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Form 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047
2012

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	For th	e 2012 ca	lendar year, or tax year beginning , and ending							
В	Check if	applicable	C Name of organization Washington State Association for Justice Foundation D Er	mployer iden	itification number					
	Address	change	Doing Business As 91-19	940182						
	Name ch	ange	Number and street (or PO box if mail is not delivered to street address) Room/suite E Te	elephone num	ber					
\Box	nitial reti	urn	1809 Seventh Avenue Suite 1500 (206)	464-1011						
Ħ.	Ferminat	ed	City, town or post office, state, and ZIP code	101 1011						
=	Amended		Seattle WA 98101-1324 G G	ross receipts	\$ 586,530					
=		on pending	F Name and address of principal officer H(a) is this a gr							
′ ب	Gerhard Letzing 1809 Seventh Avenue #1500, Seattle, WA 98101 H(b) Are all affiliates included? X Yes No									
	Tax-exempt status X 501(c)(3) 501(c) (insert no) 4947(a)(1) or 527 If "No," attach a list (see instructions)									
<u>J V</u>	J Website: ► H(c) Group exemption number ►									
ΚF	orm of o	rganization	X Corporation	1999	A State of legal domicile WA					
Р	art i	Su	mmary							
	1		lescribe the organization's mission or most significant activities Preparation of Am	ncus brief	reports for					
		•	e Supreme Court		'					
ŝ										
nan										
Ver	2	Check th	his box If the organization discontinued its operations or disposed of more than	25% of its	not assets					
ဖိ	3		of voting members of the governing body (Part VI, line 1a)	3	7					
8	4		of independent voting members of the governing body (Part VI, line 1b)	4	†					
× <u>i</u>	5		mber of individuals employed in calendar year 2012 (Part V, line 2a)	5	0					
Activities & Governance	6		mber of volunteers (estimate if necessary)	6	 					
	7a		related business revenue from Part VIII, column (G), -line=12-	7a	0					
	Ь		elated business taxable income from Form 990G line 6 ED	7b	··· ·					
		7,0,0,0,0	Prior		Current Year					
	8	Contribu		348,972						
Revenue	9		n service revenue (Part VIII, line 2g)		0					
e e	10	-	ent income (Part VIII, column (A), lines 3, 4, and 7d)	56,776						
œ	11		evenue (Part VIII, column (A), lines 5, 6d, 8e, 9c, 10c, and 11e)		0 0					
	12		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	405,748						
	13		and similar amounts paid (Part IX, column (A), lines 1–3)		0 0					
	14		paid to or for members (Part IX, column (A), line 4)		0					
	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)		0					
Expenses	16a		onal fundraising fees (Part IX, column (A), line 11e)	(0					
rper	b		ndraising expenses (Part IX, column (D), line 25)		THE					
ŵ	17		openses (Part IX, column (A), lines 11a-11d, 11f-24e)	167,524						
	18	Total exp	penses Add lines 13–17 (must equal Part IX, column (A), line 25)	167,524	207,619					
	19	-	e less expenses Subtract line 18 from line 12	238,224						
Not Assets or Fund Balances			Beginning of C		End of Year					
sets	20	Total ass	sets (Part X, line 16)	2,186,429	2,269,863					
t As	21	Total liab	olities (Part X, line 26)	7,000	7,000					
울	22	Net asse	ets or fund balances. Subtract line 21 from line 20	2,179,429	2,262,863					
Pa			nature Block							
			, I declare that I have examined this return, including accompanying schedules and statements, and to the best of		lge .					
and b	elief, it is	s true, correc	ct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has an	y knowledge						
Sig	n	.	you hisy							
Her		'	Signature of officer	Date _/						
	_		J Berhard Letzing	1115/2	0B					
			Type or print name and title	' / _ —	- Loziul					
		Print	Type preparer's name Preparer's signature Date	Check	X if PTIN					
Pai		Arth	ur O Beck / 11/12/15	3 self-em						
	parer			EIN ► 91-0						
Use	Only	_								
			's address ► 310 120th Ave NE, Suite 201, Bellevue, WA 98005 Phone	no (425	5) 453-0498					
May	the IR	S discuss	s this return with the preparer shown above? (see instructions)		Yes No					

Form **990** (2012)

Form	990 (2012)	Washington State Association for Justice Foundation	91-1940182	Page 2
Pa	irt III	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III.		
1	Briefly d	lescribe the organization's mission		·
	Preparin	ng Amicus briefs for the State Supreme Court		
		`		
2		organization undertake any significant program services during the year which were not listed on		
	•	Form 990 or 990-EZ? .	Yes	X No
		describe these new services on Schedule O		
3	Did the diservices	organization cease conducting, or make significant changes in how it conducts, any program	Yes	X No
		describe these changes on Schedule O		
4		e the organization's program service accomplishments for each of its three largest program service	s, as measured by	
		es Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and a	llocations to others,	ı
	the total	expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 207,619 including grants of \$) (Reven	ue \$ 234	,144)
		tion of Amicus brief reports for the State Supreme Court Contract labor payments were		
	made to	attorneys for these briefs		
			,	
		••••••		
	(Cada	\(\(\sum_{\text{order}} \)		
4b	(Code) (Expenses \$ including grants of \$) (Reven	ne a)
		`		
		•••••		
			,	
4c	(Code) (Expenses \$ including grants of \$) (Revent	ле \$)
				
