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Form **990**

MAY

For Paperwork Reduction Act Notice, see the separate instructions.

Return of Organization Exempt From Income Tax

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

2011

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service June 30 20 12 For the 2011 calendar year, or tax year beginning 2011, and ending D Employer identification number C Name of organization Judicial Crisis Network Check if applicable. 20-2303252 Address change Doing Business As E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite Name change Fourth Floor 573-424-7617 22 12th Street, NW Initial return City or town, state or country, and ZIP + 4 П Terminated 800,000 Washington, DC 20005 Amended return G Gross receipts \$ Application pending F Name and address of principal officer H(a) is this a group return for affiliates? ☐ Yes ✓ No Neil Corkery, 722 12th Street, NW, Fourth Floor, Washington, DC 20005 H(b) Are all affiliates included? Yes No **✓** 501(c) (If "No," attach a list (see instructions) 501(c)(3) 4) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 www.judicialnetwork.com Website: ▶ H(c) Group exemption number ▶ Form of organization 🗸 Corporation 🗌 Trust L Year of formation. 2004 M State of legal domicile: Association ☐ Other ▶ Part I Summary Briefly describe the organization's mission or most significant activities: The mission is to promote the vision of liberty and justice in America, dedicated to the rule of law, with a fair and impartial Activities & Governance judiciary, and to educate and organize citizens in this mission. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 4 Number of independent voting members of the governing body (Part VI, line 1b) 2 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) . 6 0 Total unrelated business revenue from Part VIII, column (C), line RECEIVED 0 7a Net unrelated business taxable income from Form 990-T, line-34 0 **Current Year** Contributions and grants (Part VIII, line 1h) . 382,453 800,000 O Revenue Program service revenue (Part VIII, line 2g) 9 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 10c Al. 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 382,453 12 800,000 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 13 239,000 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 448,819 17 251.848 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 448,819 490,848 -66,366 309,152 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 228,156 537,308 21 Total liabilities (Part X, line 26) . . 22 Net assets or fund balances. Subtract line 21 from line 20 228,156 537,308 Part II Signature Block Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge, and belief, it is er) is based on all information of which preparer has any knowledge Sign Signature of office Date Ne Here Type or print name and title Print/Type preparer's name Check [] if Paid TRAYMAN C & Kaymond Grulon 4-15-13 P01486002 L R4 self-employed Preparer Firm's name > Conlon and Associates, LLC 27-0510132 Firm's EIN ▶ **Use Only** Firm's address ▶ PO Box 6213, Silver Spring, MD, 20916-6213 301-598-6851 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) ✓ Yes
☐ No

Form **990** (2011)

Cat. No. 11282Y

Part		
	Check if Schedule O contains a response to any question in this Part III	_ 니_
1,	Briefly describe the organization's mission:	
	The mission is to promote the vision of liberty and justice in America, dedicated to the rule of law, with a fair and impartial	
	judiciary, and to educate and organize citizens in this mission.	
_	Did the constraint and adoles are stiffened as a first state of the st	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	No
_	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure	
	expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount	nt of
	grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 437,360 including grants of \$ 239,000) (Revenue \$)	
	The most significant efforts in 2012 included the filing of three US Supreme Court amicus briefs in NFIB v. Sebelius (Obamacare	
	SCOTUS litigation): two on the merits for Speaker Boehner and a group of 44 Republican Senators, one on severability for a	
	group of 36 Republican Senators. This included extensive print, TV, and radio media, including as a guest on NPR, MSNBC,	
	Diane Rehm, FOX, CNN, and CNBC. Additionally, testified before Health Subcommittee of House Ways and Means	
	Committee regarding judicial nomination of Andrew Herwitz and criticized the American Bar Association's involvement in	
	judicial ratings. The Organization also was active regarding the Dodd-Frank bill, with print and radio media surrounding the	
	filing of a lawsuit. The Organization continued progress of FOIA lawsuit initiated in March 2011, coordinating with Chairman	
	Smith of the House Judiciary Committee in order to encourage their investigation of incomplete FOIA disclosures by the	
	US Department of Justice, radio, and print media.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
	/(/, //, //, //, //, //, //, //, //, //, //, //	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	_
40	Total program service expenses > 437.360	

