legan 1 Legan 1 Legan 2		furnished by a governmental unit to the						
Total. Add lines 1 through 3 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).  Public support Subtract line 5 from line 4 Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 4 Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 4 Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 4 Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 4 Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 4 Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 4 Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 4 Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 4 Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 4 Total Support  Amounts from line 4 Total Support  Amounts from line 4 Total Support  Amounts from Ine 4 Total Support  Amounts from line 4 Total Support  Amounts from line 4 Total Support  Total Suppo		• •	1					0
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).  6 Public support. Subtract line 5 from line 4.  5 Section B. Total Support  Calendar year (or fiscal year beginning in)  7 Amounts from line 4.  8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  9 Net income from unrelated business activities, whether or not the business is regularly carried on .  10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  11 Total support. Add lines 7 through 10.  12 Caross receipts from related activities, etc. (see instructions).  12 Description and support exceptible from related activities, etc. (see instructions).  12 Description and support exceptible from reganization of Public Support Percentage  14 Public support percentage from 2010 Schedule A, Part II, line 14.  15 Goss row part test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization meets the "facts-and-circumstancese" test. The organization qualifies as a publicly supported organization.  15 Interval III (inc. 14) and inc. Inc. Inc. Inc. Inc. Inc. Inc. Inc. I	4		1,077,791	1,212,070	1,276,216	2.071.754	1,842,075	7.479.906
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). 2,729,281  6 Public support. Subtract line 5 from line 4. 4,750,625  Section B. Total Support  Calendar year (or fiscal year beginning in)    7 Amounts from line 4. 1,077,791 1,212,070 1,276,216 2,071,754 1,842,075 7,479,906  8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. 4,890 4,857 1,866 6,822 5,433 23,868  9 Net income from unrelated business activities, whether or not the business is regularly carried on. 235 756 991  10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV). 7,504,765  (Explain in Part IV). 7,504,765  17 Total support. Add lines 7 through 10. 7,504,765  Section C. Computation of Public Support Percentage  14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)). 14 63,30%  15 Public support percentage from 2010 Schedule A, Part II, line 14. 15 66,59%  16 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization dualifies as a publicly supported organization. 16 part organization dualifies as a publicly supported organization. 16 part 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV								
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column (f)		of the amount shown on line 11.						
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Section B. Total Support  Calendar year (or fiscal year beginning in)  A mounts from line 4	6							
Calendar year (or fiscal year beginning in)  Amounts from line 4	Sect							
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8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  9 Net income from unrelated business activities, whether or not the business is regularly carried on.  10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  11 Total support. Add lines 7 through 10.  12 287,238  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.  14 Public support percentage from 2010 Schedule A, Part II, line 14.  15 Goss receipts from real edactivities, etc. (see instructions).  14 63.30%  15 Public support percentage from 2010 Schedule A, Part II, line 14.  15 66.59%  16 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.  17 10%-facts-and-circumstances test—2011. 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV ho	7	Amounts from line 4						
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rents, royalties and income from similar sources	•							
Sources		• •		Ì				
9 Net income from unrelated business activities, whether or not the business is regularly carried on		· •	4.890	4.857	1.866	6.822	5.433	23 868
activities, whether or not the business is regularly carried on	9	Net income from unrelated business						
regularly carried on	_				1			
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		*			ļ	235	756	991
(Explain in Part IV.)	10							
Total support. Add lines 7 through 10		loss from the sale of capital assets				ì	i	
Total support. Add lines 7 through 10		(Explain in Part IV.)						0
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  Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)).  Public support percentage from 2010 Schedule A, Part II, line 14.  15 66.59%  By 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.  17a 10%-facts-and-circumstances test—2011. 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization did not check a box on line 13, 16a, 16b, or 1	11	Total support. Add lines 7 through 10.						7,504,765
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Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	13	First five years. If the Form 990 is for the o	rganization's fir	st, second, thi	rd, fourth, or fift	h tax year as a	section 501(c	
Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))		organization, check this box and stop here						▶□
Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	Sect	ion C. Computation of Public Support	Percentage		<del></del>			
Public support percentage from 2010 Schedule A, Part II, line 14	14			ed by line 11,	column (f))		14	63.30%
33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	15						15	
b 33 1/3% support test—2010. 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.  10%-facts-and-circumstances test—2011. 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.  10%-facts-and-circumstances test—2010. 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	16a	33 1/3% support test-2011. If the organization	ation did not ch	eck the box or	n line 13, and lii			eck this box
b 33 1/3% support test—2010. 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		and stop here. The organization qualifies a	s a publicly sup	ported organiz	zation			<b>▶</b> [X]
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is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		box and stop here. The organization qualific	es as a publicly	supported org	janization			▶ 🔲
is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	17a	10%-facts-and-circumstances test-2011	. If the organiza	ation did not ch	neck a box on li	ne 13, 16a, or	16b, and line 1	4
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—2010. 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								
organization								
<ul> <li>b 10%-facts-and-circumstances test—2010. 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</li></ul>		<u> </u>			•	•		<b>.</b>
15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	b							line
Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	-		•				•	
supported organization								F
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see		<u> </u>			•	•		
<del></del>	18							·- L
		<del>-</del>						•