				· · · · · · · · · · · · · · · · · · ·
4d		ogram services (Describe in Schedule O)		
4e	(Expense	es \$ 0 including grants of \$ 0) (Revenue \$ param service expenses > 207,619	0)	

Part IV **Checklist of Required Schedules**

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Χ_
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		X
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,	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		ŀ	
	"Yes," complete Schedule D, Part I	6	ŀ	Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a		ł	
	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		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	40		
44	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	224.
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		的文章	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	2 -2%	in in iden	ا سگاه
_	Schedule D, Part VI	11a	:	Х
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		_X_
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		_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	44.4		V
•	reported in Part X, line 16? If "Yes," complete Schedule D, Part X	11d 11e		$\frac{x}{x}$
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116	\dashv	<u> </u>
•	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? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Parts XI and XII	12a		<u>X</u>
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 and XII is optional	12b		Χ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
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	126		v
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	14b		<u> </u>
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance		$\neg \uparrow$	<u> </u>
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
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		X
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		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		v
20-	If "Yes," complete Schedule G, Part III	19 20a	-	$\frac{x}{x}$
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		^
ט	in resito inte zua, utu the organization attach a copy of its addited infancial statements to this return?	Form (190 /	20121
		ruim :	J U (2	cu (Z)

Par	Checklist of Required Schedules (continued)			
			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	ļ	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			ŀ
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III .	_22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	-	l	İ
	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	1		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			ļ
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	1		
	to defease any tax-exempt bonds?	24c	ļ	X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or			
	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			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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)			_
а	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		X
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	1		
	Part I	31		X
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			1
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			1
	III, or IV, and Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, 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		
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		X
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 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
		~	aan .	

Form 9	90 (2012) Washington State Association for Justice Foundation 91-19	401 <u>82</u>	P	age 5
Par				
	Check if Schedule O contains a response to any question in this Part V			<u> </u>
		ماد د	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	3		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	의 🤏	ξ,	1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1.5%	X	
0-	gaming (gambling) winnings to prize winners?	1c	4	
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	o 🦸	3	:
L	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		-
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
sа b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
70	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
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			1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	<u></u>	<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	L	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).		* -	1 .
а	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		X
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	1_		
	required to file Form 8282?	7c		X
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 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		 ^
g	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
h	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
8	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	1.,		-
	organization, have excess business holdings at any time during the year?	8		x
9	Sponsoring organizations maintaining donor advised funds.	- 	,	
a	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter			Ι.
а	Initiation fees and capital contributions included on Part VIII, line 12		1	, , , , , , , , , , , , , , , , , , ,
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	1	-	
а	Gross income from members or shareholders	_ . ,		
b	Gross income from other sources (Do not net amounts due or paid to other sources	1.00		-
	against amounts due or received from them.)	i	-	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	4 2	<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	- ^-	í,	1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	100		ļ
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	7	
	Note. See the instructions for additional information the organization must report on Schedule O			7
b	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		##7. 4	2
C	Enter the amount of reserves on hand Did the assessment reserves on hand a second reserves on hand reserves	14a	<u> </u>	X
14a	Did the organization receive any payments for indoor tanning services during the tax year?	144	 	+^

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

Part VI

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

	Check if Schedule O contains a response to any question in this Fart VV.				
Sect	ion A. Governing Body and Management			V	Nie
		<u>-</u>	,	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year.	1a 7	-} ,		
	If there are material differences in voting rights among members of the governing body, or		a T	١.	
	if the governing body delegated broad authority to an executive committee or similar		7.5		
	committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	1b 7		<u> </u>	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	hip with		, **·	
	any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under	the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other	r person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	as filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's a	assets?	5		Х
6	Did the organization have members or stockholders?		6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint			
	one or more members of the governing body?	• •	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members				
~	stockholders, or persons other than the governing body?		7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertake	n durina	.,	1	
U	the year by the following		~		
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	eached			
3	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the	Internal Revenue	Code)	
<u> </u>	ion B. I dilato (Ima dodicin B requeste imarmation about pointer increquies a)			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		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 pu		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	•	F .	1, 1,	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could	give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If				
	describe in Schedule O how this was done.		12c	Х	
13	Did the organization have a written whistleblower policy?		13	Х	
14	Did the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and appro	val by	, , ,		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation		مَنْ يُنْدِ رُ		
а	The organization's CEO, Executive Director, or top management official		15a	Χ	
b	Other officers or key employees of the organization		15b	Х	
-	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 arrang	ement	:		
	with a taxable entity during the year?		16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its	. ,		
	participation in joint venture arrangements under applicable federal tax law, and take steps to safe	guard			
	the organization's exempt status with respect to such arrangements?		16b		
Sect	ion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ► WA		- :	·	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 99	U-1 (Section 501(c)(3)s only	/)	
	available for public inspection. Indicate how you made these available. Check all that apply				
		plain in Schedule O)			
19	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 during the tax year	, , , , , ,			
20	State the name, physical address, and telephone number of the person who possesses the books		044		
	organization ► Gerhard Letzing	(206) 464-1	UTT		
	1809 Seventh Avenue, #1500 Seattle, WA, 98101-1324				

