

# 2949319530904

Cara	, <b>9</b> 9	10	Return of Organization Exempt From Inco	me Tax	ĸ	OMB No. 15/	5-0047
Forn			Trotain of organization Exompt From mod	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	201	5
			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except				
Depa	ertment of	the Treasury ue Service	Do not enter social security numbers on this form as it may be n			Open to	
			▶ Information about Form 990 and its instructions is at www.irs.gc			Inspec	((U))
			ndar year, or tax year beginning 07-01 , 2015, and ending	06-	···	, 20 16	
$\overline{}$		•	C Name of organization Judicial Crisis Network		) Employe	r identification n	unicer
_	Address		Doing business as  Number and street (or IP O. box if mail is not delivered to street address)  Room/suite		Talaabaa	20-2303252	
Ц	Name ch	_			E Talephoni		
	Initial ret	· ·	722 12th Street, NW Fourth  City or town, state or province, country, and ZIP or foreign postal code	Floor		571-247-3688	
		rn/terminated		1			
	Amende		Washington, DC 20005	_	3 Gross rec		8,545,000
L	Applicati		F Name and address of principal officer Daniel Casey			ubordinates? Yes	
	7-7-0-0	mpt status	722 12th Street, NW, Fourth Floor, Washington DC, 20005  ☐ 501(c)(3)	4 ' '		included? <b>You</b> list (see instruction	
.1	Website			H(c) Group e			,,,
<u>K</u>			✓ Corporation Trust Association Other L Year of formation	<del></del>	<del></del>	of legal domisile	VA
_	art I	Summ		2004	1 m otata c	or logis dominate	
_	1		scribe the organization's mission or most significant activities The miss	on of the J	udicial Ci	rısıs Network i	s to
Ø	1		he vision of liberty and justice in America, dedicated to the rule of law, with a	~ ~~~~~ ~~ ~			
ă		*********	nize citizens in this mission		P. 21. 11. 11. 11.	HILLION HUM AN	
Ę	2		is box $ ightharpoonup \Box$ if the organization discontinued its pperations or disposed of	more than	25% of 1	ts net assets	
Activities & Governance	3		of voting members of the governing body (Part V), line 1a)	,	3		2
~	4		of independent voting members of the governing body (Part VI, line 1b)	,	4		2
tes	5	Total nur	nber of individuals employed in calendar year 2015 (Part V, line 2a)	,	5		
ΪĀ	6	Total nur	nber of volunteers (estimate if necessary)		6		
A	7a		elated business revenue from Part VIII, column 27-line 12		7a		
	b	Net unre	ated business taxable income from Form 990-1-10-26		7b		
				Pnor Ye	ar	Current Y	ear
ě	8		tions and grants (Part VIII, line 1h) service revenue (Part VIII, line 2g)	5	,700,000		8,545,000
Revenue	9	Program	service revenue (Part VIII, line 2g) int income (Part VIII, column (A), lines 3, 4 (and 7d) venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 101, 41, 41, 41, 41, 41, 41, 41, 41, 41, 4				
æ	10	Investme	int income (Part VIII, column (A), lines 3, 4(3)ct.70				
	11	Other rev	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10t, ehr 1, etc.				
	12		enue – add lines 8 through 11 (must equal Part VIII, columba (A) line 17)		,700,000	<del>-</del>	18,545,000
	13		nd similar amounts paid (Part IX, column (A), lines 1-3)	4	,570,500		8,530,500
	45		other compensation, employee benefits (Part IX, column (A), lines 5–10)		(2.250		
Expenses	16a		onal fundraising fees (Part IX, column (A), line 11e)		52,250		0
eg Eg	b		draising expenses (Part IX, column (D), line 25) ▶	5.44.97.6	17.1		7600.0855
Ä	17		penses (Part IX, column (A), lines 11a-11d, 11f-24e)		,048,091	A R. O. S.	9,947,956
	18		penses Add lines 13-17 (must equal Part IX, column (A), line 25)		670,841		18,478,456
	19		less expenses Subtract line 18 from line 12		29,159		66,544
ъ.			···	ginning of Cu		End of 1	
Net Assets or	20	Total ass	sets (Part X, line 16)		39,286		105,830
¥ X	21	Total liab	ollities (Part X, line 26)				
ž	22	Net asse	ets or fund balances. Subtract line 21 from line 20		39,286		105,830
	art II	Signa	ture Block				
			ury. I declare that I have examined this return, including accompanying schedules and statem			my knowledge a	nd belief, it is
	ne coure	ct, and comp	plete Declaration of preparer (other than officer) is based on all information of which preparer h	as any know	eage		
			Dall		<u>06-</u>	13-18	
	gn	Sign	Daviel L. Casex President	Da	ite		
П	ere	1			<del></del>		
	····		e or print name and title // ype preparer's name Preparer's signature / Dat			C . PTIN	
	aid		- Resmond linker (M)	6-13-16	Check self-em	<b>□</b> " [	400000
	repar		mond content, era			P-07~4 P01	486002
U	se Or				n's EIN ▶ one ro	301-598-	SR51
M	ay the		address PO Box 6213, Solver Spring, Maryland 20916-6213 ss this return with the preparer shown above? (see instructions)	) Fix	אין פווע		os 🗸 No
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	50 (2015)	-
Part		_
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	The mission of the Judicial Crisis Network 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.	
	······	
2	Did the organization undertake any significant program services during the year which were not listed on the	_
	prior Form 990 or 990-EZ?	0
	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?	0
	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 measured	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other the total expenses, and revenue, if any, for each program service reported.	₃rs,
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code: ) (Expenses \$ 18,311,885 including grants of \$ 8,530,500 ) (Revenue \$ )	—
40		_
	During the fiscal year ended June 30, 2016, the Judicial Crisis Network (Organization) produced radio and television advertisements	·
	regarding significant legal issues, including the United States Supreme Court vacancy. The Organization conducted media and public presentations covering the significance of the United States Supreme Court for the upcoming election, the vacancy on the	
	Court, major United States Supreme Court cases throughout the Court's term, and previews of the upcoming term. United States	
	Supreme Court cases which were discussed included: Fisher v. Texas, Little Sisters of the Poor, Friedrichs v. California Teachers'	
	Association, United States v. Texas, and Whole Women's Health v Hellerstadt.	
4b	(Code. ) (Expenses \$ including grants of \$ ) (Revenue \$ )	
		•
4c	(Code. ) (Expenses \$ including grants of \$) (Revenue \$)	
4d	r - 9	
4e	(Expenses \$ including grants of \$ ) (Revenue \$ )	
70	Total program service expenses  18.311.885	

