DLN: 93493319130698 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a> Department of the Treasur Internal Revenue Service Inspection For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017 C Name of organization LAWYERS' COMMITTEE FOR CIVIL RIGHTS D Employer identification number B Check if applicable ☑ Address change UNDER LAW 52-0799246 ☐ Name change Doing business as LCCRUL ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1500 K STREET NW NO 900 ☐ Amended return ☐ Application pending (202) 662-8600 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20005 G Gross receipts \$ 11,019,594 F Name and address of principal officer H(a) Is this a group return for KRISTEN CLARKE ☐Yes ☑No subordinates? 1500 K STREET NW NO 900 H(b) Are all subordinates WASHINGTON, DC 20005 ☐ Yes ☐No included? I Tax-exempt status **☑** 501(c)(3) ☐ 501(c)( ) **◄** (Insert no ) 4947(a)(1) or □ 527 If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► LAWYERSCOMMITTEE ORG L Year of formation 1963 M State of legal domicile DC **K** Form of organization  $\square$  Corporation  $\square$  Trust  $\square$  Association  $\square$  Other  $\blacktriangleright$ Part I Summary 1 Briefly describe the organization's mission or most significant activities
AT A HISTORIC MEETING AT THE WHITE HOUSE MORE THAN 50 YEARS AGO IN 1963, PRESIDENT JOHN F KENNEDY, VICE PRESIDENT
LYNDON B JOHNSON, AND ATTORNEY GENERAL ROBERT F KENNEDY CHALLENGED 244 OF AMERICA'S PROMINENT ATTORNEYS TO
SPEARHEAD THE CAUSE FOR EQUAL JUSTICE DURING A TUMULTUOUS CIVIL RIGHTS ERA THE LAWYERS' COMMITTEE WAS FOUNDED AT
THIS CLOSED DOOR MEETING AND HAS BEEN AT THE FOREFRONT OF EFFORTS TO ADVANCE CIVIL RIGHTS EVER SINCE TODAY, THE
LAWYERS' COMMITTEE IS A NONPARTISAN, NONPROFIT ORGANIZATION WHOSE PRINCIPAL MISSION IS TO SECURE EQUAL JUSTICE FOR
ALL THROUGH THE RULE OF LAW, TARGETING IN PARTICULAR THE INEQUITIES CONFRONTING AFRICAN AMERICANS AND OTHER RACIAL
AND ETHNIC MINORITIES THE LAWYERS' COMMITTEE CONTINUES TO MARSHAL THE RESOURCES OF THE PRIVATE BAR TO OBTAIN Activities & Governance EQUAL JUSTICE FOR MINORITIES BY ADDRESSING FACTORS CONTRIBUTING TO RACIAL JUSTICE AND ECONOMIC OPPORTUNITY 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 17 Number of voting members of the governing body (Part VI, line 1a) . 17 4 4 Number of independent voting members of the governing body (Part VI, line 1b) 53 5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) . . . 6 0 Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 10.495.229 8,765,949 8 Contributions and grants (Part VIII, line 1h) . 9 Program service revenue (Part VIII, line 2g) . 283,203 655,996 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 161,264 194,188 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -152,743 -82,253 10,786,953 9,533,880 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3). 200,000 275,750 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 5,150,650 4,772,664 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . Total fundraising expenses (Part IX, column (D), line 25) ▶666,648 2,218,069 1,815,508 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 7,190,733 7,241,908 Revenue less expenses Subtract line 18 from line 12 . 3,596,220 2,291,972 d Balances Beginning of Current Year End of Year 13,395,553 20 Total assets (Part X, line 16) . 12,190,176 21 Total liabilities (Part X, line 26) . 4.025.553 2.770.210 22 Net assets or fund balances Subtract line 21 from line 20 . 8,164,623 10,625,343 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2018-11-15 Signature of officer Sign Here KRISTEN CLARKE PRESIDENT & EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name R MICHAEL SORRELLS Preparer's signature R MICHAEL SORRELLS Date Check I If P00001737 Paid self-employed Firm's name TATE AND TRYON Firm's EIN ► 52-1855942 Preparer Firm's address ► 2021 L STREET NW SUITE 400 Phone no (202) 293-2200 Use Only WASHINGTON, DC 20036 ✓ Yes 🗆 No May the IRS discuss this return with the preparer shown above? (see instructions)

Cat No 11282Y

Form **990** (2017)

For Paperwork Reduction Act Notice, see the separate instructions.

| Form                                      | 990 (2017)  |  |   |   |   | Page <b>2</b>   |  |  |  |  |  |  |
|---|---|--|---|---|---|---|--|--|--|--|--|--|
| Par                                       | t IIII Statement  | of Program Service   | e Accomplis   | hments  |   |   |  |  |  |  |  |  |
|   | Check If Sche   | dule O contains a respo  | nse or note to a  | any line in this Part III   |   | 🗹   |  |  |  |  |  |  |
| 1   | Briefly describe the o  | organization's mission   |   |   |   |   |  |  |  |  |  |  |
| JOHN<br>FOR<br>HAS<br>NONI<br>PART<br>CON | NSON, AND ATTORNEY<br>EQUAL JUSTICE DURIN<br>BEEN AT THE FOREFRG<br>PROFIT ORGANIZATIO<br>TICULAR THE INEQUITI<br>TINUES TO MARSHAL 1 | GENERAL ROBERT F K<br>NG A TUMULTUOUS CIV<br>ONT OF EFFORTS TO AI<br>N WHOSE PRINCIPAL M<br>ES CONFRONTING AFR | ENNEDY CHALL IL RIGHTS ERA DVANCE CIVIL F IISSION IS TO S ICAN AMERICAI E PRIVATE BAR | ENGED 244 OF AMERIG<br>THE LAWYERS' COMM<br>RIGHTS EVER SINCE T<br>SECURE EQUAL JUSTIC<br>NS AND OTHER RACIAI<br>TO OBTAIN EQUAL JU | RESIDENT JOHN F KENNEDY,<br>CA'S PROMINENT ATTORNEYS<br>ITTEE WAS FOUNDED AT THI<br>ODAY, THE LAWYERS' COMMI'<br>E FOR ALL THROUGH THE RUI<br>AND ETHNIC MINORITIES T<br>STICE FOR MINORITIES BY AE | TO SPEARHEAD THE CAUSE<br>S CLOSED DOOR MEETING AND<br>ITEE IS A NONPARTISAN,<br>LE OF LAW, TARGETING IN<br>HE LAWYERS' COMMITTEE |  |  |  |  |  |  |
| 2   | Did the organization  | undertake any significa  | nt program ser  | vices during the year w   | hich were not listed on   |   |  |  |  |  |  |  |
|   | the prior Form 990 o  | r 990-EZ?  |   |   |   | Yes 🗹 No  |  |  |  |  |  |  |
|   | If "Yes," describe these new services on Schedule O   |  |   |   |   |   |  |  |  |  |  |  |
| 3   | Did the organization cease conducting, or make significant changes in how it conducts, any program                                    |  |   |   |   |   |  |  |  |  |  |  |
|   | services?   |  |   |   |   |   |  |  |  |  |  |  |
|   | If "Yes," describe these changes on Schedule O  |  |   |   |   |   |  |  |  |  |  |  |
| 4   | Section 501(c)(3) an  |  | ns are required   | to report the amount  | largest program services, as<br>of grants and allocations to ot   |   |  |  |  |  |  |  |
| 4a  | (Code   | ) (Expenses \$   | 1,448,145   | including grants of \$  | 275,750 ) (Revenue \$   | )   |  |  |  |  |  |  |
|   | See Additional Data   |  |   |   |   | ·   |  |  |  |  |  |  |
| 4b  | (Code   | ) (Expenses \$   | 1,382,720   | including grants of \$  | ) (Revenue \$   | )   |  |  |  |  |  |  |
|   | See Additional Data   |  |   |   |   |   |  |  |  |  |  |  |
| 4c  | (Code   | ) (Expenses \$   | 1,170,978   | including grants of \$  | ) (Revenue \$   | )   |  |  |  |  |  |  |
|   | See Additional Data   |  |   |   |   |   |  |  |  |  |  |  |
|   | See Additional Data   |  |   |   |   |   |  |  |  |  |  |  |
| 4d  | · -   | ces (Describe in Schedi  |   |   |   |   |  |  |  |  |  |  |
|   | (Expenses \$  |  | uding grants of   | •   | ) (Revenue \$   | 718,234 )   |  |  |  |  |  |  |
| 4e  | _Total program serv   | /ice expenses ►  | 5,963,6   | 50  |   |   |  |  |  |  |  |  |

or X as applicable

17

Part IV

**Checklist of Required Schedules** 

Page 3

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 | Yes |    |
|---|--|---|-----|----|
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{*}$   | 2 | Yes |    |
| 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 |     | No |
| 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 | Yes |    |
| 5 | Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues,   |   |     |    |

Did the organization receive or hold a conservation easement, including easements to preserve open space,

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

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

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

**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

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . .

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🥞 .

Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 💆 . . . . . . . . .

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . .

5 No No 7 No

Yes

Yes

Yes

Yes

Yes

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Nο

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| Form 990 (2017)  |      |     |    |  |  |  |  |
|--|------|-----|----|--|--|--|--|
| Part IV Checklist of Required Schedules (continued)  |      |     |    |  |  |  |  |
|  |      | Yes | No |  |  |  |  |
| <b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule $H$           | 20a  |     | No |  |  |  |  |
| <b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this reti | urn? |     |    |  |  |  |  |

| • | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H   | 20a |     |
|---|---|-----|-----|
|   | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  | 20b |     |
|   | 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  | Yes |

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

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,"

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

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

organization? If "Yes," complete Schedule R, Part V, line 2

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . .

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

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24a

24b

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24d

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Yes

Form 990 (2017)

Yes

Νo

No

Nο

Νo

Nο

| orm | 990 (2017)  |            |          | Page !   |
|-----|---|------------|----------|----------|
| Par | t V Statements Regarding Other IRS Filings and Tax Compliance   |            |          |          |
|     | Check if Schedule O contains a response or note to any line in this Part V  |            | <u> </u> |          |
| _   |   |            | Yes      | No       |
|     | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 72  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0  |            |          |          |
|     |   | 4          |          |          |
|     | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  | <b>1</b> c | Yes      |          |
|     | 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   | 3          |          |          |
| b   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  | 2b         | Yes      |          |
| 2-  | <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a         |          | No       |
|     | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O   | 3b         |          | NO       |
|     | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a   | 30         |          |          |
| -u  | financial account in a foreign country (such as a bank account, securities account, or other financial account)?  | 4a         |          | No       |
| b   | If "Yes," enter the name of the foreign country  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         |          | No       |
|     | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  | 5b         |          | No       |
|     | If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  | 30         |          |          |
| ·   | If res, to line 3a of 3b, did the organization file Form 8880-17  | 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         |          | No       |
| 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 service provided to the payor?  | 7a         | Yes      |          |
| b   | If "Yes," did the organization notify the donor of the value of the goods or services provided?   | 7b         | Yes      |          |
| С   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  | 7c         |          | No       |
| 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         |          | N.       |
| £   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  | 7e 7f      |          | No<br>No |
|     | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as  | <b>-</b>   |          | 110      |
| y   | required?   | 7g         |          |          |
| h   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form  |            |          |          |
|     | 1098-C?   | 7h         |          |          |
| 8   | <b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?                  |            |          |          |
| _   |   | 8          | <u> </u> | -        |
|     | Did the sponsoring organization make any taxable distributions under section 4966?  | 9a         |          |          |
|     | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?   | 9b         |          |          |
|     | Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12  |            |          |          |
|     | Gross receipts, included on Form 990, Part VIII, line 12  | 1          |          |          |
|     | Section 501(c)(12) organizations. Enter   |            |          |          |
|     | Gross income from members or shareholders   |            |          |          |
|     | Gross income from other sources (Do not net amounts due or paid to other sources  | 1          |          |          |
| -   | against amounts due or received from them )   |            |          |          |
| .2a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  | 12a        |          |          |
|     | If "Yes," enter the amount of tax-exempt interest received or accrued during the year   |            |          |          |
|     | 12b   |            |          |          |
| .3  | Section 501(c)(29) qualified nonprofit health insurance issuers.  |            |          |          |
|     | Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O                    | 13a        |          |          |
| 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   |            |          |          |
| C   | Enter the amount of reserves on hand  |            |          |          |
|     | Did the organization receive any payments for indoor tanning services during the tax year?  | 14a        | ı        | No       |
| .4a | but the digalization receive any payments for indoor talking services during the tax year.  | 174        |          | 110      |

|     | Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions  | " respc    | nse to li                | nes C              |
|-----|--|------------|--------------------------|--------------------|
|     | Check if Schedule O contains a response or note to any line in this Part VI  |            |                          | <b>✓</b>           |
| Se  | ction A. Governing Body and Management   |            |                          |                    |
| 1a  | Enter the number of voting members of the governing body at the end of the tax year   1a   17  |            | Yes                      | No                 |
|     | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O   |            |                          |                    |
| b   | Enter the number of voting members included in line 1a, above, who are independent  1b 17  |            |                          |                    |
| 2   | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?  | 2          |                          | No                 |
| 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          |                          | No                 |
| 4   | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?   | 4          |                          | No                 |
| 5   | Did the organization become aware during the year of a significant diversion of the organization's assets?   | 5          |                          | No                 |
| 6   | Did the organization have members or stockholders?   | 6          |                          | No                 |
| 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         | Yes                      |                    |
| b   | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  | <b>7</b> b |                          | No                 |
| 8   | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following   |            |                          |                    |
| а   | The governing body?  | 8a         | Yes                      |                    |
| b   | Each committee with authority to act on behalf of the governing body?  | 8b         | Yes                      |                    |
| 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? <i>If "Yes," provide the names and addresses in Schedule O</i>  | 9          |                          | No                 |
| Se  | ction B. Policies (This Section B requests information about policies not required by the Internal Revenu  | e Code     |                          |                    |
|     |  |            | Yes                      | No                 |
|     | Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10a<br>10b |                          | No                 |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  | 11a        | Yes                      |                    |
| h   | Describe in Schedule O the process, if any, used by the organization to review this Form 990   | 114        | 163                      |                    |
|     | Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>  | 12a        | Yes                      |                    |
|     | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  | 12b        | Yes                      |                    |
| c   | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done   | 12c        | Yes                      |                    |
| 13  | Did the organization have a written whistleblower policy?  | 13         | Yes                      |                    |
| 14  | Did the organization have a written document retention and destruction policy?   | 14         | Yes                      |                    |
| 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?   |            |                          |                    |
| а   | The organization's CEO, Executive Director, or top management official   | 15a        | Yes                      |                    |
| b   | Other officers or key employees of the organization  | 15b        |                          | No                 |
|     | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)   |            |                          |                    |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  | 16a        |                          | No                 |
| b   | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?   | 16b        |                          |                    |
| Se  | ction C. Disclosure  |            |                          |                    |
| 17  | List the States with which a copy of this Form 990 is required to be filed AK , AL , AR , AZ , CA , CO , CT , FL , GA , , MD , ME , MI , MN , MS , NC , NJ , NM , N  | NY, OH     | . , KS , k<br>I , OK , 0 | (Y , MA<br>OR , PA |
| 18  | RI , SC , TN , UT , VA , WA , WI , WV , D Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available.  | <u> </u>   |                          |                    |
|     | ✓ 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 interest  |            |                          |                    |
| 20  | policy, and financial statements available to the public during the tax year  State the name, address, and telephone number of the person who possesses the organization's books and records  NAMELA LOVELACE C/O LCCRUL 1500 K STREET NW WASHINGTON, DC 20005 (202) 662-8600                  |            |                          |                    |

| orm 990 (2                   | 017)   |  |                                   |                       |                       |                                 |                              |             |  |  | Page <b>7</b>  |
|------------------------------|--|--|-----------------------------------|-----------------------|-----------------------|---------------------------------|------------------------------|-------------|--|--|--|
| Part VII                     | Compensation of Officer and Independent Contra   |  | Truste                            | es,                   | Key                   | En                              | ıploy                        | ees         | , Highest Comp   | ensated Employ   | rees,  |
|                              | Check if Schedule O contains a   | response or no   | te to an                          | y line                | ın t                  | his                             | Part V                       | Ι.          |  |  | <u> </u>   |
| Section                      | A. Officers, Directors, Tru  | stees, Key E   | mploy                             | ees                   | , an                  | d H                             | lighe                        | st C        | Compensated En   | nployees   |  |
| ear                          | e this table for all persons require   |  |                                   |                       |                       |                                 |                              |             |  |  | -  |
| of compensa                  | of the organization's <b>current</b> off<br>tion Enter -0- in columns (D), (                               | E), and (F) if no                                      | compe                             | nsatı                 | on v                  | vas į                           | paid                         |             |  | -  |  |
|                              | of the organization's <b>current</b> key   |  | •                                 |                       |                       |                                 |                              |             |  |  |  |
| vho received<br>organization | organization's five <b>current</b> high<br>d reportable compensation (Box<br>and any related organizations | 5 of Form W-2  | and/or E                          | Зох 7                 | of F                  | orm                             | 1099                         | -MIS        | SC) of more than \$1   | 00,000 from the  |  |
| of reportable                | of the organization's <b>former</b> office<br>compensation from the organiz                                | ation and any r  | elated o                          | rganı                 | zatı                  | ons                             | -                            |             |  |  |  |
| List all operation           | of the organization's <b>former dire</b><br>, more than \$10,000 of reportab                               | ectors or trust<br>le compensation                     | <b>ees</b> that<br>n from t       | t rece<br>the or      | gan                   | l, ın<br>ızatı                  | the ca                       | paci<br>any | ty as a former direc<br>v related organization                     | tor or trustee of the<br>ons                                       | 9  |
|                              | in the following order individua<br>d employees, and former such p   |  | ectors, i                         | ınstıtı               | utior                 | nal t                           | rustee                       | s, of       | ficers, key employe  | es, highest  |  |
| ☐ Check t                    | his box if neither the organizatio   | n nor any relate                                       | ed orgar                          | nizatio               | on c                  | omp                             | ensate                       | d ar        | ny current officer, di   | rector, or trustee   |  |
|                              | <b>(A)</b><br>Name and Title   | (B) Average hours per week (list any hours for related |                                   | ne b                  | ox, ι<br>n of<br>or/t | t che<br>unles<br>ficer<br>rust | s pers<br>and a<br>ee)       | on          | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099- | (F) Estimated amount of other compensation from the organization and |
|                              |  | organizations<br>below dotted<br>line)                 | Individual trustee<br>or director | Institutional Trustee | Officer               | key employee                    | Highest compensated employee | Former      |  | MISC)  | related<br>organizations   |
| See Additiona                | al Data Table  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |
|                              |  |  |                                   |                       |                       |                                 |                              |             |  |  |  |