٠,							
Form 990 (2012)	Washington State Association for	Justice Foundation	on		91-19401	182Page_ 7	
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors							
	Check if Schedule O contains a r		y question in this Part	VII			
Section A.	Officers, Directors, Trustees, Key E	mployees, and	Highest Compensated E	mployees			
1a Complete organization's	this table for all persons required to be tax year	listed Report co	mpensation for the calend	dar year ending	with or within the	}	
List all e List the who received	of the organization's current officers, don Enter -0- in columns (D), (E), and (of the organization's current key emploi organization's five current highest correportable compensation (Box 5 of Formal any related organizations	(F) if no compens byees, if any See mpensated emplo	sation was paid e instructions for definition byees (other than an office	of "key employer, director, trust	ee " ee, or key emplo	oyee)	
	of the organization's former officers, keeportable compensation from the organ			employees who	received more th	an	
	of the organization's former directors more than \$10,000 of reportable compo		, ,			the	
	n the following order individual trustees employees, and former such persons	s or directors, ins	titutional trustees, officers	s, key employee	s, highest		
X Check the	s box if neither the organization nor an	y related organiz	ation compensated any c	urrent officer, dir	ector, or trustee		
	(A)	(B)	(C) Position (do not check more than one	(D)	(E)	(F)	

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	C) Position one than one than one theck more than obtained the than one than one than one than one the than one than one then than one than one then than one that one than one than one than one than one than one than one that one than one than one than one than one than one than one that one than one that on		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations				
(1) FRANK LADENBURG	10 00		ĺ			İΙΙ		_		
PRES	0 00	_X_	_		<u> </u>	ļ	_	0		
(2) BRADFORD J FULTON VICE PRES	0 00	×						0		
(3) BLAINE TAMAKI	10 00									
SEC/TREAS	0 00	X		_	L	L		0		
(4)										
(5)										
(6)										
(7)										***
(8)									~	
(9)										
(10)								····		
(11)									-	
(12)					,	-		· · · · · · · · · · · · · · · · · · ·		
(13)										
(14)										

				(C) Position							
	(A) Name and title	(B) Average hours per	box.	(do not check more than one box, unless person is both an officer and a director/trustee) compensation			(E) Reportable compensation	(F) Estimated amount of			
		week (list any hours for related organizations below dotted line)		from the organization (W-2/1099-MISC) Highest compensated employee Key employee Cofficer Institutional trustee						from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(15)											
(16)						ļ					
(17)											
(18)				_			_				
(19)											
(20)											
(21)											
(22)											
(23)											
(24)											
(25)										·- ·	
1b c	Sub-total Total from continuation sheets to Part VII, Se	ection A						A	0	0	(
d	Total (add lines 1b and 1c)							•	0	0	(
2	Total number of individuals (including but not ling reportable compensation from the organization	nited to those lis	ted a		e) w 0	/ho	recei	ved	more than \$100	,000 of	
3	Did the organization list any former officer, dire employee on line 1a? <i>If "Yes," complete Schedi</i>				oye	e, o	r high	nest	compensated		Yes No
4	For any individual listed on line 1a, is the sum of the organization and related organizations great individual	•							•	7	4 X
5	Did any person listed on line 1a receive or accrufor services rendered to the organization? If "Yes	·						_	anızatıon or ındıv	idual	5 X
	tion B. Independent Contractors		las.			nr+ '	lb at			1100 000 -5	
1	Complete this table for your five highest compecompensation from the organization. Report conyear										ax
	(A) Name and business addr	ess							(B) Description of serv	nces C	(C) ompensation
							-				
							\dashv				<u>_</u>
		 									
					_		\Box	_			0
2	Total number of independent contractors (include more than \$100,000 of compensation from the compensation from		ed to	thos	se li	sted	abo	ve) י	who received	(A)	The state of the s