Form 99	20-2303252 <sub>0 (2015)</sub>		1	Page 3
Part				
			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		<b>/</b>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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		1
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		<b> </b> ✓
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8	-	1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	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		1
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? If "Yes," complete Schedule D, Parts XI and XII	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 and XII 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	445		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	14b	-	<b>V</b>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	-	<b>∀</b>
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)	-		
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	17		<b>✓</b>
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	18		<b>✓</b>

Part	Checklist of Required Schedules (continued)			<del></del>
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	Yes	No
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		<del></del>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<b>✓</b>	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<b>√</b>
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		<b>✓</b>
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 25a	24a		<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), 501(c)(4), and 501(c)(29) 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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 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	28a 28b		<b>√</b>
C	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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		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		1
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, Part II, III, or IV, and Part 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
	13. Note: All Form 330 lilers are required to complete schedule O	38 For	_ <b>√</b> m 990	0 (2015

Part				_
	Check if Schedule O contains a response or note to any line in this Part V	<del></del>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable   1a   7		163	NO
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	1	
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 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)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			١.
	account)?	4a		<b>✓</b>
b	If "Yes," enter the name of the foreign country: ▶			ŀ
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>√</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c_		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a_	✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b_	✓_	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
_	and services provided to the payor?	7a_		ļ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b_		ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		
	required to file Form 8282?	7c_		<del> </del>
ď	If "Yes," indicate the number of Forms 8282 filed during the year	- <u>-</u>		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		ļ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		-
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g		-
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h_		<del> </del>
Ū		8		
9	sponsoring organization have excess business holdings at any time during the year?	-	<u> </u>	
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12		ļ	1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1		
11	Section 501(c)(12) organizations. Enter:	ĺ		
а	Gross income from members or shareholders	ĺ	[	
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u></u>		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O.			
р	Enter the amount of reserves the organization is required to maintain by the states in which		1	1
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	<u> </u>	<u> </u>	<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	<b> </b> ✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b	1	1