### 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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sect	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						0
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished						<u> </u>
	in any activity that is related to the organization's tax-exempt purpose						. 0
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 7a	Total. Add lines 1 through 5	0	0	0	0	0	0
b	received from disqualified persons						0
•	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0	0	0	0	0	0
8	Public support (Subtract line 7c from line 6).	- U		U	U,	U	0
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	o	o	o	О	o	0
10a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less 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						_
12	or not the business is regularly carned on  Other income Do not include gain or loss from the sale of capital assets						0
13	(Explain in Part IV.) .  Total support. (Add lines 9, 10c, 11, and 12) .	0	0	0	0	0	0
14	First five years. If the Form 990 is for the organization, check this box and stop here	ation's first, seco	nd, third, fourth,	or fifth tax year a	s a section 501(	c)(3)	0
Sec	tion C. Computation of Public Support						
15	Public support percentage for 2011 (line 8, column		e 13, column (f)	)		15	0.00%
16	Public support percentage from 2010 Schedule A,			<u></u>	· · · · · · · · · · · · · · · · · · ·	16	0.00%
Sec	tion D. Computation of Investment Inco		<del></del>			<u></u>	
17	Investment income percentage for 2011 (line 10c,					17	0.00%
18	Investment income percentage from 2010 Schedul					18	0.00%
19a h	33 1/3% support tests—2011. If the organization not more than 33 1/3%, check this box and stop h 33 1/3% support tests—2010. If the organization	ere. The organiz	ation qualifies a	s a publicly supp	orted organizatio	n	▶□
ь	line 18 is not more than 33 1/3%, check this box at					-	▶□
20	Private foundation. If the organization did not che						

Schedule A (Form	990 or 990-EZ) 2011	Alliance for a Jus	t Society			91-1635554	Page 4
Part IV	Supplemental	Information. Cor	mplete this part	to provide the exp	lanations required	by Part II, line 1	0:
					t for any additional		
		or 170, and rait	m, mic 12. 7450	complete this par	cioi ariy addidoriai	mornadon. (o	
	instructions).						
					***		
						<b></b>	
	•••••						
						•	
		•					
				•••••			
					• • • • • • • • • • • • • • • • • • • •		

### SCHEDULE C (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

OMB No 1545-0047
2011

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, 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) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

	ection 501(c)(4), (5), or (6) or e of organization	gamzations. Complete r art m	<del></del>	Employe	identification number
	-			Ешьюун	
	nce for a Just Society rt I-A Complete if to	he organization is exempt und	er section 501/	c) or is a section 527 o	91-1635554
1		the organization's direct and indirect	<del></del>		ryanization.
2	•				
3	•				
Pa	rt I-B Complete if t	he organization is exempt und	er section 501(	c)(3).	
1	Enter the amount of any	excise tax incurred by the organizati	ion under section	4955 ▶ \$	
2	Enter the amount of any	excise tax incurred by organization r	managers under s	section 4955 <b>&gt;</b> \$	
3	If the organization incurre	ed a section 4955 tax, did it file Form	n 4720 for this yea	ar?	Yes No
4a	Was a correction made?	'			. 🔲 Yes 🔲 No
b	If "Yes," describe in Part				
Pa	rt I-C Complete if t	he organization is exempt und	er section 501(	c), except section 501(	c)(3).
1		expended by the filing organization			
				•	
2		filing organization's funds contributed			
	· ·	unction activities			
3		penditures. Add lines 1 and 2. Enter			
_					0
4		n file Form 1120-POL for this year?			
5		ses and employer identification num ents. For each organization listed, e			
		ents. For each organization listed, e entributions received that were prom			
		d fund or a political action committee			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(a) Amount of political
	(a) Hallie	(b) Address	(C) EIN	filing organization's	(e) Amount of political contributions received and
	i			funds If none, enter -0-	promptly and directly
		•			delivered to a separate political organization. If
					none, enter -0-
(4)			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
(1)				0	0
(2)					
<del>(-</del> /	·		<del></del>	0	0
(3)					_
				0	0
(4)		·		o	^
				U	0
(5)					
(-,				ol ol	n
(6)				0	0