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

Part VIII Statement of Revenue

	•	Check if Schedule O contains	s a response to a	iny question in th	ns Part VIII			
			्रे व		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ທິ	1a	Federated campaigns .	. <u>1a</u>	0			1	
ant	b	Membership dues	. 1b	0			ļ	
ي ۾	С	Fundraising events	1c	0				
if A	d	Related organizations	1d	0				. '
S, E	е	Government grants (contribution	ns) 1e	0		F.		·.
ion Si	f	All other contributions, gifts, gran	· —					
but	·	similar amounts not included abo	1	234,144				١ .
Contributions, Gifts, Grants and Other Similar Amounts	_	Noncash contributions included in I		0				
Co	g	Total. Add lines 1a–1f	iiiics ia-ii.	<u>×</u>	234,144			
	- 11	Total: Add lifles Ta-TI	···	Business Code	204,144			-
nue	_							
ève	2a			<u> </u>	0			
e R	þ				0			
Ž.	С				0			
Ser	d				0		ļ	
am	е				` 0			
Program Service Revenue	f	All other program service revenu	ıe		0			
مَ	g	Total. Add lines 2a–2f		>	. 0	, , , , , , , , , , , , , , , , , , ,		
	3	Investment income (including div	vidends, interest,	and				
		other similar amounts)		>	61,051			
	4	Income from investment of tax-e	xempt bond prod	ceeds >	0			
	5	Royalties		•	0	_		
			(ı) Real	(II) Personal		, , , , , , , , , , , , , , , , , , , ,	ļ.	, ,
	6a	Gross rents			. *	. yes		
	b	Less rental expenses			. ,		c	
	C	Rental income or (loss)	0	0		7.		
	d	Net rental income or (loss)	<u> </u>	•	0			
	7a	Gross amount from sales of	(i) Securities	(II) Other		,		
	<i>,</i> a	assets other than inventory	291,335	0		₩.		
	ь	Less cost or other basis	291,000	<u> </u>	,		, ,	Sym,
	U	and sales expenses	295,477	0	,	رميد ال		
	_		-4,142	0		,		
	C	Gain or (loss)	-4,142		4 142			ameta
	d	Net gain or (loss)			-4,142		_	7 .
a	0-	Caraca in a caraca from the day in the			-	ر بر المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع ا المراجع المراجع	Sin 1.	
Other Revenue	8a	Gross income from fundraising	0	ļ	** *	1 2	·	
, ke		events (not including \$	U		, >			
8		of contributions reported on line	•					1
er		See Part IV, line 18	a	0		í		
₹	b	Less direct expenses	b	0		•	"	- 14 K I .
_	С	Net income or (loss) from fundra	•	<u> </u>	0			
	9a	Gross income from gaming activ	ities			• .		. ,
		See Part IV, line 19	а	0			, ,	e to
	b	Less direct expenses	b	0				
	С	Net income or (loss) from gaming	g activities .	•	0			
	10a	Gross sales of inventory, less				٠.	j .	3 m
		returns and allowances	а	0	• .	+,+	• .	
	b	Less cost of goods sold	b	0				· · · · · · · · · · · · · · · · · · ·
ļ	С	Net income or (loss) from sales of	of inventory		. 0			
ľ		Miscellaneous Revenue		Business Code			1	
ţ	11a				0			
	b				0			
l	c				0			
	d	All other revenue			0			
	e	Total. Add lines 11a-11d			0			
	12	Total revenue. See instructions	• •	•	291,053	0	0	0

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)

	Check if Schedule O contains a response to any o	question in this Part	IX	· · · · · · · · · · · · · · · · ·	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		}	5-157 1 ch 3-189	3.7
	organizations in the United States See Part IV, line 21	0		2 4 4 4	er Ore
2	Grants and other assistance to individuals in the			* * *** ***	20 mg/2 m
	United States See Part IV, line 22	0			
3	Grants and other assistance to governments,		Ì	,	1
	organizations, and individuals outside the			:	
	United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0		:	
5	Compensation of current officers, directors,				
	trustees, and key employees	0			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	_			
_	persons described in section 4958(c)(3)(B)	0			,
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include	_			
_	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits .	0			
10	Payroll taxes	0	<u>-</u> .		
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	0			
C	Accounting	935	935		
d	Lobbying Professional fundamental converse. See Port IV line 17	0		 	
e	Professional fundraising services. See Part IV, line 17	0		-	
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column	l 0			
12	(A) amount, list line 11g expenses on Schedule O)	0			
12 13	Advertising and promotion Office expenses	4,966	4.966		
14	Information technology .	4,900	4,900		
15	Royalties	0			
16	Occupancy	0			·
17	Travel	6,410	6,410		
18	Payments of travel or entertainment expenses	0,410	0,410		
	for any federal, state, or local public officials	О			
19	Conferences, conventions, and meetings .	0	<u></u>	•	
20	Interest .	0	 		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization .	0	0	0	C
23	Insurance	0			
24	Other expenses Itemize expenses not covered		_		* * * * * * * * * * * * * * * * * * *
	above (List miscellaneous expenses in line 24e If	- ,	المريع المريد	1950) 1949	
	line 24e amount exceeds 10% of line 25, column			\$2.35 A	3.00
	(A) amount, list line 24e expenses on Schedule O)				بالم (العد
а	PROMOTIONAL MATERIALS	3,221	3,221		•
b	TRAVEL AND ACCOMODATIONS	0			
С	RESEARCH DATA	7,875	7,875		
d	PROFESSIONAL CONTRACTORS	164,157	164,157		
е	All other expenses PORTFOLIO FEES	20,055	20,055		
25	Total functional expenses. Add lines 1 through 24e	207,619	207,619	0	C
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)			·	7 000