(B) (D) (F) (A) (C) (E) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from related from the compensation any hours director/trustee) organization (Worganizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Individual trustee or director Highest compensated employee related organizations Institutional Trustee below dotted organizations employee line) See Additional Data Table  $\blacktriangleright$ c Total from continuation sheets to Part VII, Section A . ▶ 1.583,481 152,844 d Total (add lines 1b and 1c) . 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 15 Yes No 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual. 3 Nο For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such ındıvıdual . 4 Yes Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for 5 services rendered to the organization? If "Yes," complete Schedule I for such person . . . 5 Nο Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (B) (C) (A) Description of services Name and business address Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Form 990 (2017)

compensation from the organization ▶ 0

| Part  |            | I Statement of  | Revenue                     |              |                     |            |              |   |               |   | rage <b>3</b>                                |
|---|------------|---|-----------------------------|--------------|---------------------|------------|--------------|---|---------------|---|--|
|   |            |   |                             | a respo      | onse or note to any | line in th | ns Part VIII |   |               |   | 🗆  |
|   |            |   |                             | ·            |                     | (/         | A)<br>evenue | ( <b>B</b> )<br>Related<br>exemp<br>functio | or<br>ot<br>n | (C)<br>Unrelated<br>business<br>revenue | (D) Revenue excluded from tax under sections |
|   | <b>1</b> a | Federated campaig   | ns                          | 1a           | 1,284               |            |              | revenu                                      | e             |   | 512-514                                      |
| nts<br>nts  |            | <b>b</b> Membership dues  |                             | 1b           | <u> </u>            |            |              |   |               |   |  |
| irai<br>10 u  |            | c Fundraising events  |                             | 1c           | 1,831,865           |            |              |   |               |   |  |
| s, G<br>An  |            | d Related organizatio   |                             | 1d           | 1,031,003           |            |              |   |               |   |  |
| iii.<br>Iar   |            | e Government grants (co   |                             |              |                     |            |              |   |               |   |  |
| S, (imi   |            | F All other contributions,                                      |                             | 1e           |                     |            |              |   |               |   |  |
| ion<br>r S  | 1          | and similar amounts n<br>above                                  |                             | 1f           | 6,932,800           |            |              |   |               |   |  |
| Contributions, Gifts, Grants<br>and Other Similar Amounts | ١,         | Noncash contribution  | ons included                |              |                     |            |              |   |               |   |  |
| 들   | -          | in lines 1a-1f \$   | ons included                |              |                     |            |              |   |               |   |  |
| Cont<br>and   | h          | Total.Add lines 1a-1  | .f                          |              | •                   | 8,         | 765,949      |   |               |   |  |
| <u>+</u>  |            |   |                             |              | Business            | Code       |              |   |               |   |  |
| พะพ   | <b>2</b> a | COURT AWARDED LEGA  | L FEES                      |              |                     | 900099     | 6!           | 55,996                                      | 655,99        | 6                                       |  |
| Service Revenue   | ь          |   |                             | _            |                     |            |              |   |               |   |  |
| MCe   | c          |   |                             |              |                     |            |              |   |               |   |  |
| Ser   | d          |   |                             | _            |                     |            |              |   |               |   |  |
| an  | е          |   |                             |              |                     |            |              |   |               |   | +  |
| Program   | f          | All other program se  | rvice revenue               | !            |                     | 555,996    |              |   |               |   |  |
| 4   | g          | Total.Add lines 2a-2f   | f                           | •            | <u> </u>            |            |              |   |               |   |  |
|   |            | Investment income (ii<br>similar amounts) .                     |                             |              | nterest, and other  | .          | 104,929      |   |               |   | 104,929                                      |
|   |            | Income from investme  |                             |              | •                   | $\vdash$   |              |   |               |   |  |
|   |            | Royalties   |                             |              |                     | •          |              |   |               |   |  |
|   |            |   | (ı) Rea                     | I            | (II) Personal       |            |              |   |               |   |  |
|   | 6a         | Gross rents   |                             |              |                     |            |              |   |               |   |  |
|   | ь          | Less rental expenses  |                             |              |                     | 1          |              |   |               |   |  |
|   |            |   |                             |              |                     |            |              |   |               |   |  |
|   | C          | Rental income or (loss)   |                             |              |                     |            |              |   |               |   |  |
|   | d          | Net rental income o   | r (loss)                    |              |                     | 1          |              |   |               |   |  |
|   |            |   | (ı) Securit                 | ties         | (II) Other          |            |              |   |               |   |  |
|   | 7a         | Gross amount<br>from sales of<br>assets other<br>than inventory | 1,2                         | 256,890      |                     |            |              |   |               |   |  |
|   | Ь          | Less cost or<br>other basis and<br>sales expenses               | 1,1                         | .67,631      |                     |            |              |   |               |   |  |
|   | c          | Gain or (loss)  |                             | 89,259       |                     | ]          |              |   |               |   |  |
|   |            | Net gain or (loss) .  |                             | •            | <u> </u>            |            | 89,259       |   |               |   | 89,259                                       |
| Other Revenue   | 8a         | Gross income from form form formal (not including \$            | 1,831,865<br>ed on line 1c) | of           | 138,570             |            |              |   |               |   |  |
| ev.   | b          | Less direct expense   |                             | b            | 318,083             | _          |              |   |               |   |  |
| er F  |            | : Net income or (loss)  |                             | ا<br>sing ev | ents                | _          | -179,513     |   |               |   | -179,513                                     |
| Cth   | 9a         | Gross income from g   |                             | ies          |                     |            |              |   |               |   |  |
| •   |            | See Part IV, line 19  |                             | a            |                     |            |              |   |               |   |  |
|   | b          | Less direct expense   | s                           | b            |                     | 1          |              |   |               |   |  |
|   | c          | : Net income or (loss)  | from gaming                 | actıvıt      | ies                 | _          |              |   |               |   |  |
|   | 10a        | Gross sales of invent<br>returns and allowand                   | cory, less                  | a            |                     |            |              |   |               |   |  |
|   | b          | Less cost of goods s  | sold                        | b            |                     | 1          |              |   |               |   |  |
|   | c          | : Net income or (loss)  | from sales of               | ا<br>invent  | ory ►               | _          |              |   |               |   |  |
|   |            | Miscellaneous   | Revenue                     |              | Business Code       |            |              |   |               |   |  |
|   | 11         | aCONTRACT & SERVI   | CE REVENUE                  |              | 90009               | 9          | 62,238       |   | 62,238        |   |  |
|   |            |   |                             |              |                     |            |              |   |               |   |  |
|   | b          | OTHER REVENUE   |                             |              | 90009               | 9          | 35,022       | !   |               |   | 35,022                                       |
|   |            |   |                             |              |                     |            |              |   |               |   |  |
|   | c          | :   |                             |              |                     |            |              |   |               |   |  |
|   |            |   |                             |              |                     |            |              |   |               |   |  |
|   | d          | All other revenue .   |                             |              |                     |            |              |   |               |   |  |
|   | е          | <b>Total.</b> Add lines 11a                                     | -11d                        |              | •                   | L          | 97,260       |   |               |   |  |
|   | 12         | <b>Total revenue.</b> See                                       | Instructions                |              |                     |            | 9,533,880    |   | 718,234       |   | 0 49,697                                     |
|   |            |   |                             |              |                     |            | 5,555,000    | 1   | 0,20 1        |   | 0 49,697<br>Form <b>990</b> (2017)           |

| For | m 990 (2017)   |                        |  |   | Page <b>10</b>                    |
|-----|--|------------------------|--|---|-----------------------------------|
|     | art IX Statement of Functional Expenses  |                        |  |   |                                   |
| Sec | tion 501(c)(3) and 501(c)(4) organizations must complete all c   | -                      | ·  | , ,                                       | _                                 |
|     | Check if Schedule O contains a response or note to an  | y line in this Part IX |  |   | <u> ⊔</u>                         |
|     | o not include amounts reported on lines 6b,<br>, 8b, 9b, and 10b of Part VIII.   | (A)<br>Total expenses  | ( <b>B)</b><br>Program service<br>expenses | (C)<br>Management and<br>general expenses | <b>(D)</b><br>Fundraisingexpenses |
| 1   | I Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21  | 245,750                | 245,750                                    |   |                                   |
| 2   | 2 Grants and other assistance to domestic individuals See Part IV, line 22   | 30,000                 | 30,000                                     |   |                                   |
| 3   | 3 Grants and other assistance to foreign organizations, foreign<br>governments, and foreign individuals See Part IV, line 15<br>and 16   |                        |  |   |                                   |
| 4   | Benefits paid to or for members  |                        |  |   |                                   |
| 5   | Compensation of current officers, directors, trustees, and key employees   | 940,367                | 759,652                                    | 87,501                                    | 93,214                            |
| 6   | 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   | 7 Other salaries and wages   | 3,575,501              | 2,877,780                                  | 344,730                                   | 352,991                           |
| 8   | Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)  |                        |  |   |                                   |
| 9   | Other employee benefits  | 325,292                | 275,092                                    | 16,294                                    | 33,906                            |
| 10  | Payroll taxes  | 309,490                | 261,728                                    | 15,503                                    | 32,259                            |
| 11  | Fees for services (non-employees)  |                        |  |   |                                   |
|     | a Management   |                        |  |   |                                   |
|     | <b>b</b> Legal   |                        |  |   |                                   |
|     | c Accounting   |                        |  |   |                                   |
|     | <b>d</b> Lobbying  |                        |  |   |                                   |
|     | e Professional fundraising services See Part IV, line 17   |                        |  |   |                                   |
|     | f Investment management fees   | 37,896                 |  | 37,896                                    |                                   |
|     | <b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)  | 264,717                | 188,953                                    | 13,770                                    | 61,994                            |
| 12  | Advertising and promotion  | 35,140                 | 30,225                                     | 1,539                                     | 3,376                             |
| 13  | Office expenses  | 230,053                | 146,536                                    | 42,695                                    | 40,822                            |
| 14  | Information technology   |                        |  |   |                                   |
| 15  | Royalties  |                        |  |   |                                   |
| 16  | Occupancy  | 566,263                | 509,617                                    | 29,635                                    | 27,011                            |
| 17  | ' Travel   | 190,452                | 179,058                                    | 2,665                                     | 8,729                             |
| 18  | Payments of travel or entertainment expenses for any federal, state, or local public officials   |                        |  |   |                                   |
| 19  | Conferences, conventions, and meetings   |                        |  |   |                                   |
| 20  | Interest   | 80,543                 | 73,228                                     | 4,004                                     | 3,311                             |
| 21  | Payments to affiliates   |                        |  |   |                                   |
| 22  | Depreciation, depletion, and amortization  | 82,964                 | 74,665                                     | 4,342                                     | 3,957                             |
| 23  | Insurance  | 43,070                 | 39,159                                     | 2,141                                     | 1,770                             |
| 24  | Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) |                        |  |   |                                   |
|     | a RESEARCH   | 257,464                | 251,325                                    | 3,054                                     | 3,085                             |
|     | b COURT COSTS & OTHER FEE  | 18,578                 | 16,373                                     | 2,205                                     |                                   |
|     | c TEMPORARY HELP   | 8,368                  | 4,509                                      | 3,636                                     | 223                               |

7,241,908

5,963,650

611,610

666,648

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d

e All other expenses

**25 Total functional expenses.** Add lines 1 through 24e

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  $\blacktriangleright$   $\square$  if following SOP 98-2 (ASC 958-720)

11

12

13

14

15

16

17

18

19

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21

23

24

25

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Investments—program-related See Part IV, line 11 .