	0 (2015)			age <b>o</b>
Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Si			
Soction	Check if Schedule O contains a response or note to any line in this Part VI	• •	• •	V
Secu	on A. Governing Body and Management	т	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year .   1a   2			
	If there are material differences in voting rights among members of the governing body, or	ŀ		
	if the governing body delegated broad authority to an executive committee or similar		ļ	
	committee, explain in Schedule O.		}	-
b	Enter the number of voting members included in line 1a, above, who are independent . 1b2			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			1
	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		<b>√</b>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>√</b> _
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		<b>√</b>
6 7a	Did the organization have members or stockholders?	6		<b>✓</b>
1 a	one or more members of the governing body?	7a		✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	10	_	<u> </u>
b	stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		•	
	the year by the following.			
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
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	9		<u> </u>
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co		
40-	Did the average have level shorters bronches or affiliates?	100	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		<b>✓</b>
	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 filling the form?	11a	1	$\vdash$
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			1
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		1
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		<u> </u>
13	Did the organization have a written whistleblower policy?	13		<b>✓</b>
14	Did the organization have a written document retention and destruction policy?	14	<b>/</b>	<del> </del> -
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
•		15a	-	-,l
a b	The organization's CEO, Executive Director, or top management official	15b	<del> </del>	<b>√</b>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		<u> </u>	<del>  •</del>
16a				
	with a taxable entity during the year?	16a		1
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		ļ	
	organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filled None	. EO1	(0)(2)	. on!. \
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.	1 50 1	(0)(0)8	s orliy)
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of inf	erest	polic	v, and
	financial statements available to the public during the tax year.		, <b>.</b>	,,a
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	: ▶	
	Daniel Casey, Judicial Crisis Network, 722 12th Street, NW, 4th Floor, Washington, DC 20005, (571) 247-3688			

Part VII	Compensation of Officers, Directors,	Trustees, Key Employees,	<b>Highest Compensated</b>	Employees, and
	Independent Contractors			

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
(A) Name and Title	(B) Average hours per week (list any	box, i	ot ch unles	s pe d a d	tion more	e than o is both or/trust	an ee)	(D)  Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)		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 Secretary, Treasurer, Director	5	<b>√</b>		<b> </b>				0	0	0
(2) Daniel Casey	5	Ť		١	-					
President, Director	† <del>-</del>	✓		✓				0	0	0
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Form **990** (2015)