Part X Balance Sheet

		Check if Schedule O contains a response to	any question in this Part X			
	•			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		113,254	1	132,324
	2	Savings and temporary cash investments		2,073,175	2	2,137,539
	3	Pledges and grants receivable, net.		0	3	0
	4	Accounts receivable, net .		0	4	
	5	Loans and other receivables from current and for	ormer officers, directors,	ي المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة		
		trustees, key employees, and highest compensations			<u> </u>	
		Complete Part II of Schedule L .			5	
	6	Loans and other receivables from other disqualified person	ons (as defined under section	\$ 5 K \$ 1		-
		4958(f)(1)), persons described in section 4958(c)(3)(B), a	nd contributing employers and	- " " " " " " " " " " " " " " " " " " "	-	
		sponsoring organizations of section 501(c)(9) voluntary e	mployees' beneficiary			.01
ets		organizations (see instructions) Complete Part II of Sche	dule L .		6	
Assets	7	Notes and loans receivable, net		0	7	0
⋖	8	Inventories for sale or use .			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or				1
		other basis Complete Part VI of Schedule D	10a - 0			
	b	Less accumulated depreciation	10b 0	0	10c	0
	11	Investments—publicly traded securities		0	11	0
	12	Investments—other securities See Part IV, line	11	0		0
	13	Investments—program-related See Part IV, line	11	0		0
	14	Intangible assets	0	14	0	
	15	Other assets See Part IV, line 11		0		0
	16	Total assets. Add lines 1 through 15 (must equal	al line 34)	2,186,429		2,269,863
	17	Accounts payable and accrued expenses .			17	
	18	Grants payable		18		
	19	Deferred revenue		<u> </u>	19	
	20	Tax-exempt bond liabilities .			20	
	21	Escrow or custodial account liability Complete F			21	,
Liabilities	22	Loans and other payables to current and former			<u>.</u> -	Programme and the second
Ξ		trustees, key employees, highest compensated	•		المستدا	المسائلين أسانا فكتبا للسالا
ia		disqualified persons Complete Part II of Schedu			22	
_	23	Secured mortgages and notes payable to unrela		7,000	23 24	7,000
	24 25	Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, page 1).		7,000	24	7,000
	23	parties, and other liabilities not included on lines	•			
	[Part X of Schedule D	17-24) Complete	0	25	0
	26	Total liabilities. Add lines 17 through 25		7,000	26	7,000
		Organizations that follow SFAS 117 (ASC 958), check here and	Mark San Mark San		Tavan T
es		complete lines 27 through 29, and lines 33 ar	· —			
ũ	27	-	u 54.			والمداد المستقد والمستقد والمستقد والمستوال
ala	27	Unrestricted net assets			27	
9 9	28	Temporarily restricted net assets			28 29	
Ľ,	29	Permanently restricted net assets			29	1 2 2
гF		Organizations that do not follow SFAS 117 (ASC958),	check here 🕨 🗴 and	The many the stage of	٠.	11, 12, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,
Net Assets or Fund Balances		complete lines 30 through 34.		أنست	. سمست	المنتشر مستشف سا
set	30	Capital stock or trust principal, or current funds			30	
As	31	Paid-in or capital surplus, or land, building, or ed			31	<u> </u>
et	32	Retained earnings, endowment, accumulated in	come, or other funds	2,179,429	32	2,262,863
Z	33	Total net assets or fund balances		2,179,429		2,262,863
	34	Total liabilities and net assets/fund balances		2,186,429	34	2,269,863

Form !	990 (2012) Washington State Association for Justice Foundation	9 <u>1-</u> 1	940182	Pag	_{je} 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI			. [
1	. Total revenue (must equal Part VIII, column (A), line 12)	1		291	,053
2	Total expenses (must equal Part IX, column (A), line 25)	2		207	',619
3	Revenue less expenses Subtract line 2 from line 1	3		83	3,434
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		<u>2,179</u>	,429
5	Net unrealized gains (losses) on investments .	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	2	2,262	<u>:,863</u>
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		•		
	Accounting method used to prepare the Form 990			Yes	No
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		2 2	(±3.≥	J
	Schedule O		177.		ĺ
20	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
2a	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		2 (1)	(, ,,
	reviewed on a separate basis, consolidated basis, or both				-
					l.
	Separate basis Consolidated basis Both consolidated and separate basis		'	^ \ \	~
b	Were the organization's financial statements audited by an independent accountant?		2b	,,,,,	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				, i
	separate basis, consolidated basis, or both.		7.5	<u>``</u>	····
	Separate basis Consolidated basis Both consolidated and separate basis		- 35	£```	- •
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	f		.	`-
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in		13	e.	ſ,
	Schedule O				۰ ا
За	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?		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 ((2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Inspection