Other assets See Part IV, line 11 . . . . .

Tax-exempt bond liabilities . . . . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 . .

Total liabilities and net assets/fund balances .

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here 

and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

basis Complete Part VI of Schedule D

Intangible assets . . . . .

Accounts payable and accrued expenses

b Less accumulated depreciation

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

1,498,333

1.405.937

155.552

3.697.624

12,190,176

917.016

129.612

2.406.341

572,584

4,025,553

-2.026.027

8.040.141

2.150.509

8,164,623

12,190,176

٥ 19

10c

11 12

13

14

15

16

17

18

20

21

22

23

24

25

26

27

28

29

30

31 32

33

34

Page **11** 

92,396

500

13.395.553

430,964

115,000

129.612

1.909.758

184.876

2,770,210

761.932

7,712,902

2.150.509

10,625,343

13.395.553

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4.072.180

|   |  | <b>(A)</b><br>Beginning of year |   | <b>(B)</b><br>End of year |
|---|--|---------------------------------|---|---------------------------|
| 1 | Cash-non-interest-bearing              |                                 | 1 |                           |
| 2 | Savings and temporary cash investments | 3,562,980                       | 2 | 6.092.                    |

| 2 | Savings and temporary cash investments                                   | 3,562,980 | 2 | 6,092,196 |
|---|--|-----------|---|-----------|
| 3 | Pledges and grants receivable, net                                       | 4,594,369 | 3 | 2,732,476 |
| 4 | Accounts receivable, net   | 8         | 4 | 225,721   |
| 5 | Loans and other receivables from current and former officers, directors, |           |   |           |

721 trustees, key employees, and highest compensated employees. Complete Part 5 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) 6

voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets Notes and loans receivable, net . . Inventories for sale or use . 8 179.643 9 180.084 Prepaid expenses and deferred charges .

10a

10b

separate basis, consolidated basis, or both

☐ Both consolidated and separate basis

Yes

Yes

3b

No

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b Were the organization's financial statements audited by an independent accountant? 2b If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

consolidated basis, or both ✓ Separate basis Consolidated basis ☐ Both consolidated and separate basis

Consolidated basis

☐ Separate basis

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight

of 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 Schedule O

Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

3a

## Additional Data

Software ID:

Software Version:

**EIN:** 52-0799246

Name: LAWYERS' COMMITTEE FOR CIVIL RIGHTS

UNDER LAW

Form 990 (2017)

Form 990, Part III, Line 4a:

TO A TEMPORARY SHUTDOWN OF THE NATION'S LARGEST AND OLDEST WHITE SUPREMACIST WEBSITE

STOP HATE PROJECT-WITH THE INCREASE IN HATE CRIMES AFFECTING COMMUNITIES ACROSS THE COUNTRY. THE STOP HATE PROJECT HAS EMERGED AS A CRITICAL

VOICE IN THE FIGHT TO END HATE WITH A COMMUNITY-CENTERED APPROACH, THE SHP PROVIDES RESOURCES TO SUPPORT LOCAL ORGANIZATIONS AND LEADERS

COMBATING HATE ACROSS THE COUNTRY IN 2017, THE SHP LAUNCHED A PARTNERSHIP WITH THE INTERNATIONAL ASSOCIATION OF CHIEFS OF POLICE (IACP) TO INCREASE THE DIALOGUE BETWEEN LAW ENFORCEMENT AND COMMUNITIES MOST AFFECTED BY HATE CRIMES. THE SHP ALSO TOOK ON HATE SPEECH ONLINE LEADING

VOTING RIGHTS PROJECT- THE LAWYERS' COMMITTEE IS AT THE FOREFRONT OF EFFORTS TO ENSURE EVERY AMERICAN IS PROVIDED EQUAL ACCESS TO THE BALLOT BOX AND IN FIGHTING AGAINST THE ADMINISTRATION'S ATTACK ON VOTING RIGHTS THE VOTING RIGHTS PROJECT (VRP) LED THE CHARGE IN LITIGATING AGAINST THE PRESIDENTIAL ADVISORY COMMISSION ON ELECTION INTEGRITY, WHICH WAS LAUNCHED TO SUPPORT UNFOUNDED CLAIMS OF VOTER FRAUD IN THE 2016

Form 990, Part III, Line 4b:

OVERCOME THE DECEPTIVE TACTICS

PRESIDENTIAL ELECTION THE VRP SUCCESSFULLY LITIGATED TO EXTEND THE REGISTRATION DEADLINE FOR GEORGIA VOTERS IN THE STATE'S SPECIAL CONGRESSIONAL RUNOFF IN JUNE IN ADDITION, THE VRP CHALLENGED THE DISCRIMINATORY METHOD OF ELECTING JUDGES IN STATES WHERE IMPORTANT

DECISIONS AFFECT MINORITY COMMUNITIES, INCLUDING IN TEXAS AND ALABAMA USING A DIVERSITY OF TOOLS, THE VOTING RIGHTS PROJECT LED A NATIONAL

EFFORT TO COMBAT AN ALARMING VOTER PURGE CAMPAIGN WAGED BY A CONSERVATIVE GROUP THAT SEEKS TO DENY THE VOTING RIGHTS OF RACIAL MINORITIES

WORKING WITH OTHER NATIONAL ORGANIZATIONS, THE VRP IS PROVIDING GUIDANCE TO HUNDREDS OF STATE AND COUNTY ELECTION OFFICIALS ON HOW TO

## Form 990, Part III, Line 4c: PUBLIC EDUCATION AND GENERAL LEGAL -GENERAL LEGAL OVERSEES THE LEGAL WORK OF THE LAWYERS' COMMITTEE, INCLUDING ATTORNEYS, COURT CASES, AND PRO BONO ACTIVITIES. THE LAWYERS' COMMITTEE ALSO LEVERAGES PUBLIC EDUCATION AND NATIONAL VISIBILITY TO EDUCATE AND INFORM THE PUBLIC AND POLICY.

MAKERS ABOUT OUR CRITICAL WORK AND RELEVANT CIVIL RIGHTS ISSUES

### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code 562,333 including grants of \$ ) (Revenue \$ ) (Expenses \$ EDUCATIONAL OPPORTUNITIES PROJECT -THE EDUCATIONAL OPPORTUNITIES PROJECT (EOP) STRIVES TO ENSURE THAT MINORITY AND LOW-INCOME STUDENTS HAVE EQUAL ACCESS TO QUALITY EDUCATION AFTER NEARLY A DECADE OF LITIGATION, IN NOVEMBER, THE EOP SECURED AN HISTORIC REMEDY IN FAVOR OF MARYLAND'S FOUR HISTORICALLY BLACK COLLEGES AND UNIVERSITIES (HBCUS) THE MOST IMPORTANT DECISION FOR A DESEGREGATION CASE IN THE PAST 20 YEARS, THE REMEDY REQUIRES MARYLAND TO ELIMINATE THE VESTIGES OF DISCRIMINATION FROM ITS HIGHER EDUCATION SYSTEM AND PUTS THE STATE ON A LONG OVERDUE PATH TOWARD EDUCATIONAL EQUALITY FOR ALL STUDENTS THE EOP IS ALSO INVOLVED IN TWO CLOSELY WATCHED CASES CHALLENGING AFFIRMATIVE ACTION IN HIGHER EDUCATION THE EOP IS REPRESENTING STUDENT INTERVENERS IN DEFENSE OF THE UNIVERSITY OF NORTH CAROLINA'S AFFIRMATIVE ACTION POLICY AND HARVARD UNIVERSITY'S AFFIRMATIVE ADMISSIONS POLICY ADDITIONALLY, THE EOP LAUNCHED THE "LET US LEARN SCHOOLS FOR EVERY CHILD" INITIATIVE TO ENSURE THAT ALL CHILDREN--REGARDLESS OF THEIR IMMIGRATION STATUS CAN ENROLL IN SCHOOL FINALLY, THE PARENTAL READINESS AND EMPOWERMENT PROGRAM (PREP) LAUNCHED A BULLYING PREVENTION MONTH OF ACTION, WITH THE STOP HATE PROJECT, AND ASSISTED PARENTS OF CHILDREN WHO EXPERIENCED BULLYING OR HATE INCIDENTS AT THEIR SCHOOLS (Code ) (Expenses \$ 208,127 including grants of \$ ) (Revenue \$ ECONOMIC JUSTICE PROJECT-THE ECONOMIC JUSTICE PROJECT (EJP) SEEKS TO ADDRESS PERSISTENT INEQUALITY AND HIGH POVERTY RATES FACED BY AFRICAN AMERICAN AND OTHER MINORITY COMMUNITIES THE EJP REACHED A MAJOR VICTORY IN 2017 BY WORKING WITH THE POPULAR ONLINE JOB SITE GLASSDOOR TO EXPLICITLY PROHIBIT JOB ADVERTISEMENTS THAT UNLAWFULLY DISCRIMINATE AGAINST PEOPLE WITH CRIMINAL BACKGROUNDS IN ADDITION. IT WORKED TO SHINE A LIGHT ON THE OFFICE OF MANAGEMENT AND BUDGET'S (OMB) ABRUPT DECISION TO SUSPEND THE COLLECTION OF PAY DATA INFORMATION, WHICH LIMITS THE ABILITY TO IDENTIFY AND ELIMINATE PAY DISCRIMINATION THE EJP ALSO ENGAGED IN EXTENSIVE APPELLATE ADVOCACY ON BEHALF OF COMMUNITIES OF COLOR THROUGH SEVERAL