Part	Section A. Officers, Directors, Trust (A)	tees, Key E (B)			(C Pos	C) ition	than o		ompensated E	mployees (co (E)	ntinue		F)	
	Name and title	Average hours per week (list any hours for related organizations below dotted line)	office or directo	unles er and	s pe	rson	both Highest compensated employee	an	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation fr related organizations (W-2/1099-MIS	,	amo ot compe fror organ and r	nated unt of her ensation in the sization elated izations	
(15)														
(16)													-	_
(17)			<del>                                     </del>				<u> </u>		<del> </del>					
													_	_
(18)		<del> </del>												
(19)													-	
(20)							-	<u> </u>				-		
		ļ				_		-						
						_		-			-			
				ļ	_	ļ		-	<u> </u>					
(23)		<u></u>												
(24)														
(25)		<u> </u>	_			┢					+			
41-			<u> </u>			L		Ļ						
1b c	Sub-total	VII. Section		•	•			<b>P</b>			0			
d	Total (add lines 1b and 1c)							<u>&gt;</u>			0			
2	Total number of individuals (including bu reportable compensation from the organ			nose	e list	ted	above	e) w	/ho received m	ore than \$100	0,000	of		
									<del></del>				Yes	No
3	Did the organization list any <b>former</b> or employee on line 1a? <i>If "Yes," complete</i>							emp	oloyee, or higl	nest compen	sated	3		1
4	For any individual listed on line 1a, is the	e sum of re	porta	ble	con	npe	nsatio					<u> </u>		<u> </u>
	organization and related organizations individual	greater th						-	complete Sci	nedule J for	such			,
5	Did any person listed on line 1a receive of									zation or indiv	⁄ıdual	4		<b>/</b>
	for services rendered to the organization	? If "Yes," (	comp	lete	Scl	hed	ule J	for :	such person	<u></u>		5		1
Section 1	on B. Independent Contractors  Complete this table for your five highest	oomponed	tod in	don	ond	lont	cont		ore that recent	od more then	\$100	000 of		
•	compensation from the organization. Re year.													ax
	(A)	droop							(B)	20011005		(C)	nation.	
Menta	Name and business adder Media, 210 W Pennsylvania Avenue, Tows		n4					24	Description of livertising & pro			Compens		75,00
	blic Relations, 2850 Eisenhower Avenue, Al			14				$\overline{}$	iblic relations	notion				38,43
	er Innocenzi, 705 Prince Street, Alexandria V								lvertising & pro	motion				08,36
	rs Group, 1819 Polk Street, #373, San Franci	-	109					$\overline{}$	lvertising & pro				8	21,79
Creati 2	ve Direct, 25 E Main Street, Richmond, VA, 2		na h		204	limoi	44		lvertising & pro				5	28,74

received more than \$100,000 of compensation from the organization ▶

Part VIII		Statement of Revenue								
		Check if Schedule O contains a re	sponse or note to				[			
,				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512-514			
nts nts	1a	Federated campaigns 1a								
Gifts, Grants ilar Amounts	b	Membership dues 1b								
ts, ( Arr	С	Fundraising events 1c								
Gif ilar	d	Related organizations 1d	<del></del>							
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (contributions) 1e								
urtio ier (	f	All other contributions, gifts, grants, and similar amounts not included above								
G E	_	<u> </u>	1070 107000							
ont Ind	9	Noncash contributions included in lines 1a-1f. \$								
	h	Total. Add lines 1a-1f	Business Code	18,545,000	<u> </u>					
Program Service Revenue	2a									
3ev	b		1 1							
e	C									
ēΖ	d									
E	e									
gra	f	All other program service revenue.								
F	g		▶			<del></del>				
	3	Investment income (including divi								
		and other similar amounts)	▶							
	4	Income from investment of tax-exempt	bond proceeds ▶							
	5		▶		· <del> · · · · · · · · · · · · · · · </del>					
	_	(ı) Reai	(II) Personal							
	6a	Gross rents	_							
	b	Less rental expenses								
	c d	Rental income or (loss)  Net rental income or (loss)								
	7a	Gross amount from sales of (i) Securities	▶			<del> </del>				
	'"	assets other than inventory	(4) 5 3 1 1							
	ь	Less: cost or other basis								
		and sales expenses	1							
	С	Gain or (loss)								
	d	Net gain or (loss)	<b>&gt;</b>							
•										
Other Revenue	8a	Gross income from fundraising events (not including \$								
é		of contributions reported on line 1c).					i			
er		C D-+ N/ Im- 10	a							
됐	b	Less: direct expenses	b							
	С	Net income or (loss) from fundraisin	g events . ▶							
	9a	Gross income from gaming activities.								
		See Part IV, line 19	а	1						
	b		b							
	1	Net income or (loss) from gaming ac				,				
	10a	Gross sales of inventory, less								
		returns and allowances								
	l	9	b_							
	<u> </u>	Net income or (loss) from sales of in	ventory ► Business Code			ļ	ļ			
	11a		Dusiliess Code							
	b		-			-				
	C			<del></del>		<del>                                     </del>				
	d	All other revenue								
	_	Total. Add lines 11a-11d	•							
	12	Total revenue See instructions		10 545 000	-	1				