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
•	complete Schedule A	1		✓
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	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, Part III	5		✓
6	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 "Yes," complete Schedule D, Part I	6		→
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		-	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	7		√
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		√
10	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		<u> </u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а		11a		√
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		· ·
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	_	1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII </i>	12a		1
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
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		√
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		<u>·</u> ✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		▼
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		▼
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		∀
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		▼
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	-	∀
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		-

Form 99	30 (2011) 20 - 23 0 3 2 5 2		ı	Page 4
Part	Checklist of Required Schedules (continued)		•	<u> </u>
			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	1	
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		1
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		1
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	24a		1
b b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
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	28b 28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		1
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		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
38	Part VI	37	1	1

arı	——————————————————————————————————————			
	Check if Schedule O contains a response to any question in this Part V	<u></u>		
łа	Enter the number reported in Day 2 of Form 1000 Fator 0 if not applicable		Yes	No
b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 4 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
•	reportable gaming (gambling) winnings to prize winners?	1c	√	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			1
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		Ė
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)?	4a		✓
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		,	ŀ
b	organization solicit any contributions that were not tax deductible?	6a	✓	
D	gifts were not tax deductible?	6b	1	
7	Organizations that may receive deductible contributions under section 170(c).	OD	•	
'a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			\vdash
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
_	organization, have excess business holdings at any time during the year?	8		
9	Did the organization make any taxable distributions under section 4966?	00		1
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	30		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u>. </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		+

	0 (2011)			Page 6
Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
Secti	Check if Schedule O contains a response to any question in this Part VI	<u>· · · · </u>	<u> </u>	<u> </u>
36011	on A. Governing body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 3			
	If there are material differences in voting rights among members of the governing body, or			
	If the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 2			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	-	✓
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4	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 7a	Did the organization have members or stockholders?	6		✓_
	one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	7b		
•	the year by the following:			
a	The governing body?	8a	√	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			,
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	9 0	nde l	V
	The state of the contents requests membered about position not required by the internal reven		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	√	
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	✓_	L
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		,	
10	describe in Schedule O how this was done	12c	<u>√</u>	
13 14	Did the organization have a written whistleblower policy?	13 14		1
15	Did the process for determining compensation of the following persons include a review and approval by	14		· •
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	✓	
b	Other officers or key employees of the organization	15b	√	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		√
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	า 501(c)(3)s	only)
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	if inter	est p	oolicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the		
	organization: Neil Corkery, 722 12th Street, NW, Fourth Floor, Washington, DC, 20005, 573-424-7617			

	· <u>/</u>	· ugo ·
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,	and
	Independent Contractors	
	Check if Schedule O contains a response to any question in this Part VII	

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax 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	d orga	aniz			ompe	nsa	ted any curren	t officer, director	, or trustee.	
(A) Name and Title	(B) Average hours per week	box, office	ot ch unles r and	s pe dad	ition more rson irecto	than o	an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) Gary Marx President	1	√		1				o	0		0
(2) Neil Corkery											_
Treasurer	10	✓		✓			L	30,000	0		0
(3) Daniel Casey											
Secretary	1	✓		✓				0	0		0
(4)											
(5)											
(6)											
(7)							-				_
(8)											
(9)				-							
(10)								-			
(11)											
(12)											
(13)	 										
(14)						1					

Part	V. Section A. Officers, Directors, Trust (A) Name and title	(B) Average hours per week (describe hours for	(C) Position (do not check more than of box, unless person is both officer and a director/trust					one n an	(D) Reportable compensation from the organization	(E) Reportable compensation fr related organizations (W-2/1099-MIS	om	(F) Estimated amount of other compensation from the
		related organizations in Schedule O)	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	7	(W-2/1099-MISC)			organization and related organizations
(15)												
(16)										,		
(17)												-
(18)											+	
(19)												
(20)											+-	
(21)											-	
(22)											+	
(23)			_	ļ				-			+	
(24)					_							
(25)				_	_	-		ļ				
1b	Sub-total	<u> </u>				<u> </u>			30,000		0	0
c d	Total from continuation sheets to Part		n A					>	30,000		0	0
2	Total number of individuals (including but reportable compensation from the organization)	t not limited	to th					e) w	ho received m	ore than \$100	,000	of
3	Did the organization list any former of employee on line 1a? If "Yes," complete							emp	oloyee, or high	nest compens	ated	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual											4 1
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or indiv		5 1
Section	on B. Independent Contractors											
1	Complete this table for your five highest compensation from the organization. Repyear.											
	(A) Name and business add	Iress					_	L	(B) Description of s	services	c	(C) Compensation
								$oxed{\pm}$	· · · · · · · · · · · · · · · · · · ·			
							_					
2	Total number of independent contractor received more than \$100,000 of compen							o th	nose listed ab 0	ove) who		