		organization							Employe	r identificat	tion numb	er	
			ciation for Justic						L		940182		
Pa	_			narity Status (All or			-			nstructio	ns		
he 1	orgar		•	ation because it is (Foi ches, or association of		_							
2		A school des	cribed in sectio	n 170(b)(1)(A)(ii). (Atta	ach Sched	iule E)							
3		A hospital or	a cooperative h	ospital service organiz	ation desc	cribed in s	ection 17	0(b)(1)(A)	(iii).				
4			search organiza me, city, and sta	tion operated in conjur	nction with	a hospita	l describe	d ın secti	on 170(b)	(1)(A)(iii)	. Enter t	he	
5		-		the benefit of a collegi (Complete Part II)	e or unive	rsity owne	d or opera	ated by a	governme	ental unit d	describe	ed	
6		A federal, sta	ate, or local gove	ernment or government	tal unit de	scribed in	section 1	70(b)(1)(A)(v).				
7		_	·	y receives a substantia (1)(A)(vi). (Complete P		s support (from a go	vernmenta	al unit or f	rom the g	eneral p	ublic	
8				in section 170(b)(1)(A		mplete Pa	rt II)						
9		An organizat receipts from support from	ion that normally activities relate gross investme	y receives (1) more that d to its exempt function nt income and unrelate after June 30, 1975 S	an 33 1/39 ns—subje ed busines	% of its su ct to certa ss taxable	pport from in excepti income (l	ons, and (ess sectio	(2) no moi n 511 tax	re than 33	3 1/3% c	of its	s
10			•	nd operated exclusively									
11	团	-	•	nd operated exclusively						to carry o	out the		
e	X	509(a)(3). Cha Type By checking persons other	neck the box tha I b T this box, I certify	olicly supported organizations that the organization managers and other colors.	supporting III-Function	g organiza tionally int trolled dire	ation and o egrated ectly or inc	complete d	lines 11e ype III–No one or m	through 1 on-functio ore disqua	1h nally int alified	egrate	d
f				written determination	from the I	RS that it	ıs a Type	I, Type II,	or Type II	I supporti	ng		
9		organization,	check this box	the organization accep				• •		, ,	J		X
		following per											- :
			•	or indirectly controls, e		_	•	ersons de	scribed in	(11)	44-43	Yes	X
				rerning body of the sup person described in (i)		gariization	,				11g(ı) 11g(ıı)		x
		• •	•	y of a person described		ıı) above?					11g(III)		X
h			•	ition about the support									·
(i)		of supported nization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (I) li	organization sted in your document?	the organ	ou notify nization in of your port?	organiza (i) organi	Is the tion in col ized in the S?	(vii) Am	ount of mo support	onetary
					Yes	No	Yes	No	Yes	No			
A)				_			` .,						_
	LALE	gal Education	91-0981502	9		X	X		X		<u> </u>		0
3)					}				}	1			
 -											 		
<u> </u>													
D)													
Ξ)													
					,	,					 		

Schedule A (Form 990 or 990-EZ) 2012 Washington State Association for Justice Foundation 91-1940182 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)

	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						0
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
4	Total. Add lines 1 through 3	0	0	0	0	.0	0
5	The portion of total contributions by each			2000年	1980/48	a min	
	person (other than a governmental unit					, - '#	
	or publicly supported organization)						
	included on line 1 that exceeds 2%	A STORY OF				· ·	
	of the amount shown on line 11,		10 THE L	医体系			
	column (f) .				1 THE RESERVE		
6	Public support. Subtract line 5 from line 4		70 S + 25 S	特别的时间	十年 李 大	8 ⁽²⁾ " (3)"	0
	ion B. Total Support	() 0000	4-1 0000	(-) 0040	T (4) 2044	(-) 2042 T	/D T-4-1
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	0	0	0	0	0	0
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						0
9	sources Net income from unrelated business						
3	activities, whether or not the business is				ĺ		
	regularly carried on .			,			0
10	Other income Do not include gain or						<u>~</u>
	loss from the sale of capital assets						
	(Explain in Part IV.)						0
11	Total support. Add lines 7 through 10		公约至19 至10.25世	西州 北京	可读杨戬心教育		0
12	Gross receipts from related activities, etc. (se		· · · · · · · · · · · · · · · · · · ·			12	
13	First five years. If the Form 990 is for the or		t, second, third,	, fourth, or fifth	tax year as a s	ection 501(c)(3)	
	organization, check this box and stop here						▶ 🔲
Sect	ion C. Computation of Public Support	Percentage					
14	Public support percentage for 2012 (line 6, c		d by line 11, co	lumn (f))		14	0 00%
15	Public support percentage from 2011 Schedu					15	0 00%
16a	33 1/3% support test—2012. If the organiza	ition did not che	ck the box on li	ne 13, and line	14 is 33 1/3%	or more, check t	his box
	and stop here. The organization qualifies as						▶ []
þ	33 1/3% support test—2011. If the organiza				d line 15 is 33 1	1/3% or more, ch	eck this
	box and stop here. The organization qualifie	•					▶∟
17a	10%-facts-and-circumstances test—2012. Is 10% or more, and if the organization meets Part IV how the organization meets the "facts organization"	s the "facts-and	-circumstances	" test, check th	is box and sto p	here. Explain i	
b	10%-facts-and-circumstances test—2011. 15 is 10% or more, and if the organization me Part IV how the organization meets the "facts supported organization	eets the "facts-a	and-circumstani	ces" test, check	this box and s	top here. Expla	ain in
18	Private foundation. If the organization did no	ot check a box	on line 13, 16a,	16b, 17a, or 17	7b, check this b	oox and see	
	instructions						▶ □