Part	IX Statement of Functional Expenses				
Section	n 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon		ne in this Part IX .	· · · · · · · ·	
	t include amounts reported on lines 6b, 7b, , 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 domestic organizations				
_	and domestic governments. See Part IV, line 21	8,530,500	8,530,500		
2	Grants and other assistance to domestic				1
•	Individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign				1
	individuals. See Part IV, lines 15 and 16				i 1
4	Benefits paid to or for members				1
5	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	Other salaries and wages		······································		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits		<del></del>		
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management		<u> </u>		<del> </del>
þ	Legal	93,691	0	93,691	0
C	Accounting	44,500	0	44,500	0
ď	Lobbying		<del></del>		
e f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column		<del></del>		
Ū	(A) amount, list line 11g expenses on Schedule O.)	3,250,293	3,250,293	o	0
12	Advertising and promotion	6,456,388	6,456,388	0	0
13	Office expenses	12,505	0	12,505	0
14	Information technology	37,461	37,461	0	0
15	Royalties				
16 17	Occupancy	10,752	0	10,752	0
18	Payments of travel or entertainment expenses	37,243	37,243	0	0
	for any federal, state, or local public officials		ĺ		
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance	5,123	0	5,123	0
24	Other expenses Itemize expenses not covered		ļ		
	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.)				
а					
b				·	
С					
d					
е	All other expenses	<u> </u>			
25	Total functional expenses. Add lines 1 through 24e	18,478,456	18,311,885	166,571	
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)	!			

E	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Pai			
_			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	39,286	1	105,830
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees.  Complete Part II of Schedule L	<del>-</del> <del>-</del> -	5	
Assets	6	Loans and other 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) Complete Part II of Schedule L		-6	
	7	Notes and loans receivable, net		7	
ĕ	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 10a			
	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)	39,286	16	105,830
	17	Accounts payable and accrued expenses		17	
	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	
es	22	Loans and other payables to current and former officers, directors,			
Ħ	}	trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L		22	<del></del>
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	<del></del>	24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25			0
es		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.	<u>_</u>		<u>.</u>
3uc	27	Unrestricted net assets	39,286	27	105,830
3ak	28	Temporarily restricted net assets	33,200	28	100,030
d E	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
S	30	Capital stock or trust principal, or current funds		30	
se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds	<del>-</del>	32	<del></del>
det.	33	Total net assets or fund balances	39,286		105,830
Z	34	Total liabilities and net assets/fund balances	20,200	34	105,000

					9-	
Par	Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>	<u> </u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		18	,545,	000
2	Total expenses (must equal Part IX, column (A), line 25)	2		18	<u>,478,</u>	456
3	Revenue less expenses. Subtract line 2 from line 1	_3			66,	544
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	_		39,	286
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			105,	830
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u> </u>			
				Ye	s N	No_
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_	1	,	
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	in	j	J	
_	Schedule O.			_		اا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			<u> </u>	<u> </u>	_
	If "Yes," check a box below to indicate whether the financial statements for the year were companied as a second basis of the	oiled	or		ŀ	
	reviewed on a separate basis, consolidated basis, or both:				1	
	Separate basis Consolidated basis Both consolidated and separate basis				_ _	1
b	Were the organization's financial statements audited by an independent accountant?			Ч_		<u>/_</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on	a		- [	1
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis			[		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or		_			
	of the audit, review, or compilation of its financial statements and selection of an independent accounts to a second the company of the comp			-	4	
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plain	in	1		
0		-الد. ــ ک	-~-			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	τοπη				,
	the Single Audit Act and OMB Circular A-133?		· 3a	4	+	<u> </u>
a	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a					
	required addit of addits, explain why in schedule of and describe any steps taken to undergo such a	uuiis.			00	
			F	arm 9	90 0	/015