SCI	Baule C (Form 990 or 990-EZ) 2011					Page Z
Р	art II-A Complete if the organizunder section 501(h)).	zation is exempt	under section 5	01(c)(3) and filed	l Form 5768 (elec	
	Check ▶ if the filing organization name, address, EIN, Check ▶ if the filing organization	expenses, and sh	nare of excess lob	bying expenditure	es).	member's
	<del></del>	Lobbying Expend	itures	······································	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influer	nce public opinion (	grass roots lobbying	<u>)</u> )	0	0
b	Total lobbying expenditures to influer	nce a legislative boo	ly (direct lobbying)		19,799	0
C	Total lobbying expenditures (add line	s 1a and 1b)			19,799	0
d	Other exempt purpose expenditures				1,625,081	0
е	Total exempt purpose expenditures (	add lines 1c and 1d	)		1,644,880	0
f	Lobbying nontaxable amount. Enter t	he amount from the	following table in b	oth		
	columns.				232,244	0
	If the amount on line 1e, column (a) or (	b) is: The lobbyi	ng nontaxable amou	nt is:		
1	Not over \$500,000	·····	amount on line 1e.			
	Over \$500,000 but not over \$1,000,000		us 15% of the excess		]	
	Over \$1,000,000 but not over \$1,500,000		us 10% of the excess			
	Over \$1,500,000 but not over \$17,000,000		us 5% of the excess of	over \$1,500,000.		
	Over \$17,000,000	\$1,000,000				
9	Grassroots nontaxable amount (ente	•			58,061	0
h	Subtract line 1g from line 1a. If zero				0	0
:	Subtract line 1f from line 1c. If zero o				0	0
J	If there is an amount other than zero					7.v [7.i.
	section 4911 tax for this year?	<u> </u>		· · · · · · · ·	· · · · · <u>L</u>	Yes No
	(Some organizations to columns b			o not have to com		
	Loi	bying Expenditur	es During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	( <b>d)</b> 2011	(e) Total
2a	Lobbying nontaxable amount	130,578	134,244	209,692	232,244	706,758
ь —	Lobbying ceiling amount (150% of line 2a, column(e))					1,060,137
C	Total lobbying expenditures	26,880	13,847	0	19,799	60,526
d	Grassroots nontaxable amount	32,645	33,561	52,423	58,061	176,690
е —	Grassroots ceiling amount (150% of line 2d, column (e))					265,035
f	Grassroots lobbying expenditures	1.991	0		0	1 001

Schedule C (Form 990 or 990-EZ) 2011

Par	Complete if the organization is exempt under section 501(c)(3) and has l (election under section 501(h)).	1OT file	d Fon	n 576	8	
For e	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	20	(a)		(b)	
	e lobbying activity.	Yes	No	,	4moun	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:	71				# · _
a b	Volunteers?	,		17/34		, , ,
c d	Media advertisements?	·				
e	Publications, or published or broadcast statements?		1 -			
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?	·	<b></b>	L		
j	Total. Add lines 1c through 1i	· [	ļ.,			(
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	<u> </u>	<del> </del>	- 1e i	· ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			ļ.,	<del>,,,,,,</del>	<del></del>
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?t III-A Complete if the organization is exempt under section 501(c)(4), section 6		<u> </u>		, () (s	<u> </u>
гаг	501(c)(6).	(c)(s)	, or s	ection	1	
_					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	—	├
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				┼	<del> </del> -
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Na answered "Yes."		) Part			}, is
1	Dues, assessments and similar amounts from members		1	<u> </u>		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		1 3 1 5 1 4 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5			
<b>a</b>	Current year		2a	<u> </u>		
b	Carryover from last year		<u>2b</u>	<b></b>		
C	Total		2c	<del></del>		
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) do lif notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		3			
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)	<u> </u>	5			(
Part	· · · · · · · · · · · · · · · · · · ·					
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, lin complete this part for any additional information.					ine 1.
					·	••••
				·	·	
						••

· Allia	nce for a Just Society form 990 or 990-EZ) 2011	91-1635554
Part IV	Supplemental Information (continued)	Page 4
artiv	oupplemental information (commuted)	**************************************
		•••••••••••••••••••••••••••••••••••••••
		•••••
<b>-</b>		

# SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

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

OMB No 1545-0047 2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, 6

▶ Attach to Form 990. ▶ See separate instructions.