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I 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)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 201	2	(f) Total
1	Gifts, grants, contributions, and membership fees							
	received (Do not include any "unusual grants")			İ				0
2	Gross receipts from admissions, merchandise						ļ	
	sold or services performed, or facilities furnished						i	
	in any activity that is related to the							_
_	organization's tax-exempt purpose						\dashv	0
3	Gross receipts from activities that are not an	1					1	0
	unrelated trade or business under section 513			<u> </u>				0
4	Tax revenues levied for the organization's							
	benefit and either paid to or expended on its behalf						i	0
5	The value of services or facilities							
•	furnished by a governmental unit to the]	J]				
	organization without charge .							0
6	Total. Add lines 1 through 5	0	0	0	0		0	0
7a	Amounts included on lines 1, 2, and 3							
	received from disqualified persons .				·			0
b	Amounts included on lines 2 and 3 received						ŀ	
	from other than disqualified persons that					l		
	exceed the greater of \$5,000 or 1% of the						}	0
_	amount on line 13 for the year .		<u>-</u>	0	0		0	0
8	Add lines 7a and 7b Public support (Subtract line 7c from	3"3" - V	<u> </u>	12 35 4	V		- 	
٠	line 6)	Walter Carry Congress of	为是"品资 "			-		0
Sec	tion B. Total Support			·				
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 201	2	(f) Total
9	Amounts from line 6	0	0	0	0		o	0
10a	Gross income from interest, dividends,						 ∸†	- <u> </u>
	payments received on securities loans,							
	rents, royalties and income from similar sources							0
b	Unrelated business taxable income (less							
	section 511 taxes) from businesses	 		ļ			- 1	
	acquired after June 30, 1975							0
С	Add lines 10a and 10b	0	0	0	0		이	0
11	Net income from unrelated business	ļ						
	activities not included in line 10b, whether						ĺ	0
40	or not the business is regularly carried on							0
12	Other income Do not include gain or loss from the sale of capital assets							
	(Explain in Part IV)	l .						0
13	Total support. (Add lines 9, 10c, 11,						-	<u>_</u>
	and 12)	ol	0	ol	ol		o	0
14	First five years. If the Form 990 is for the organization	ation's first, seco	nd, third, fourth,	or fifth tax year a	s a section 501(c	:)(3)		
	organization, check this box and stop here							▶ [_]
Sect	tion C. Computation of Public Support	Percentage						
15	Public support percentage for 2012 (line 8, column	•	e 13, column (f))		ļ	15		0 00%
16	Public support percentage from 2011 Schedule A,					16		0 00%
	ion D. Computation of Investment Inco							0.000/
17	Investment income percentage for 2012 (line 10c,			mn (f))	• }	17		0 00%
18	Investment income percentage from 2011 Schedul			and lies 45 -s = :	than 22 4/201	18		0 00%
19a	33 1/3% support tests—2012. If the organization						15	▶ □
h	not more than 33 1/3%, check this box and stop he 33 1/3% support tests—2011. If the organization						nd	-
b	line 18 is not more than 33 1/3%, check this box ar						110	▶ □
20	Private foundation. If the organization did not che							
	· ····ate roundation. If the digatization did flot die	on a box on line	17, 130, 01 130,	oncon una box al	300311001101		-	-

Schedule A (Form 9	990 or 990-EZ) 2012	Washington State Association for Justice Foundation	91-1940182	Page 4
Part IV		Information. Complete this part to provide the explanations required		e 10;
		or 17b, and Part III, line 12. Also complete this part for any additiona		
		or tro, and ratem, and the restaurant	momation	(000
	instructions)			
	•••••			• • • • • • • • • • • • • • • • • • • •
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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 Open to Public

Inspection

Schedule D (Form 990) 2012

Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. ► See separate instructions.

Washington State Association for Justice Foundation 91-1940182 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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 No purpose conferring impermissible private benefit? Yes Part II 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 an historically important land area Preservation of land for public use (e.g., recreation or education) 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 2a Total number of conservation easements Total acreage restricted by conservation easements 2b b 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 historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization 4 Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIII, 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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 XIII, 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 (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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