AMICUS BRIEFS FILED IN FEDERAL COURT

## Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code ) (Expenses \$ 447,904 including grants of \$ ) (Revenue \$ PUBLIC POLICY, PRO BONO AND LEGAL MOBILIZATION -BUILDING ON THE SUCCESS OF IMPLEMENTING LARGE-SCALE PRO BONO PROJECTS, THE LEGAL MOBILIZATION PROJECT (LMP) WAS ESTABLISHED IN 2009 TO DEVELOP A COMPREHENSIVE, MULTI-DIMENSIONAL APPROACH TO TACKLE TODAY'S CIVIL RIGHTS ISSUES ENGAGING THE PRO BONO SERVICES OF THE PRIVATE BAR REMAINS AT THE CORE OF THE LAWYERS' COMMITTEE'S PIVOTAL WORK, ESPECIALLY LITIGATION OF CLASS ACTION MATTERS IN 2017, PRO BONO HOURS FROM TOP ATTORNEYS AND LAW FIRMS TOTALED OVER 50,500, REPRESENTING OVER \$33,110,520 ) (Expenses \$ 603,598 including grants of \$ (Code ) (Revenue \$ 718,234 ) FAIR HOUSING AND COMMUNITY DEVELOPMENT PROJECT -THE FAIR HOUSING AND COMMUNITY DEVELOPMENT PROJECT (FHCDP) FIGHTS

HOUSING DISCRIMINATION BY WORKING TO ENFORCE THE FEDERAL FAIR HOUSING ACT (FHA) AND PROMOTE GREATER OPPORTUNITY FOR LOW-INCOME PEOPLE OF COLOR IT OBTAINED A FAVORABLE DECISION ON A DISPARATE IMPACT CLAIM CHALLENGING THE EXCLUSIONARY PRACTICES OF THE VILLAGE OF GARDEN CITY IN NEW YORK, IN WHICH THE PROJECT ALLEGED THE VILLAGE'S ZONING DECISION HAD AN UNJUSTIFIED DISPARATE IMPACT ON AFRICAN AMERICAN AND LATINOS IN VIOLATION OF THE FHA IN ADDITION. IT FILED A SUIT AGAINST

THE U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT FOR ITS UNLAWFUL DECISION TO SUSPEND THE IMPLEMENTATION OF ITS SMALL AREA FAIR MARKET RENT RULE, WHICH WOULD OPEN ACCESS TO HIGH OPPORTUNITY AREAS FOR PEOPLE WITH HOUSING CHOICE VOUCHERS THE FHCDP ALSO WORKS CLOSELY WITH COMMUNITIES TO PREPARE THEIR ASSESSMENTS OF FAIR HOUSING

#### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code including grants of \$ (Revenue \$ (Expenses \$ 139.845 CRIMINAL JUSTICE PROJECT-THE CRIMINAL JUSTICE PROJECT (CJP) SEEKS TO END MASS INCARCERATION AND MAKE THE IDEAL OF "EQUAL

JUSTICE UNDER LAW" A REALITY, PARTICULARLY FOR MARGINALIZED COMMUNITIES THAT ARE DISPROPORTIONATELY MINORITY AND POOR IN 2017. THE CJP WON A MAJOR LAWSUIT IN LOUISIANA CHALLENGING THE DEBTORS' PRISON SCHEME RUN BY THE ORLEANS PARISH CRIMINAL DISTRICT COURT IN ARKANSAS, IT REACHED A MAJOR SETTLEMENT WITH THE SHERWOOD DISTRICT COURT, EFFECTIVELY ENDING THE

INDIGENT ADULTS IN LOUISIANA FACING NON-CAPITAL CRIMINAL CHARGES PUNISHABLE BY IMPRISONMENT

AGAINST LOUISIANA OFFICIALS WHO OVERSEE THE STATE'S INDIGENT DEFENSE SERVICES THE SUIT SEEKS TO PROVIDE RELIEF TO ALL

JAILING OF POOR INDIVIDUALS WHO CANNOT AFFORD TO PAY FINES AND FEES THE CJP ALSO BEGAN LITIGATING A CLASS-ACTION LAWSUIT

and Independent Contractors (A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

|   | week (list<br>any hours                               | ek (list person is both an officer from the organization |                       |         |              | organization                 | from related<br>organizations | compensation<br>from the |                      |  |
|---|---|--|-----------------------|---------|--------------|------------------------------|-------------------------------|--------------------------|----------------------|--|
|   | for related<br>organizations<br>below dotted<br>line) | Individual trustee<br>or director                        | Institutional Trustee | Officer | key employee | Highest compensated employee | Former                        | (W- 2/1099-<br>MISC)     | (W- 2/1099-<br>MISC) | organization and<br>related<br>organizations |
| JAMES P JOSEPH<br>CO-CHAIR                                      | 3 00  | х  |                       | ×       |              |                              |                               | 0                        | 0                    | 0  |
| TERESA W ROSEBOROUGH CO-CHAIR                                   | 3 00  | х  |                       | х       |              |                              |                               | 0                        | 0                    | 0  |
| ADAM KLEIN VICE CHAIR   | 3 00  | ×  |                       | x       |              |                              |                               | 0                        | 0                    | 0  |
| DAVID SMITH  TREASURER (BEG 12/17), AUDIT COMMITTEE CHAIR (THRU | 3 00  | х  |                       | х       |              |                              |                               | 0                        | 0                    | 0  |
| ANDREW W KENTZ<br>TREASURER (THRU 11/17)                        | 3 00  | х  |                       | ×       |              |                              |                               | 0                        | 0                    | 0  |
| ELEANOR H SMITH SECRETARY                                       | 3 00  | x  |                       | х       |              |                              |                               | 0                        | 0                    | 0  |
| NICHOLAS T CHRISTAKOS<br>GENERAL COUNSEL                        | 3 00  | х  |                       | х       |              |                              |                               | 0                        | 0                    | 0  |

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DONALD J ROSENBERG

BETTINA B PLEVAN

SHIRA A SCHEINDLIN

DIRECTOR

DIRECTOR

DIRECTOR

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

|                            | any hours   |                                   |                       |     |              |                              |        | organization         | organizations        | from the                                     |  |
|----------------------------|---|-----------------------------------|-----------------------|-----|--------------|------------------------------|--------|----------------------|----------------------|--|--|
|                            | for related<br>organizations<br>below dotted<br>line) | Individual trustee<br>or director | Institutional Trustee | Ç€! | Key employee | Highest compensated employee | Former | (W- 2/1099-<br>MISC) | (Ŵ- 2/1099-<br>MISC) | organization and<br>related<br>organizations |  |
| DAVID L HARRIS<br>DIRECTOR | 1 00  | ×                                 |                       |     |              |                              |        | 0                    | 0                    | 0  |  |
| EDWARD SOTO DIRECTOR       | 1 00  | х                                 |                       |     |              |                              |        | 0                    | 0                    | 0  |  |
| JANE C SHERBURNE DIRECTOR  | 1 00  | х                                 |                       |     |              |                              |        | 0                    | 0                    | 0  |  |

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227,577

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19,879

6,872

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| DIRECTOR         |  |
|------------------|--|
| JANE C SHERBURNE |  |
| DIRECTOR         |  |
| LISA E CLEARY    |  |
| DIRECTOR         |  |

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MICHAEL D JONES

JOHN M NONNA

DIRECTOR

DIRECTOR

TOM SAGER

DIRECTOR

DIRECTOR

STANLEY BROWN

KRISTEN CLARKE

JON GREENBAUM

PRESIDENT & EEXCUTIVE DIRECTOR

CHIEF COUNSEL & SENIOR DEPUTY DIRECTOR

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

CO-DIRECTOR OF VOTING RIGHTS

CO-DIRECTOR OF VOTING RIGHTS

DIRECTOR OF PRO BONO AND ACTING FINANCE

DIRECTOR OF EDUCATIONAL OPPORTUNITIES

EZRA ROSENBERG

NANCY ANDERSON

DIRECTOR

BRENDA SHUM

|  |   |  |                       |     |   |                     |        |                      | 1111 - 14            | 1  |  |
|--|---|--|-----------------------|-----|---|---------------------|--------|----------------------|----------------------|--|--|
|  | for related<br>organizations<br>below dotted<br>line) |  | Institutional Trustee | 101 | ≌ | Highest compensated | Former | (W- 2/1099-<br>MISC) | (W- 2/1099-<br>MISC) | organization and<br>related<br>organizations |  |
| LISA BORNSTEIN VICE PRESIDENT, STRATEGY AND POLICY | 37 50   |  |                       |     | × |                     |        | 181,117              | 0                    | 21,349                                       |  |
| KAREN MILLER CHIEF DEVELOPMENT OFFICER             | 37 50   |  |                       |     | × |                     |        | 207,360              | 0                    | 14,202                                       |  |

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142,862

138,907

143,638

138,100

4,503

23,806

26,321

24,553

11,359

0

| VICE PRESIDENT, STRATEGY AND POLICY       |       |  |   |   |         |   |  |
|---|-------|--|---|---|---------|---|--|
| KAREN MILLER                              | 37 50 |  | × |   | 207,360 | 0 |  |
| CHIEF DEVELOPMENT OFFICER                 |       |  |   |   | ·       |   |  |
| DIANE GLAUBER                             | 37 50 |  |   | x | 147.901 | 0 |  |
| CO-DIRECTOR FAIR HOUSING/COMM DEVELOPMENT |       |  |   | ^ | 117,501 | 9 |  |
| MARCIA IOHNSON-BLANCO                     | 37 50 |  |   |   |         |   |  |