Employer Identification number Name of the organization 91-1635554 Alliance for a Just Society Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year . . . . . 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) . . 4 Aggregate value at end of year . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other Yes Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements . . . 2a 2b h Number of conservation easements on a certified historic structure included in (a) . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization 3 Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: 

Sched	ule D (Fo	orm 990) 2011									Page 2
Par		Organizations Maintaining	Colle	ctions of A	rt, Histor	ical Tre	asures, or (	Other S	imilar Assets	s (contin	
3		the organization's acquisition, of its collection items (check all t			er records	, check a	ny of the follo	owing th	nat are a signifi	cant	
а		Public exhibition			d $\square$	Loan	or exchange	progran	ns		
b	百	Scholarly research			e 🗀	Other					
c	Ħ	Preservation for future general	ione		٠ ـــ						
4	Provi	de a description of the organiza		collections an	d evolain	how they	further the o	raaniza	tion's evennt r	umosa ii	n
7	Part 2		uon s t		iu explain	no <del>w</del> they	riarther the o	n gai nze	morra exempt t	oui pose ii	18
5	asset	ng the year, did the organization ts to be sold to raise funds rathe	r than	to be mainta	ined as pa	art of the	organization'	s collec	tion?		es No
Part	IV	Escrow and Custodial Arr IV, line 9, or reported an am	_		•	_	ization ansv	vered '	Yes" to Form	990, Pa	rt
1a	Is the	e organization an agent, trustee,	custo	dian or other	intermedi	ary for co	ntributions o	other a	assets not		
b		ded on Form 990, Part X?								☐ Y	es No
_		o, oxpiani are arrangement in i	<b>-</b>	·		g ta			<u> </u>	Amount	
С	Begir	nning balance						1c			
d	Addit	ions during the year						1d			
е	Distn	butions during the year						1e			
f	Endir	ng balance						1f			0
2a	Did th	ne organization include an amou	ınt on	Form 990, Pa	art X, line	21?				Y	es X No
<u>b</u>	If "Ye	es," explain the arrangement in F									
Part	V	Endowment Funds. Comp	lete if	the organiza	ation ans	wered "\	Yes" to Form	า 990,	Part IV, line 10	0.	
			(a)	Current year	(b) Pro	ог уеаг	(c) Two years	back	(d) Three years bad	* (e) Fo	our years back
1a	Begir	nning of year balance				·					
þ		ributions	ļ				<u> </u>				<del></del>
C		nvestment earnings, gains,						1			
		osses	<u> </u>								<del></del>
d		ts or scholarships		· <del></del>			<u> </u>			<del></del>	
е		r expenditures for facilities	i				l	ı			
E	-	orograms								+	· · · · · · · · · · · · · · · · · · ·
		of year balance		0		0	<del> </del>	0		0	· · · · · · · · · · · · · · · · · · ·
g 2		de the estimated percentage of	the cu							<u> </u>	<del> </del>
- а		d designated or quasi-endowme		► •	%	(iiiic ig,	column (a)) i	icia as.			
b		anent endowment	•••	%							
С	Temp	porarily restricted endowment	<b>&gt;</b>	%							
	The p	percentages in lines 2a, 2b, and	2c sho		0%.						
3a	Are t	here endowment funds not in the	e poss	ession of the	organizat	tion that a	are held and a	adminis	tered for the		
	orgar	nization by:									Yes No
	(i)	unrelated organizations								3a(i)	
	(ii)	related organizations								3a(ii)	
b		es" to 3a(ii), are the related orga			•					3b	L
4		ribe in Part XIV the intended us							· <del>-</del>		
Part	VI	Land, Buildings, and Equi	pmer	t. See Form	1 990, Pa	rt X, line	<del>)</del> 10.				
		Description of property		(a) Cost or ot (investm			ost or other is (other)		Accumulated epreciation	(d) B	ook value
1a	Land				0		610,169				610,169
b	Build	ings			0		595,953		45,843		550,110
C		ehold improvements			0		0		0		0
d		oment			0		118,017		92,100		25,917
<u>e</u>		<u>r </u>			0		0		0		0
I Ota	hhA i	lines 1a through 1e. (Column (a	u must	equal Form	uun Port	Y colum	n (R)   line 10:	((1)			1 196 106