Part	VIII	Statement of Reve	enue					, ago u
	·			_	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c	Federated campaigns Membership dues Fundraising events Related organizations	1b					
Contributions, Gand Other Simil	e f	Government grants (con All other contributions, gi and similar amounts not inc	itnbutions) ifts, grants, cluded above 1f	800,000				
Cont	g h	Noncash contributions included Total. Add lines 1a-1		•	800,000			
venue	2a			Business Code				
e Re	b							
)ervic	d				·	<u> </u>		
Program Service Revenue	e f	All other program sen						
<u> </u>	3	Total. Add lines 2a–2 Investment income						
	4	and other similar amo	ounts)	•				
	5	Royalties	-					
	6a	Gross rents						
	b	Less: rental expenses Rental income or (loss)						
	d 7a	Net rental income or (Gross amount from sales of assets other than inventory		▶ (ii) Other				
	ь	Less. cost or other basis and sales expenses .						
	С	Gain or (loss)				= 11		
ø	d	• , ,		▶ }				
evenue	8a	Gross income from fuevents (not including \$						
Other R		of contributions reported See Part IV, line 18 .	a					
₹		Less: direct expenses Net income or (loss) f		L				
		Gross income from ga See Part IV, line 19 .	aming activities.					
	b	Less: direct expenses	s b					
		Net income or (loss) f Gross sales of in		ivities ▶				
		returns and allowance						
	ь с	Less: cost of goods s Net income or (loss) f	rom sales of inv					
	44=	Miscellaneous P	Revenue	Business Code				
	11a b							-
	c							
	d	All other revenue .						
	12	Total. Add lines 11a- Total revenue. See in			800,000			

Part IX Statement of Functional Expenses

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

•	Check if Schedule O contains a response to any question in this Part IX							
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	239,000	239,000					
2	Grants and other assistance to individuals in the United States. See Part IV, line 22		-					
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16							
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees							
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)							
7 8	Other salaries and wages							
9 10	Other employee benefits							
11 a b	Fees for services (non-employees): Management	17,500 81,724	8,750 81,724	8,750 0	0			
c d	Accounting	12,500 50,600	0 50,600	12,500	0			
e f	Professional fundraising services. See Part IV, line 17 Investment management fees	55.000	44 200	42.000				
9 12 13	Other	55,086 2,508	41,286	13,800	0			
14 15	Information technology	11,500	11,500	0	0			
16 17 18	Occupancy	15,930 4,500	4,500	15,930	0			
19 20	for any federal, state, or local public officials Conferences, conventions, and meetings Interest							
21 22 23	Payments to affiliates							
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)							
a b c								
d e	All other expenses Total functional expenses. Add lines 1 through 24e	400.040	407.000					
25 26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)	490,848	437,360	53,488	0			

P	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	228,156	1	537,308
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
"	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), 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	
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventories for sale or use		8	
-	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	ь	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	228,156	16	537,308
_	17	Accounts payable and accrued expenses		17	<u>-</u>
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.			
iab		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X		24_	
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
ses		Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	228,156	27	537,308
Bal	28	Temporarily restricted net assets		28	
ᅙ	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Ž	33	Total net assets or fund balances	228,156	33	537,308
_	34	Total liabilities and net assets/fund balances	228,156	34	537,308

Form **990** (2011)