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| efil        | e GR                      | APHIC pri  | nt - DO NO                    | T PROCESS                            | As Filed Data -   |   |   | DLN: 93493319130698          |   |  |  |
|-------------|---------------------------|--|-------------------------------|--------------------------------------|---|---|---|------------------------------|---|--|--|
| SC          | H <b>ED</b><br>m 99       | ULE A  |                               | Public (                             | Charity Statu rganization is a sect 4947(a)(1) nonexe                               | ion 501(c)(3) o<br>empt charitable      | organization or<br>trust.                                     | ort                          | 2017  |  |  |
| •           |                           | f the Treasury   | ► Inf                         | ormation abou                        | it Schedule A (Form   | ictions is at                           | Open to Public<br>Inspection                                  |                              |   |  |  |
| Nam<br>LAWY | <b>e of th</b><br>ERS' CC | nue Service<br><b>he organiza</b><br>DMMITTEE FOR  |                               |                                      | <u>www.ns.g</u>   | <u> </u>                                |   | Employer identific           | <u> </u>  |  |  |
|             | R LAW                     | Posson   | ior Dublic                    | Charity State                        | us (All organization  | s must comple                           | to this part \ C  | 52-0799246                   |   |  |  |
|             |                           |  |                               |                                      | <b>us</b> (All organization<br>: it is  (For lines 1 thro                           |   |   | see mstructions.             |   |  |  |
| 1           |                           | A church, c  | onvention of                  | churches, or as                      | sociation of churches   | described in <b>sec</b> t               | tion 170(b)(1)  | (A)(i).                      |   |  |  |
| 2           |                           | •  |                               | •                                    | 1)(A)(ii). (Attach Sch  |   |   |                              |   |  |  |
| 3           |                           |  |                               |                                      | vice organization desc  | •                                       | • •   |                              |   |  |  |
| _           |                           | ·  | •                             | •                                    | ed in conjunction with  |   |   | •                            | ator the beenitalle                                   |  |  |
| 4           | Ш                         |  | esearch orga<br>and state _   | inization operati                    | ed in conjunction with  | a nospital descri                       | bed in <b>section</b> .                                       | 170(B)(1)(A)(III). E         | ter the nospital s                                    |  |  |
| 5           |                           | (b)(1)(A)  | ( <b>iv).</b> (Compl          | ete Part II )                        | t of a college or unive   |   |   |                              | ped in <b>section 170</b>                             |  |  |
| 6           |                           | A federal, s   | tate, or local                | government or                        | governmental unit de  | escribed in <b>sectio</b>               | on 170(b)(1)(A  | ۱)(v).                       |   |  |  |
| 7           | <b>✓</b>                  | section 17   | 0(b)(1)(A)                    | <b>(vi).</b> (Complete               | •   |   |   | init or from the genera      | al public described in                                |  |  |
| 8           |                           | A communi  | ty trust desc                 | ribed in <b>sectior</b>              | 170(b)(1)(A)(vi)  | (Complete Part I                        | I)  |                              |   |  |  |
| 9           |                           |  |                               |                                      | escribed in <b>170(b)(1)</b><br>ee instructions Enter                               |   |   |                              | ege or university or a                                |  |  |
| 10          |                           | An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) |                               |                                      |   |   |   |                              |   |  |  |
| 11          |                           | An organiza  | ition organiz                 | ed and operated                      | dexclusively to test fo   | r public safety S                       | ee section 509  | (a)(4).                      |   |  |  |
| 12          |                           | more public  | ly supported                  | l organizations (                    | d exclusively for the be<br>described in <b>section 5</b><br>the type of supporting | <b>i09(a)(1)</b> or <b>se</b> d         | ction 509(a)(2  | ). See <b>section 509(</b> a |   |  |  |
| a           |                           | <b>Type I.</b> A so  | upporting or<br>n(s) the pow  | ganızatıon oper                      | ated, supervised, or cappoint or elect a majo                                       | ontrolled by its s                      | upported organi   | zation(s), typically by      |   |  |  |
| b           |                           | Type II. A<br>manageme   | supporting on<br>t of the sup | organization sup<br>porting organiza | ervised or controlled i   |   |   |                              |   |  |  |
| С           |                           | Type III f   | ınctionally                   |                                      | and C.<br>supporting organizatio<br>ons) You must com                               |   |   |                              | ted with, its   |  |  |
| d           |                           | Type III n<br>functionally   | on-function                   | nally integrate<br>The organizatio   | d. A supporting organi<br>n generally must satis<br>t IV, Sections A and            | ization operated<br>fy a distribution i | ın connection wi<br>requirement and                           | th its supported orgar       | , ,   |  |  |
| e           |                           | Check this   | oox if the org                | ganization recei                     | ved a written determir  | nation from the II                      |   | pe I, Type II, Type II       | functionally  |  |  |
| f           | Enter                     |  |                               | non-functionally<br>d organizations  | integrated supporting   | organization                            |   |                              |   |  |  |
| g           |                           |  |                               | -                                    | ipported organization(  | 'c)                                     |   |                              |   |  |  |
|             |                           | Name of support  | orted                         | (ii) EIN                             | (iii) Type of organization (described on lines 1- 10 above (see instructions))      | (iv) Is the orga                        | (iv) Is the organization listed in your governing document? m |                              | (vi) Amount of<br>other support (see<br>instructions) |  |  |
|             |                           |  |                               |                                      |   | Yes                                     | No  |                              |   |  |  |
|             |                           |  |                               |                                      |   |   |   |                              |   |  |  |
|             |                           |  |                               |                                      |   |   |   |                              |   |  |  |
| Tota        | <u> </u>                  | work Reduc   |                               |                                      |   |   |   |                              | <u> </u>  |  |  |

Page 2

| (Complete only if you checked the box on line 3, 7, 6, or 3 or Fart 1 or if the organization failed to qualify under Fart |            |                 |           |            |           |            |  |  |  |  |  |
|---|------------|-----------------|-----------|------------|-----------|------------|--|--|--|--|--|
| III. If the organization fails to qualify under the tests listed below, please complete Part III.)                        |            |                 |           |            |           |            |  |  |  |  |  |
| Section A. Public Support   |            |                 |           |            |           |            |  |  |  |  |  |
| Calendar year<br>(or fiscal year beginning in) ▶  | (a) 2013   | <b>(b)</b> 2014 | (c) 2015  | (d) 2016   | (e) 2017  | (f) Total  |  |  |  |  |  |
| Gifts, grants, contributions, and<br>membership fees received (Do not<br>include any "unusual grant")                     | 14,482,461 | 6,459,626       | 4,494,325 | 10,495,229 | 8,765,949 | 44,697,590 |  |  |  |  |  |

| 1 | Gifts, grants, contributions, and<br>membership fees received (Do not<br>include any "unusual grant")   | 14,482,461 | 6,459,626 | 4,494,325 | 10,495,229 | 8,765,949 | 44,697,590 |
|---|---|------------|-----------|-----------|------------|-----------|------------|
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf   |            |           |           |            |           |            |
|   |   |            |           |           |            |           |            |
| 3 | The value of services or facilities<br>furnished by a governmental unit to<br>the organization without charge   |            |           |           |            |           |            |
| 4 | Total. Add lines 1 through 3  | 14,482,461 | 6,459,626 | 4,494,325 | 10,495,229 | 8,765,949 | 44,697,590 |
| 5 | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) |            |           |           |            |           | 12,545,481 |

| 5  | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) |                      |                      |                       |                   |                     | 12,545,481       |
|----|---|----------------------|----------------------|-----------------------|-------------------|---------------------|------------------|
| 6  | <b>Public support.</b> Subtract line 5 from line 4  |                      |                      |                       |                   |                     | 32,152,109       |
| S  | ection B. Total Support   | '                    | •                    | •                     | •                 | •                   |                  |
|    | Calendar year<br>(or fiscal year beginning in) ▶  | (a)2013              | <b>(b)</b> 2014      | (c)2015               | <b>(d)</b> 2016   | <b>(e)</b> 2017     | <b>(f)</b> Total |
| 7  | Amounts from line 4   | 14,482,461           | 6,459,626            | 4,494,325             | 10,495,229        | 8,765,949           | 44,697,590       |
| 8  | Gross income from interest,<br>dividends, payments received on<br>securities loans, rents, royalties and<br>income from similar sources   | 43,121               | 117,584              | 118,920               | 78,689            | 104,929             | 463,243          |
| 9  | Net income from unrelated business activities, whether or not the business is regularly carried on  |                      |                      |                       |                   |                     |                  |
| 10 | Other income Do not include gain<br>or loss from the sale of capital<br>assets (Explain in Part VI )  | 8,292                | 25,118               | 170,129               | 25,388            | 97,260              | 326,187          |
| 11 | <b>Total support.</b> Add lines 7 through 10  |                      |                      |                       |                   |                     | 45,487,020       |
| 12 | Gross receipts from related activities,   | etc (see instruction | ons)                 |                       |                   | 12                  | 2,439,011        |
| 13 | First five years. If the Form 990 is for  | or the organization  | 's first, second, th | ırd, fourth, or fıfth | tax year as a sec | tion 501(c)(3) orga | anızatıon,       |
|    | check this box and <b>stop here</b>   |                      |                      |                       |                   | ▶ 🗆                 | ]                |