Part VII	Investments—Other Securitie	es. See Form 990, Part X,	line 12.	
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year r	
(1) Financial	denvatives	0		
	eld equity interests	0		
(3) Other		0		
(A)		0	<del></del>	
(B)		0		
(C)		0	<del> </del>	·
(Ď)		0	<del></del>	
(E)		0		<del></del>
(F)		0		
(G) (H)		0	<del> </del>	
(1)		0	······ · · · · · · · · · · · · · · · ·	
	must equal Form 990, Part X, col. (B) line 12)	0		
Part VIII	Investments—Program Relat	ed. See Form 990. Part X	. line 13.	
	a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year	
(1)		0		
(2)		0		
(3)		0		
(4)		0		
(5)		0		
(6)		0		
(7)		0		<u>.                                  </u>
(8)		0	<del></del>	
(9)		0	<del> </del>	
(10)	must equal Form 990. Part X. col (B) line 13)	0		
Part IX	must equal Form 990, Part X, col (B) line 13)  Other Assets. See Form 990,	Dort V line 15		
Partix		a) Description		(b) Book value
(1)		a) Description		(b) Book Value
(2)			<del></del>	0
(3)				0
(4)				0
(5)				0
(6)				0
(7)				0
(8)				0
(9)	<del></del>			0
(10)	(h) 000 Part V	(D) line 45 )		0
Part X	mn (b) must equal Form 990, Part X, Other Liabilities. See Form 99		<u> </u>	
1	(a) Description of liability	(b) Book value		
(1) Federal	income taxes	0		
(2)		0		
(3)		0		
(4)		0	1	
(5)		0		
(6)		0		
(7)		0	1	
(8)		0	4	
<u>(9)</u> <u>(10)</u>		0	1	
(11)	······································	0	•	
	must equal Form 990, Part X, col (B) line 25)	0	1	

2. FIN 48 (ASC 740) 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 (ASC 740).

Schedule D (Form 990) 2011 Page 4 Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements 1 1,908,949 2 2 1,640,430 3 Excess or (deficit) for the year. Subtract line 2 from line 1 . . . . . . . . 3 268,519 4 4 5 5 6 6 7 7 8 8 9 9 0 10 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9. . . 268,519 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1 1,908,949 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2a b 2b 2c C 2e 0 1.908.949 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. . . . h C 4c 0 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . 5 1,908,949 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Part XIII 1 1 1,640,430 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2a\_ 2b 2c C 2e 3 1,640,430 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. . . . 4a b C 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . . . . . . . . . 1,640,430 Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information Part X Line 2 FIN 48 FOOTNOTE-- Alliance for a Just Society qualifies as a tax-exempt organization under Section 501(c)(3) of the Internal Revenue code and, therefore, has no provision for income taxes.

•	Alliance for a Just Society	91	1-1635554
Schedule D (Form			Page 5
Part XIV	Supplemental Information	(continued)	· · · · · · · · · · · · · · · · · · ·
			• • • • • • • • • • • • • • • • • • • •
			• • • • • • • • • • • • • • • • • • • •
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			·
			***************************************
			***************************************
		***************************************	***************************************

# SCHEDULE (Form 990)

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

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

2007	
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Open to Public Inspection

▶ Attach to Form 990.