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

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

омв No. 1545-0047 2015

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations; Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	of organization	nizations: Complete Part III.		Employer ident	ification number
ludici	al Crisis Network				0-2303252
Part		organization is exempt unde	r section 501(c		
1		ne organization's direct and indirect			<u> </u>
2	Political expenditures .			▶ \$	2,119,000
3	Volunteer hours				0
				•	
Part	I-B Complete if the	organization is exempt unde	er section 501(c	)(3).	
1	Enter the amount of any e	excise tax incurred by the organiza	tion under section	4955 ▶ \$	
2	Enter the amount of any e	excise tax incurred by organization	managers under s	section 4955 🕨 💲	
3	If the organization incurre	d a section 4955 tax, did it file For	m 4720 for this ye	ar?	Yes No
4a	Was a correction made?				Yes No
<u>b</u>	If "Yes," describe in Part				
Part		organization is exempt unde			c)(3).
1	Enter the amount directing activities	y expended by the filing organization	ation for section (	527 exempt function ▶ \$	0
2	Enter the amount of the 527 exempt function active	filing organization's funds contributies		anizations for section	2,119,000
3	•	expenditures. Add lines 1 and 2.		on Form 1120-POL,	
4		file Form 1120-POL for this year?			2,119,000 Yes No
5	Enter the names, address organization made payme the amount of political co	ses and employer identification nun ents. For each organization listed, entributions received that were pro- fund or a political action committe	nber (EIN) of all se enter the amount p mptly and directly	ection 527 political organizoaid from the filing organizoalidelivered to a separate pe	rations to which the filing zation's funds. Also enter olitical organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1) <sub>N</sub>	orthern VA Victory Fund	PO 26141 Alexandria VA 22313	81-1416568	24.500	0
		1747 Pennsylvania Avenue NW	31-1410308	24,300	<b>_</b>
	epublican Attorneys eneral Association	Suite 800, Washington DC 20006	46-4501717	1,245,000	. 0
		1201 F Street NW Suite 675	30-4001117	.,_1_10,000	
	epublican State Leadership ommittee	Washington DC 20004	05-0532524	325,000	0
	epublican Governors	1747 Pennsylvania Avenue NW	35 555==-		<del></del>
	epublican Governors ssocation	Suite 250, Washington DC 20006	11-3655877	500,000	0
		115 E Grace Street			
(5) V	hitbeck for Chairman	Richmond, Virginia	81-1414075	24,500	0
(6)					

20	-23	വദ	2	K	2
/	-/.7		_	. B.	•

Pa	rt	II-A	Complete if the organiza section 501(h)).	tion	is exempt u	nder section 50	)1(c)(3) and file	d Form 5768 (ele	ction under
Ā	Cr	neck	▶ ☐ if the filing organization	belo	ngs to an aff	iliated group (ar	d list in Part IV	each affiliated gro	up member's
			name, address, EIN, ex						
<u>B</u>	Ch	1eck	▶ ☐ if the filing organization				rol" provisions	apply.	
					ing Expenditu		_	(a) Filing	(b) Affiliated
			(The term "expenditures					organization's totals	group totals
1	a	Tota	al lobbying expenditures to influe	nce p	oublic opinion (	grass roots lobby	ring)	L	
	þ	Tota	al lobbying expenditures to influe	nce a	a legislative bo	dy (direct lobbyin	g)		
	C	Tota	al lobbying expenditures (add line	s 1a	and 1b)				·
	đ	Oth	er exempt purpose expenditures						
	Θ		al exempt purpose expenditures						
	1		bying nontaxable amount. Ent umns.	er th	ne amount fro	om the following	table in both		
		If the	amount on line 1e, column (a) or (l	) ls:	The lobbying	nontaxable amoun	t is:		
		Not o	over \$500,000		20% of the am	ount on line 1e.			The state of the s
		Over	\$500,000 but not over \$1,000,000		\$100,000 plus	15% of the excess	over \$500,000.		
		Over	r \$1,000,000 but not over \$1,500,000		\$175,000 plus	10% of the excess			
		Over	\$1,500,000 but not over \$17,000,00	0	\$225,000 plus	5% of the excess o	ver \$1,500,000.		Hing the
_			r \$17,000,000		\$1,000,000.				
	g	Gra	ssroots nontaxable amount (ente	r 259	% of line 1f)				
	h		stract line 1g from line 1a. If zero						
	i		stract line 1f from line 1c. If zero o						
	J		nere is an amount other than a orting section 4911 tax for this y				the organization		Yes No
		(S	ome organizations that made a	sec	tion 501(h) ele	Period Under sec ection do not hav uctions for lines	e to complete al	of the five colum	ns below.
_			Lobb	ying	Expenditures	During 4-Year A	veraging Period		
		(	Calendar year (or fiscal year beginning in)		(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) Total
-	2a	Lob	obying nontaxable amount						
	b		obylng ceiling amount 0% of line 2a, column (e))						
_	c	Tota	al lobbying expenditures						
	d	Gra	issroots nontaxable amount						
_	0		ssroots ceiling amount 0% of line 2d, column (e))						
	ť	Gra	assroots lobbying expenditures						