HTA

Sched	ule D (Form 990) 2012 Washington State A	Association for Justi	ce Founda	ation			91-194	0182		Page 2
Pari	III Organizations Maintaining	Collections of	Art, Histo	orical Tr	easures, o	r Othe	er Similar Ass	ets (cor	tinue	d)
3	Using the organization's acquisition, ac	cession, and other	records, c	heck any	of the follow	ing tha	t are a significan	t		
	use of its collection items (check all that	at apply).								
а·	Public exhibition		d 🗌	Loan	or exchange	progra	ms			
b	Scholarly research		e 🗀	Other						
		200	ب ٠							
C	Preservation for future generation			Albania di i			anta avamat nurr			
4	Provide a description of the organization Part XIII	on's collections and	explain no	ow triey iu	irther the org	arıızatı	on's exempt purp)05e III		
_					• • • • • • • • • • • • • • • • • • • •					
5	During the year, did the organization sassets to be sold to raise funds rather							☐ Y	es	No
Par										
Pari		_			1124(1011 4115	wered	i res to roim	990, F	21 (
	IV, line 9, or reported an am									
1a	Is the organization an agent, trustee, o	ustodian or other in	termediary	y for contr	ibutions or o	iner as	sets not			1
	included on Form 990, Part X?	-t XIIIt t - t -						L 1	es [No
b	If "Yes," explain the arrangement in Pa	irt XIII and complete	e the follow	ving table		_		A		
						\vdash		Amount		
C	Beginning balance				•	1				<u>U</u>
d	Additions during the year					1				
e	Distributions during the year				•	1				
f	Ending balance					1	1			0
2a	Did the organization include an amoun	t on Form 990, Par	t X, line 21	?				Y ₁	es 🔀	No
b	If "Yes," explain the arrangement in Pa	rt XIII Check here	if the expla	anation ha	as been provi	ded in	Part XIII		L]
Part	V Endowment Funds. Compl	ete if the organiza	ation ans	wered "\	es" to Forr	n 990.	Part IV, line 1	0		
		(a) Current year	(b) Prio		(c) Two years		(d) Three years bac		our years	s back
1a	Beginning of year balance	2,062,657	1	,814,992	1,62	28,117	1,398,5	17	1,44	17,146
b	Contributions	10,000		209,000		0,000	199,2			
c	Net investment earnings, gains,									
•	and losses	56,800		56,654	2	6,875	30,30	₀₉	3	36,371
d	Grants or scholarships	33,000				.,				
e	Other expenditures for facilities									
	and programs								8	35,000
f	Administrative expenses	20,055		17,989						,
g g	End of year balance	2,109,402	2	,062,657	1 81	4,992	1,628,1	17	1 39	8,517
2	Provide the estimated percentage of the						1,020,1			,0,011
- a	Board designated or quasi-endowment		<u>%</u>	110 19, 00	(4),	.				
b	Permanent endowment	%								
c	Temporarily restricted endowment	▶ %								
	The percentages in lines 2a, 2b, and 2		%							
3a	Are there endowment funds not in the	·		n that are	held and adr	niniste	red for the			
-	organization by		3						Yes	No
	(i) unrelated organizations							3a(i)		X
	(ii) related organizations							3a(ii)		X
b	If "Yes" to 3a(ii), are the related organiz	zations listed as req	uired on S	chedule f	٦?			3b	*	
4	Describe in Part XIII the intended uses	· · · · · · · · · · · · · · · · · · ·								\. <u>. </u>
Part										
, air	Description of property	(a) Cost or oth			st or other	/c\	Accumulated	(d) B	ook value	
	Description of property	(a) Cost or our	B .	. ,	s (other)		depreciation	(4) 6	JUN VOIU	-
1a	Land	, , , , , , , , , , , , , , , , , , , ,	0		0					
b	Buildings		0		0	,	0	-		
	Leasehold improvements	 	0	 ,	0		0			 0
C C	-	 	0		0		0			 0
d	Equipment		0		. 0		0			0
E Total	Other . . Add lines 1a through 1e (Column (d) ri	rust equal Form 00		column (F						0
ividi	nou illes la allough le (Column (a) h	iusi oquar i Ullii 99	o , i arc \wedge , i	ooiuiiiii (E	7, 1110 10(b)					

Part X	Other Liabilities. See Form	990, Part X, line 25.	
1.	(a) Description of liability	(b) Book value	
(1) Federal	income taxes	0	0
(2)			
(3)			
(4)			
(5)			
(6)			
(7)	·		
(8)	· · · · · · · · · · · · · · · · · · ·		
(9)			
(10)	<u> </u>		
(11)			
Total (Column (b)	must equal Form 990, Part X, col (B) line 25)	• 0	

2. FIN 48 (ASC 740) Footnote In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII.

Sched	ule D (Form 990) 2012 Washington State Association for Justice Foundation			<u>91-194</u>	40182 Page
Par	Reconciliation of Revenue per Audited Financial Stateme	nts W	ith Revenue per	Retur	'n
1	Total revenue, gains, and other support per audited financial statements .			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
ä	Net unrealized gains on investments	2a			•
b	Donated services and use of facilities	2b	1	7- 1	
С	Recoveries of prior year grants	2c		1	
d	Other (Describe in Part XIII) .	2d		1."	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1 .			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b.	4a			
b	Other (Describe in Part XIII)	4b		1	
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
Par	Reconciliation of Expenses per Audited Financial Statement	ents V	Vith Expenses p	er Ret	urn
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a		7,	
b	Prior year adjustments	2b]	
С	Other losses	2c] : [
d	Other (Describe in Part XIII)	2d] []	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			-	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		l'	
b	Other (Describe in Part XIII)	4b		1 : : : : : : : : : : : : : : : : : : :	
С	Add lines 4a and 4b	<u> </u>		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	
Par	XIII Supplemental Information				
Part '	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Par I, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also onal information				

Schedule D (Form 990) 2012 Washington State Association for Justice Foundation	91-1940182 Page 5
Part XIII Supplemental Information (continued)	
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2012

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

Employer identification number

Washington State Association for Justice Foundation	91-1940182
Form 990 Part VI Section C Line 19 Governing documents, conflict of interest policy and	
financial statements are provided upon request	
Form 990 Part VI Section B Line Line 12c Compliance with the Organization's conflict of	
interest policy is reviewed at the annual board retreat	
Form 990 Part VI Section B Line Line 15a, 15b The Washington State Association for Justice	
Foundation is governed by the executive board in conjunction with a separately appointed	
operations committee. The contract for the Executive director is reviewed & approved annually	
by this independent group. Compensation of the Organization's Executive Director is determined	•••••
using comparative salary numbers it gets from other NPO executive groups in the Seattle area	
······································	
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Schedule O (Form 990 or 990-EZ) (2012) Name of the organization	Employer Identification number	age Z
	91-1940182	
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