General Information on Grants and Assistance

Alliance for a Just Society

Part

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 91-1635554

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or assistance, and	X Yes No	***	ization answered "Yes" to	ived more than \$5,000. Part II	
amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and		of grant funds in the United States.	unizations in the United States. Complete if the organ	ore than \$5,000. Check this box if no one recipient rec	
1 Does the organization maintain records to substantiate the amount of the	the selection criteria used to award the grants or assistance?	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to	Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II	can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Virginia Organizing Project 703 Concorde Ave Charlottesville,	54-1674992	501(c)(3)	45,000	0			economic justice orga
(2) Colorado Progressive Coalition 1029 Santa Fe Dr Denver, CO 803	84-1338008	501(c)(3)	25,000	0		:	economic justice orga
(3) Idaho Community Action Netwo	82-0357348	501(c)(3)	25,000	0			economic justice orga
(4) Maine People's Resource Cent 565 Congress St, #200 Portland, I	1 22-2586108	501(c)(3)	25,000	0			economic justice orga
(5) Progressive Leadership Alliand 821 Riverside Dr Reno, NV 89503	88-0318655	501(c)(3)	25,000	0			economic justice orga
(6) New Jersey Citizen Action Edu 744 Broad St, #2080 Newark, NJ	22-2493628	501(c)(3)	25,000	0			economic justice orga
(7) WA Comm Action Network Ed 220 S River St Seattle, WA 98108	91-1259403	501(c)(3)	17,500	0			economic justice orga
(8) Leadership Center for the Com 11 Dupont Circle, #240 Washingtd	27-2163366	501(c)(3)	17,500	0			economic justice orga
(9) Make the Road New York 301Grove St Brooklyn, NY 11237	11-3344389	501(c)(3)	15,000	0			economic justice orga
(10) Fair Share Research & Educat 6601 NE MLK Jr Blvd Portland, Ol	ti 93-0760750	501(c)(3)	10,000	0			economic justice orga
(11) lowa Citizen Action Education 941 25th Ave, PMB 335 Coralville.	42-1208327	501(c)(3)	10,000	0			economic justice orga
(12) Take Action MN Education Fur 705 Raymond Ave, #100 St. Paul,	41-1635130	501(c)(3)	10,000	0			economic justice orga
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.	on 501(c)(3) and	government organi	zations listed in the lin	e 1 table		•	14

Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2011)

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

Page 2

Alliance for a Just Society

Schedule I (Form 990) (2011)

Part III

(f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) organizations are required to write a report summarizing their accomplishments. There is a final conversation to confirm that the work Part I Line 2 For each grant, there is a clear written workplan with deliverables. There are quarterly on site meetings with Executive Directors of the organizations that have received funds to highlight their progress toward goals. At the end of the grant period, the (d) Amount of non-cash assistance (c) Amount of cash grant Part III can be duplicated if additional space is needed (b) Number of recipients is finished and the final payment on the grant is made. (a) Type of grant or assistance Part IV S က ø

# Continuation Sheet for Schedule I (Form 990)

economic justice orga economic justice orga (h) Purpose of grant or assistance ₹ Employer identification number (g) Description of non-cash assistance 91-1635554 (f) Method of valuation (book, FMV, appraisal, Continuation of Grants and Other Assistance to Governments and Organizations in the United States 0 0 (e) Amount of non-cash assistance 7,500 000'9 (d) Amount of cash (c) IRC section if applicable 501(c)(3) 501(c)(3) 59-2475079 34-1246311 (D) EIN 3006 W Kennedy Blvd, #B Tampa, FL 33 207 E Buffato St, #211 Milwaukee, WI 53 (13) 9-5 National Assn. of Working Wom (14) Florida Consumer Action Network Fo (a) Name and address of organization or government Alliance for a Just Society Name of the organization Part II (15) (18) (18) <del>(19)</del> 2 8 (58) (53 3 8 8 <u>8</u> (25)(23) (58)

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Continuation
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	Continuati		יו בייים	(200 III)	Page 1 of 1
Name of the organization					Employer identification number 91-1635554
Partill Continuation of Grants and Other Assistance to Individuals in the United States	Assistance to In	dividuals in the Un	ited States		1000001
	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
8	0	0	0		
6	0	0	0		
10	0	0	0		•
11	0	0	0		
12	0	0	0		
13	0	0	0		
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### SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990 or 990-EZ.