Par	XI Reconciliation of Net Assets			- ' "	90
Гаг					
	Check if Schedule O contains a response to any question in this Part XI	• •	· · ·	• •	
ſ	Total revenue (must equal Part VIII, column (A), line 12)	1		80	0,000
2	Total expenses (must equal Part IX, column (A), line 25)	2			0,848
3	Revenue less expenses. Subtract line 2 from line 1	3		30	9,152
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		22	B,156
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		53	7,308
Par	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," expl Schedule O.	aın in			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a		√
b	Were the organization's financial statements audited by an independent accountant?		2b		1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ove of the audit, review, or compilation of its financial statements and selection of an independent account		2c		
	If the organization changed either its oversight process or selection process during the tax year, exp Schedule O.	lain in			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year issued on a separate basis, consolidated basis, or both:	were			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
За		orth in			
	the Single Audit Act and OMB Circular A-133?		3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audit	dits	3b		
			For	n 99 0	(2011

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service Name of the organization **Judicial Crisis Network**

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.

▶ Attach to Form 990.

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OMB No 1545-0047

Employer identification number 20-2303252 Part I General Information on Grants and Assistance
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

the selection criteria used to award the grants or assistance?	award the grants on ization's procedur	or assistance?	the use of grant fu	nds in the United			· · · Yes · · No
Part II Grants and Other Assistance to Governmento Form 990, Part IV, line 21, for any recipient	Assistance to Go, line 21, for any r	vernments and ecipient that rec	Organizations i	n the United St \$5,000. Check	this box if no on	nts and Organizations in the United States. Complete if the organization answered "Yes" that received more than \$5,000. Check this box if no one recipient received more than \$5,000.	vered "Yes" re than \$5,000.
Part II can be duplicated if additional space is	ated if additional	space is needed					□ ▲ · · · · · ·
1 (a) Name and address of organization or government	(p) 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) Family Action of Tennessee							
1113 Murfreesboro Frnaklin TN	20-4998740	501c4	24,000	0	n/a	n/a	general operations
(2) Better Courts Missouri	26-1798608	501c4	215.000	O	0 n/a	n/a	deneral operations
(c)							
(4)							
(5)							
(9)							
(7)							
(8)							
(6)							
(10)			,				
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	n 501(c)(3) and gov	ernment organizat	ions listed in the li	ne 1 table			0
3 Enter total number of other organizations listed in the line 1 table	organizations listed	in the line 1 table		•			. • 2
For Paperwork Reduction Act Notice, see the Instructions for Form	, see the Instructions	s for Form 990.		రొ	Cat No 50055P		Schedule I (Form 990) (2011)

Page 2		(f) Description of non-cash assisfance							:	tional information. landing of each						Schedule I (Form 990) (2011)
	in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. needed.	(e) Method of valuation (book, FMV, appraisal, other)								line 2, and any other addi discussion and mutual unders	f the funds.					
	nplete if the organiz	(d) Amount of non-cash assistance								on required in Part I,	ion monitors the use of					
	Jnited States. Con	(c) Amount of cash grant								ovide the informatio	period, the Organizat					
:		(b) Number of recipients							:	ete this part to pro yments for general su	ughout the assistance					
Schedule I (Form 990) (2011) $20-2303252$	Grants and Other Assistance to Individuals Part III can be duplicated if additional space is	(a) Type of grant or assistance								Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Part I, Line 2: The Organization awarded assistance payments for general support to the listed organizations based on a discussion and mutual understanding of each	organization's goals, and plans to use the funds. Throughout the assistance period, the Organization monitors the use of the funds.					
Schedule I (Fc	Part III		-	2	က	4	S	9	7	Part IV Part I, Line	organizatic				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Employer identification number

2011

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Judicial Crisis Network	20-2303252					
Form 990, Part VI, Section B, Line 11a: The Form 990 is prepared by a Certified Public Accountant. Me	mbers of the Governing Body					
are provided the Form 990 and Schedules, for their review and comment, prior to filing with the IRS.						
Form 990, Part VI, Section B, Line 12c: Each year, officers and directors are required to read the Conflict of Interest Policy,						
and attest to compliance.	·····					
Form 990, Part VI, Section B, Line 15: Compensation paid is based on similar work performed for sim	ilarly sized organizations in the area.					
Form 990, Part VI, Section B, Line 19: The Articles of Incorporation are available from the Virginia State Corporation Commission, and as						
an attachment to Form 1023. Other governing documents are not available to the public.						
	·					
	·					
	·····					
	·					
	<i>^</i>					