Part	(election under section 501(h)).				,	
	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed ption of the lobbying activity.	(a Yes	No		(b)	
1	During the year, did the filing organization attempt to influence foreign, national, state or local					<u> </u>
	legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			ina Sita		
а	Volunteers?				2	1
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			15.2		,,
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
8	Publications, or published or broadcast statements?		L			
f	Grants to other organizations for lobbying purposes?		ļ			
9	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?	- married A	S COMME			
Ĵ			<b>300</b>	CARTO DE ME	ESTATE OF	edent) many
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	-rangi	24.274			
b	If "Yes," enter the amount of any tax incurred under section 4912	钀	4			
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 . If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			Same	وجيده	राषक्षर ह
Part		E\ 4		otion	e la company	20年以底
rait	501(c)(6).	<i>5)</i> , (	טו שפ	CHOIL		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		•	1	↓	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		•	2	↓	<u> </u>
3 Part	Did the organization agree to carry over lobbying and political expenditures from the prior year? .  II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			3		<u> </u>
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OF answered "Yes."  Dues, assessments and similar amounts from members					3, is
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b	ļ		
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5			
Par				٠		
	e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou	ıp lis	t): Pa	rt II-A.	lines	1 and
2 (see	instructions); and Part II-B, line 1. Also, complete this part for any additional information.	•	·			
Part I-	, Line 1: Funds were provided for Section 527 exempt function activities.					
•••••	***************************************					
		••••	••••••	•••••		
					•••••	
						•••••

#### SCHEDULE I (Form 990)

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

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

2015

OMB No 1545-0047

► Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990

Judicial Crisis Network 20-2303252 Part I General Information on Grants and Assistance 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? □No

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form

<del></del>					If Method of valuation	tional space is needed	41 D ( )
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) American Democracy Alliance			_				
1100 Main St Kansas City MO 64105	26-0623149	501c4	25,000	0	n/a	n/a	general support
(2) Arizona Public Integrity Alliance							
O 30111 Meza AZ 85275	46-0793813	501c4	1,245,000	0	n/a	n/a	general support
(3) Concerned Women for America							
015 15th St. NW, Washington, DC	95-3580834_	501c4	50,000	0	n/a	nia	general support
(4) Faith Freedom Coalition					1		
O 957736 Duluth GA 30095	27-0182697	501c4	375,000	0	n/a	n/a	general support
(5) Job Creators Network Fdn							
5455 N Dallas Pky #600 Addison TX	27-3638207	501c3	100,000	0	n/a	n/a	general support
(6) Morning in Nevada							
O 97212 Las Vegas NV 89193	47-4169138	501c4	50,000	0	n/a	n/a	general support
(7) Nebraskans for Death Penalty							
327 H St No 302, Lincoln NE 68508	47-4142025	501c4	300,000	0	n/a	nia	general support
(8) North Carolina Chamber Comme							
01 Corporate Dr No 400 Raleigh NC	56-0340499	501c6	200,000		n/a	n/a	general support
(9) Northern Virginia Victory Fund			}		1		
O 26141 Alexandria VA 22313	81-1416568	527	24,500	0	n/a	n/a	general support
10) Republican Attorney Gen Assoc			l				ì
747 Pennsylvania Ave NW #800 DC	46-4501717	527	1,245,000		n/a	n/a	general support
11) Republican Governors Assoc			]				1
747 Pennsylvania Ave NW #250 DC	11-3655877	527	500,000	0	n/a	n/a	general support
12) Republican State Leadership Co							
201 F St NW #675 Wash DC 20004	05-0532524	527	325,000	0	n/a	n/a	general support
2 Enter total number of section				ine 1 table			<b>)</b> 1