| S   | ection B. Total Support   |                       |                       |                      |                    |                    |                  |
|-----|---|-----------------------|-----------------------|----------------------|--------------------|--------------------|------------------|
|     | Calendar year<br>(or fiscal year beginning in) ▶  | (a)2013               | <b>(b)</b> 2014       | (c)2015              | <b>(d)</b> 2016    | (e)2017            | <b>(f)</b> ⊤otal |
| 7   | Amounts from line 4   | 14,482,461            | 6,459,626             | 4,494,325            | 10,495,229         | 8,765,949          | 44,697,590       |
| 8   | Gross income from interest,<br>dividends, payments received on<br>securities loans, rents, royalties and<br>income from similar sources | 43,121                | 117,584               | 118,920              | 78,689             | 104,929            | 463,243          |
| 9   | Net income from unrelated business activities, whether or not the business is regularly carried on                                      |                       |                       |                      |                    |                    |                  |
| 10  | Other income Do not include gain<br>or loss from the sale of capital<br>assets (Explain in Part VI )                                    | 8,292                 | 25,118                | 170,129              | 25,388             | 97,260             | 326,187          |
| 11  | <b>Total support.</b> Add lines 7 through 10  |                       |                       |                      |                    |                    | 45,487,020       |
| 12  | Gross receipts from related activities,   | etc (see instructio   | ns)                   |                      |                    | 12                 | 2,439,011        |
| 13  | First five years. If the Form 990 is fo   | or the organization   | 's first, second, thi | rd, fourth, or fifth | tax year as a sect | ion 501(c)(3) orga | inization,       |
|     | check this box and <b>stop here</b>   | -                     |                       |                      | •                  | · · · · · <u>-</u> |                  |
| S   | ection C. Computation of Public   |                       |                       |                      |                    |                    |                  |
| 14  |   |                       |                       | olumn (f))           |                    | 14                 | 70 680 %         |
| 15  | Public support percentage for 2016 Sc   | hedule A, Part II, l  | ıne 14                |                      |                    | 15                 | 76 960 %         |
| 16a | <b>33 1/3% support test—2017.</b> If the  | organization did r    | ot check the box      | on line 13, and line | e 14 is 33 1/3% or | more, check this b |                  |
|     | and stop here. The organization qual  | ifies as a publicly s | upported organiza     | tion                 |                    |                    | ▶ ☑              |

33 1/3% support test—2016. If the organization did not check a box on line 13 or 16a, and line 15 is box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain

in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported ightharpoonsorganization 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly ightharpoonssupported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

| Р   | Support Schedule for  |                          |                           |                           |                     |                   |                  |
|-----|---|--------------------------|---------------------------|---------------------------|---------------------|-------------------|------------------|
|     | (Complete only if you cl<br>the organization fails to                     |                          |                           |                           |                     |                   | er Part II. If   |
| Se  | ection A. Public Support  | quality under t          | ine tests listed i        | below, please co          | ompiete Part II.,   | )                 |                  |
|     | Calendar year   | (a) 2013                 | <b>(b)</b> 2014           | (c) 2015                  | (d) 2016            | (e) 2017          | (f) Total        |
| _   | (or fiscal year beginning in) ▶   | (a) 2013                 | (0) 2014                  | (6) 2015                  | (4) 2016            | (e) 2017          | (I) Iotai        |
| 1   | Gifts, grants, contributions, and membership fees received (Do not        |                          |                           |                           |                     |                   |                  |
|     | include any "unusual grants ")  |                          |                           |                           |                     |                   |                  |
| 2   | Gross receipts from admissions,   |                          |                           |                           |                     |                   |                  |
|     | merchandise sold or services  |                          |                           |                           |                     |                   |                  |
|     | performed, or facilities furnished in any activity that is related to the |                          |                           |                           |                     |                   |                  |
|     | organization's tax-exempt purpose   |                          |                           |                           |                     |                   |                  |
| 3   | Gross receipts from activities that are                                   |                          |                           |                           |                     |                   |                  |
|     | not an unrelated trade or business  |                          |                           |                           |                     |                   |                  |
| 4   | under section 513 Tax revenues levied for the                             |                          |                           |                           |                     |                   |                  |
| -   | organization's benefit and either paid                                    |                          |                           |                           |                     |                   |                  |
|     | to or expended on its behalf  |                          |                           |                           |                     |                   |                  |
| 5   | The value of services or facilities                                       |                          |                           |                           |                     |                   |                  |
|     | furnished by a governmental unit to the organization without charge       |                          |                           |                           |                     |                   |                  |
| 6   | Total. Add lines 1 through 5  |                          |                           |                           |                     |                   |                  |
|     | Amounts included on lines 1, 2, and                                       |                          |                           |                           |                     |                   |                  |
|     | 3 received from disqualified persons                                      |                          |                           |                           |                     |                   |                  |
| b   | Amounts included on lines 2 and 3   |                          |                           |                           |                     |                   |                  |
|     | received from other than disqualified persons that exceed the greater of  |                          |                           |                           |                     |                   |                  |
|     | \$5,000 or 1% of the amount on line                                       |                          |                           |                           |                     |                   |                  |
|     | 13 for the year   |                          |                           |                           |                     |                   |                  |
|     | Add lines 7a and 7b   |                          |                           |                           |                     |                   |                  |
| 8   | Public support. (Subtract line 7c   |                          |                           |                           |                     |                   |                  |
| S   | from line 6 ) ection B. Total Support                                     |                          |                           |                           |                     |                   |                  |
|     | Calendar year   |                          |                           |                           |                     |                   |                  |
|     | (or fiscal year beginning in) ▶   | (a) 2013                 | <b>(b)</b> 2014           | (c) 2015                  | (d) 2016            | (e) 2017          | (f) Total        |
| 9   |   |                          |                           |                           |                     |                   |                  |
| 10a | Gross income from interest,   |                          |                           |                           |                     |                   |                  |
|     | dividends, payments received on   |                          |                           |                           |                     |                   |                  |
|     | securities loans, rents, royalties and income from similar sources        |                          |                           |                           |                     |                   |                  |
| Ь   | Unrelated business taxable income   |                          |                           |                           |                     |                   |                  |
|     | (less section 511 taxes) from   |                          |                           |                           |                     |                   |                  |
|     | businesses acquired after June 30,<br>1975                                |                          |                           |                           |                     |                   |                  |
| c   | Add lines 10a and 10b   |                          |                           |                           |                     |                   |                  |
| 11  | Net income from unrelated business  |                          |                           |                           |                     |                   |                  |
|     | activities not included in line 10b,                                      |                          |                           |                           |                     |                   |                  |
|     | whether or not the business is  |                          |                           |                           |                     |                   |                  |
| 12  | regularly carried on Other income Do not include gain or                  |                          |                           |                           |                     |                   |                  |
| 12  | loss from the sale of capital assets                                      |                          |                           |                           |                     |                   |                  |
|     | (Explain in Part VI )   |                          |                           |                           |                     |                   |                  |
| 13  | Total support. (Add lines 9, 10c,   |                          |                           |                           |                     |                   |                  |
| 14  | 11, and 12)  First five years. If the Form 990 is for                     | l<br>r the organization  | l<br>'s first, second, th | L<br>urd, fourth, or fift | l lax vear as a sec | ction 501(c)(3) o | l<br>rganization |
|     | check this box and <b>stop here</b>                                       |                          |                           | ,,                        | ,                   |                   | ▶ □              |
| Se  | ection C. Computation of Public S   | Support Perce            | ntage                     |                           |                     |                   |                  |
| 15  | Public support percentage for 2017 (lin                                   |                          |                           | column (f))               |                     | 15                |                  |
| 16  | Public support percentage from 2016 S                                     | chedule A, Part II       | II, line 15               |                           |                     | 16                |                  |
| Se  | ction D. Computation of Investr   | nent Income              | Percentage                |                           |                     |                   |                  |
| 17  | Investment income percentage for 201                                      | 7 (line 10c, colur       | nn (f) divided by         | lıne 13, column (f        | ·))                 | 17                |                  |
| 18  | Investment income percentage from 20                                      | <b>016</b> Schedule A, I | Part III, line 17         |                           |                     | 18                |                  |
|     | <b>331/3% support tests—2017.</b> If the                                  | organization did n       | ot check the box          | on line 14, and lir       | ne 15 is more than  |                   | e 17 is not      |
|     | more than 33 1/3%, check this box and s                                   |                          |                           |                           |                     |                   | ightharpoons     |
|     | 33 1/3% support tests—2016. If the  |                          |                           |                           |                     |                   | . —              |
| _   | not more than 33 1/3%, check this box                                     | -                        |                           |                           | · ·                 |                   | ightharpoons     |
| 20  | Private foundation. If the organization                                   | -                        | -                         |                           |                     |                   | ightharpoons     |

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

| 1  | Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,  |    |   |  |
|----|---|----|---|--|
|    | describe the designation If historic and continuing relationship, explain   | 1  | İ |  |
| 2  | Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2) |    |   |  |
|    | in section 309(a)(1) or (2)   | 2  |   |  |
| 3а | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)  |    |   |  |
|    | below   | 3a | İ |  |
| b  | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the                              |    |   |  |
|    | determination   | 3b |   |  |

| t  | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination  38 |  |  |  |  |  |
|----|--|--|--|--|--|--|
|    |  |  |  |  |  |  |
| c  | tid the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?   |  |  |  |  |  |
| 1  | f "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use  |  |  |  |  |  |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you  |  |  |  |  |  |
|    | ecked 12a or 12b ın Part I, answer (b) and (c) below   |  |  |  |  |  |
| b  | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported  |  |  |  |  |  |

| С  | Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use   | -  |               |  |
|----|---|----|---------------|--|
|    |   | 3с |               |  |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you   |    |               |  |
|    | checked 12a or 12b ın Part I, answer (b) and (c) below  |    |               |  |
| b  | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported   |    |               |  |
|    | organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or  |    | $\overline{}$ |  |
|    | supervised by or in connection with its supported organizations   | 4b |               |  |
| С  | Did the organization support any foreign supported organization that does not have an IRS determination under sections  |    |               |  |
|    | 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support  |    |               |  |
|    | to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes  |    |               |  |
|    | to the locality cappoints of gamenton was about something to the source of the source | 4c |               |  |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and   |    |               |  |

|    |  |           | , , |  |
|----|--|-----------|-----|--|
| 4a | a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below   |           |     |  |
|    |  | 4a        |     |  |
| b  | d the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported  |           |     |  |
|    | organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations  | led or 4b |     |  |
| С  | the organization support any foreign supported organization that does not have an IRS determination under sections (c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support   |           |     |  |
|    | to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes   | 4c        |     |  |
| 5a | ne organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and slow (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported izations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the |           |     |  |
|    | organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)   | 5a        |     |  |

| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing |   |  |
|---|--|---|--|
|   | organization's supported organizations? If "Yes," provide detail in <b>Part VI.</b>  | 6 |  |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a  |   |  |
|   | substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)  |   |  |