Alliance for a Just Society 91-1635554 Form 990, Part III, Line 4d: Program Service Expenses: 123,330, Grants and allocations: 0, Revenue: 755 MONTANA ORGANIZING PROJECT. MOP, along with partner organizations, turned out 2,000 Montanans, including critical rural communities like Rocky Boy Indian Reservation, to a budget rally at the state capital, engaging decision-makers to restore 75% of the cuts to vital services. MOP expanded outreach across the state, most notably in Eastern Montana where communities are facing extreme housing shortages due to oil & gas development in the area. In Feb over 60 MOP leaders convened in Helena to speak to their legislators about public investments in education, health care, social services & other infrastructure investments. MOP released a statewide budget storybook & several health equity reports. MOP staff educated hundreds of Montanans about health care reform & the different provisions of the recently passed legislation, & played an active role in stopping legislation that would have nullified health care reform in Montana. MOP launched "Invest in Montana: Buy Local, Bank Local" to educate Montanans about the importance of supporting our local economies for community based development. Form 990, Part III, Line 4d: Program Service Expenses: 36,536, Grants and allocations: 0, Revenue: 3,345 LATINOS FOR COMMUNITY TRANSFORMATION. LCT held 2 10-session trainings of the Leadership Academy, graduating 22 new community leaders in 2011. LCT won implementation of uniforms in the Highline School district, reaching nearly 800 parents, teachers, students and community members during the process. LCT also hosted a number of forums and meetings through the year to support work within the community, including: weekly meetings for the Education Action Group and the Economic Development Group; 2 immigration forums with 120 participants; and a class on how to form a co-op. LCT hosted a workshop on Family Budgeting and How Politics Affects Our Pockets; 7 workshops on How the Education System Works; and 5 workshops on How the Government Works. Finally, LCT successfully advocated for the funding, design, and implementation of an Arts and Recreation summer program, reaching 75 children from low-income families in the city of Burien.

Schedule O (Form 990 or 990-EZ) (2011)  Name of the organization	Page Z Employer identification number
Alliance for a Just Society	91-1635554
Form 990, Part III, Line 4d: Program Service Expenses: 28,783, Grants and allocations: 0	
Revenue: 0 INDIAN PEOPLE'S ACTION. Indian People's Action, in collaboration with Health	
Rights Organizing Project, advocated statewide for greater access to quality health care for	
Native Americans in Montana. One local campaign focused on the small town of Hardin, a bor	rder
town to the Crow Reservation, and its ambulance service's failure to respond to requests for	
services from Native American residents.	
Form 990 Part VI Section A Line 6 MEMBERS. Affiliates are organizations that are engaged in	1
and/or support community organizing to promote the social welfare of poor and working people	e,
support the purpose of AJS and pay annual dues. The AJS Board must approve the entrance	of new
Affiliates by a 2/3 vote.	•
Form 990 Part VI Section A Line 7a GOVERNING BOARD. The governing board is made up of	of 2
representatives from each of the independent affiliate organizations— the Executive Director	•••••
and a Board Member. In addition, at-large board members may be elected by a majority vote	of
the board.	•
Form 990 Part VI Section B Line 11b 990 REVIEW. The Executive Director and Preparer review	ewed
the entire draft with the Board Chair and Board Treasurer. The Executive Director and an	
independent reviewer met with the Preparer to discuss the final draft. Before filing, the	
final draft was emailed to the entire board with a note calling attention to the descriptions	•••••
of programs and processes. Comments and corrections were encouraged.	•
Form 990 Part VI Section B Line 12c CONFLICT OF INTEREST POLICY. The conflict of inter	est
policy covers board members of the organization Determinations of whether a conflict exists,	••••
and the review of actual conflicts is made at the board level. When a person has a conflict,	•••••
she or he is prohibited from participating in discussion or decisionmaking on that matter.	•••••
Form 990 Part VI Section B Line 15a EXECUTIVE COMPENSATION. In 2008 the board revie	wed a
survey of like non-profits in the northwest. The compensation level chosen was in the 45th	•••••
percentile of that list. This was chosen, not because the AJS's outstanding ED was in the 45th	1

percentile of performance, but because we were concerned that if every organization benchmarks

at the 75th percentile, it only causes an upward spiral of compensation. The decision was

Schedule O (Form 990 or 990-EZ) (2011)		Page Z
Name of the organization Alliance for a Just Society	Employer Identification number 91-1635554	
reviewed and voted upon by independent board members.	, , , , , , , , , , , , , , , , , , , ,	
Form 990 Part VI Section C Line 19 DISCLOSURE. Financial statements are available upon		
request. Requests for other documents are considered on a case-by-case basis.		
Form 990 Part VII Section A Line 1a ED HOURS. LeeAnn Hall also worked 11 hours per week	for	
related organization Community Organizations in Action, for a total of 55 hours per week.		
Compensation reported in Part VII represents total compensation including benefits of		<b>-</b>
\$106,802. Compensation reported in Part IX, line 5 represents compensation for work done for	r	<b></b>
AJS, \$88,942. Related organization COA reported compensation on Part IX, Line 5 of \$17,860	) for	
Ms Hall's work for COA.		
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# SCHEDULE R (Form 990)

Department of the Treasury

Part

Related Organizations and Unrelated Partnerships

Open to Public OMB No 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▼ See separate instructions. ■ Attach to Form 990.