3	Enter total number	of other	organizations	listed in the	ne line 1	table
Ear D	annuark Reduction A	et Notice	soo the leets	etions for	Form 00	

Cat No 50055P

18 Schedule I (Form 990) (2015)

Page Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.								
Part III can be duplicated if addition (a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance			
_1		<del></del>						
2								
3								
4								
5		·						
6								
7								
Part IV Supplemental Information. Pro Part I, Line 2. The Organization provided grants to recipient entity.								
Part II, Continued	***************************************							
Rule of Law Defense Fund, 1747 Pennsylvania Ave	nue , NW, Suite 800, Wasi	nington DC, 20006, 4	6-5130903, 501c4, \$350,	000, \$0, n/a, п/a, general supp	port			
State Government Leadership Foundation 1201 F	Street, NW, Suite 675, Wa	shington, DC 20004,	20-0505849, 501c4, \$50	0,000, \$0, n/a, n/a, general suj	pport			
Tea Party Patriots, 1025 Rose Creek Drive, Suite 62	20, Woodstock, GA 30189,	27-4065390, 501c4,	\$1,686,500, \$0, n/a, n/a,	general support				
Virginia First Foundation, 9702 Gayton Road, Suite	308, Richmond, VA 2323	8, 47-3310537, 501c4	, \$90,000, \$0, n/a, n/a, g	eneral support				
Whitbeck for Chairman, 115 E Grace Street, Richm	ond, VA 23219, 81-141407	5, 527, <b>\$</b> 24,500 <b>\$</b> 0, r	n/a, n/a, general suppor	l				
Wisconsin Alliance for Reform, PO Box 1423, Madi	son, WI 53701, 47-405592	0, 501c4, \$1,365 000,	n/a, n/a, general suppo	ort				
Liberty 2 0, 15 W 6th Street, Suite 2507, Tulsa, OK,								

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

## Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 20**15** 

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

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Employer identification number 20-2303252 **Judicial Crisis Network** Form 990, Part VI, Section B, Line 11b. The Form 990 is prepared by a Certified Public Accountant, and reviewed by ouside legal counsel before it is filed. Officers and directors also review the document before filing with the Internal Revenue Service. Form 990, Part VI, Section B, Line 12: The Organization is updating its written Conflict of Interest Policy. Officers and directors are required to report interests that could give rise to conflicts. Form 990, Part VI, Section B, Line 15: There is no compensation for officers and directors, There are no employees Form 990, Part VI, Section C, Line 19: The articles of incorporation are available from the Virginia State Corporation Commission, and as an attachment to the Form 1024 Other governing documents are not available to the public. Form 990, Part IX, Line 11g: Fees for Services (Non-Employees) Other: Public Relations \$1,438,439; Polling \$409,223; Research \$127,500, Writer \$2,000, Strategy \$552,313, Telephone Campaign \$313,011, Public Affairs \$166,883, Data Analysis \$213,000; Other \$27,924. Total \$3,250,293. Form 990, Page 1, Box B: The Form 990 is amended in order to re-classify the payment to Liberty 2 0 from fees for services other to grant to domestic organizations. This has resulted in the following changes: Form 990, Part I, Line 13 Current Year: changed from \$8,455,500 to \$8,530,500 Form 990, Part I, Line 17 Current Year: changed from \$10,022,956 to \$9,947,956 Form 990, Part III, Box 4a: grants changed from \$8,455,500 to \$8,530,500 Form 990, Part IX, Line 1: changed from \$8,455,500 to \$8,530,500 Form 990, Part IX, Line 11g: changed from \$3,325,293 to \$3,250,293 Form 990, Schedule I, Part II, Line 3: changed from17 to 18 Form 990, Schedule I, Part IV: added line for Liberty 2 0 information