Employer identification number Inspection

91-1635554

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Alliance for a Just Society Internal Revenue Service Name of the organization

(g) Section 512(b)(13) controlled entity? Yes No × (f) Direct controlling Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had Alliance for a Just (f)
Direct controlling
entity (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) (d) Total income (d) Exempt Code section (c)
Legal domicile (state
or foreign country) 501(c)(4) (c)
Legal domicile (state
or foreign country) (b) Primary activity advocate for economic, WA racial & social justice one or more related tax-exempt organizations during the tax year.) (b) Primary activity (5) (a) Name, address, and EIN of disregarded entity (1) Community Organizations in Action 26-2613701 Name, address, and EIN of related organization (1) 3518 S Edmunds St, Seattle, WA 98118 Part II 2 ଫ € 9 €

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

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Schedule R (Form 990) 2011

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Schedule R (Form 990) 2011

Alliance for a Just Society

Schedule R (Form 990) 2011

(k) Percentage ownership Percentage ownership  $\widehat{\boldsymbol{\epsilon}}$ Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 ᅙ O Q O Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part (I) General or managing partner? ŝ end-of-year assets Yes (g) Share of (i)
Code V—UBI
amount in box 20 of Schedule K-1 (Form 1085) 0 ō 0 0 0 Share of total (h)
Disproportionate
altocations? ŝ IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Yes Ö 0 0 (e)
Type of entity
(C corp, S corp, (g) Share of end-ofyear assets or trust) because it had one or more related organizations treated as a partnership during the tax year.) (d)
Direct controlling entity (f) Share of total (c) Legal domicile foreign country) (e)
Predominant
income (related,
unrelated, sections 512-514) excluded from tax under Primary activity (d)
( Direct controlling | entity (c) Legal domicile (state or foreign country) Name, address, and EIN of related organization (b) Primary activity (a) Name, address, and EIN related organization Part III Part IV E 2 3 9 € 8 3 <u>e</u> <u>E</u> €. 3 (5) E

Alliance for a Just Society

91-1635554

Page 3 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. Method of determining Yes Ę 9 19 5 2 <del>4</del> 4 4 4 <u>4</u> 10 Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Amount involved During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Purchase of assets from related organization(s). Gift, grant, or capital contribution from related organization(s). Receipt of (I) interest (II) annuities (III) royalties or (IV) rent from a controlled entity. Transaction type (a-r) Reimbursement paid by related organization(s) for expenses. Lease of facilities, equipment, or other assets from related organization(s)...... Performance of services or membership or fundraising solicitations for related organization(s) Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Reimbursement paid to related organization(s) for expenses . . . . Sale of assets to related organization(s). Other transfer of cash or property from related organization(s) Gift, grant, or capital contribution to related organization(s). Name of other organization Schedule R (Form 990) 2011 Part V 0 2 Ec σ ~ ତ 3 9 3 9

Schedule R (Form 990) 2011

91-1635554

Part VI

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

(k) Percentage ownership 》 8 8 뾩 8 뾩 》 8 % % % 8 % % Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets () General or ş managing partner? Yes 0 0 0 0 0 of Schedule K-1 (Form 1085) 0 amount in box 20 Code V—UBI (h)
Disproportionate
allocations? £ Yes Ö 0 0 0 0 (g)
Share of
end-of-year
assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships. (f) Share of total income (e)
Are all partners
section
501(c)(3)
organizations? Yes No Predominant income (related, unrelated, excluded from tax under section 512-514) € (c)
Legal domicile
(state or foreign
country) Primary activity Name, address, and EiN of entity 4 9 6 (11) (12) (13) (14) (15) £. 2 8 9  $\mathbf{\Xi}$ € 65

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Schedule R (Form 990) 2011

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Schedule R (Fo	rm 990) 2011	Alliance for a Just So	ociety			91-1635554	Page 5
Part VII		ental Information this part to provide a		ion for response	s to questions on Sci		
Part V Line	2 Communi	y Organizations in Action	on paid AJS a total	of \$74,279 under t	he terms of		
a resource	sharing agre	ement. This total includ	ded \$46,007 for sha	red personnel, \$17	7,780 for		
shared facil	ities and \$10	),492 for reimbursed ex	penses.				
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