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

| 8  | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"     |   |  |
|----|---|---|--|
|    | complete Part I of Schedule L (Form 990 or 990-EZ)  | 8 |  |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as |   |  |

```
defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Yes

5b

5c

7

9b

9с

10a

10b

No

| Pa | rt IV Supporting Organizations (continued)  |            | •       | -9 |
|----|---|------------|---------|----|
|    | ·   |            | Yes     | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons?   |            |         |    |
| а  | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?   | 11a        |         |    |
| b  | A family member of a person described in (a) above?   | 11b        |         |    |
|    | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI  | 11c        |         |    |
|    | ection B. Type I Supporting Organizations   |            |         |    |
|    | · · · · · · · · · · · · · · · · · · ·   |            | Yes     | No |
| 1  | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year |            |         |    |
| _  |   | 1          |         |    |
| 2  | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization  |            |         |    |
| -  | ection C. Type II Supporting Organizations  |            |         |    |
|    | cetion c. Type 11 Supporting Organizations  |            | Yes     | No |
| 1  | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the  |            |         |    |
|    | supporting organization was vested in the same persons that controlled or managed the supported organization(s)   | 1          |         |    |
| S  | ection D. All Type III Supporting Organizations   |            | l       |    |
| 1  | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?  |            | Yes     | No |
|    |   | 1          |         |    |
| 2  | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)  |            |         |    |
|    |   | 2          |         |    |
| 3  | By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard  | 3          |         |    |
| S  | ection E. Type III Functionally-Integrated Supporting Organizations   |            |         |    |
| 1  | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction and the organization satisfied the Activities Test Complete line 2 below  The organization is the parent of each of its supported organizations. Complete line 3 below  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see   | ·          | ctions) |    |
| 2  | Activities Test Answer (a) and (b) below.   |            | Yes     | No |
|    | a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities   | <b>2</b> a |         |    |
|    | b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement  | 2b         |         |    |
| 3  | Parent of Supported Organizations Answer (a) and (b) below.   |            |         |    |
|    | a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .  | 3a         |         |    |
|    | <b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard  | 3b         |         |    |

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount **Current Year** Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 (ii) (iii)

**10** Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions Distributable instructions) **Excess Distributions** Pre-2017 Amount for 2017 1 Distributable amount for 2017 from Section C, line

2 Underdistributions, if any, for years prior to 2017

(reasonable cause required-- explain in Part VI)

| See instructions   |  |  |
|--|--|--|
| 3 Excess distributions carryover, if any, to 2017                      |  |  |
| a  |  |  |
| <b>b</b> From 2013   |  |  |
| c From 2014  |  |  |
| <b>d</b> From 2015   |  |  |
| e From 2016  |  |  |
| f Total of lines 3a through e  |  |  |
| g Applied to underdistributions of prior years                         |  |  |
| <b>h</b> Applied to 2017 distributable amount                          |  |  |
| <ul> <li>Carryover from 2012 not applied (see instructions)</li> </ul> |  |  |
| j Remainder Subtract lines 3g, 3h, and 3i from 3f                      |  |  |
| 4 Distributions for 2017 from Section D, line 7                        |  |  |
| <u>      \$                              </u>                          |  |  |
| Applied to underdistributions of prior years                           |  |  |
|  |  |  |

b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4

Schedule A (Form 990 or 990-EZ) (2017)

5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

c Excess from 2015. . . . .

See instructions

d Excess from 2016. Excess from 2017.

31 and 4c 8 Breakdown of line 7 a Excess from 2013. **b** Excess from 2014.

| Schedule A | edule A (Form 990 or 990-EZ) 2017 Page <b>8</b>  |  |   |  |  |  |
|------------|--|--|---|--|--|--|
| Part VI    | mation. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1 les 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See |  |   |  |  |  |
|            |  | Facts And Circumstances Test   |   |  |  |  |
| 990 Sche   | dule A, Supplemen  | tal Information  | = |  |  |  |
| Re         | Return Reference Explanation   |  |   |  |  |  |
| SCHEDULE   | A. PART II. LINE 10.   | INCOME FROM OTHER RELATED ACTIVITIES - 2013 AMOUNT \$8,292 2014 AMOUNT \$25,118 2015 A |   |  |  |  |

MOUNT \$ 170,129 2016 AMOUNT \$ 25,388 2017 AMOUNT \$ 97,260 EXPLANATION OF OTHER

INCOME

**SCHEDULE C** 

# **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

Open to Public

DLN: 93493319130698

Department of the Treasury Internal Revenue Service

(Form 990 or 990-

EZ)

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

Inspection

| • S<br>• S<br>f the<br>• S<br>• S<br>f the<br>Prox | ection 501(c)(3) organizations Cor<br>Section 501(c) (other than section 5<br>Section 527 organizations Complet<br>corganization answered "Yes" of<br>Section 501(c)(3) organizations that<br>Section 501(c)(3) organizations that | n Form 990, Part IV, Line 4, or Form 99<br>t have filed Form 5768 (election under so<br>t have NOT filed Form 5768 (election un<br>n Form 990, Part IV, Line 5 (Proxy Tax<br>s), then | Part I-C<br>I-A and C below<br>90-EZ, Part VI, Iin<br>ection 501(h)) Co<br>der section 501(h | Do not com<br>te <b>47 (Lobb</b><br>mplete Part<br>)) Complete | plete Part I-E<br>ying Activiti<br>II-A Do not e<br>Part II-B Do | es), then<br>complete Part II-l<br>o not complete Pa                                       | art II-A   |
|--|--|---|--|--|--|--|--|
| Nar  | me of the organization   |   |  | E  | mployer ide  | entification nun   | ıber   |
|  | /YERS' COMMITTEE FOR CIVIL RIGHTS DER LAW  |   |  |  | 2-0799246  |  |  |
| Par  | t I-A Complete if the orga   | nization is exempt under section  | n 501(c) or is   | _  |  | nization.  |  |
| 1  |  | nization's direct and indirect political cam  |  |  |  |  |  |
| 2  | Political campaign activity expend   | litures (see instructions)  |  |  | <b>&gt;</b>  | \$   |  |
| 3  | Volunteer hours for political camp   | paign activities (see instructions)   |  |  |  |  |  |
| Par  | t I-B Complete if the orga   | nization is exempt under section  | n 501(c)(3).   |  |  |  |  |
| 1  | Enter the amount of any excise ta  | ax incurred by the organization under se  | ction 4955   |  | <b>&gt;</b>  | \$   |  |
| 2  | Enter the amount of any excise to  | ax incurred by organization managers ur   | der section 4955   |  | <b>&gt;</b>  | \$   |  |
| 3  | If the organization incurred a sec   | tion 4955 tax, did it file Form 4720 for tl   | his year?  |  |  | ☐ Yes  | □ No   |
| 4a   | Was a correction made?   |   |  |  |  | ☐ Yes  | □ No   |
|  | If "Yes," describe in Part IV  |   |  |  |  |  |  |
|  | <u> </u>   | nization is exempt under section  |  | -  |  | -  |  |
| 1<br>2   |  | led by the filing organization for section<br>anization's funds contributed to other or   | •  |  |  | \$   |  |
| -  | function activities  | iamzación s ranas continuacea to otner or   | garnzacions for se   | C((0)) 327 C   | <b>&gt;</b>  | \$   |  |
| 3  | Total exempt function expenditure  | es Add lines 1 and 2 Enter here and on  | Form 1120-POL,   | lıne 17b   | <b>&gt;</b>  | \$   |  |
| 4  | Did the filing organization file For   | m 1120-POL for this year?   |  |  |  | ☐ Yes  | □ No   |
| 5  | organization made payments For of political contributions received   | employer identification number (EIN) of<br>each organization listed, enter the amo<br>that were promptly and directly delivere<br>ee (PAC) If additional space is needed,             | unt paid from the<br>ed to a separate p  | filing organ<br>olitical orgai                                 | ızatıon's func<br>nızatıon, such                                 | ds Also enter the  |  |
|  | (a) Name   | (b) Address   | (c) EIN  | filing or<br>funds If  | unt paid from<br>ganization's<br>none, enter<br>-0-              | (e) Amount contributions and promp directly delive separate programment organization enter | or received<br>otly and<br>vered to a<br>political<br>If none, |
| L  |  |   |  |  |  |  |  |
| 2  |  |   |  |  |  |  |  |
| 3  |  |   |  |  |  |  |  |
| 1  |  |   |  |  |  |  |  |
| 5  |  |   |  |  |  |  |  |
| 5  |  |   |  |  |  |  |  |

(a) 2014

575,353

41,517

143,838

**(b)** 2015

560,050

37,597

140,013

(c) 2016

522,879

20,000

130,720

(d) 2017

529,880

20,000

132,470

Schedule C (Form 990 or 990-EZ) 2017

(e) Total

2,188,162

3,282,243

119,114

547,041

820,562

Calendar year (or fiscal year

beginning in)

Lobbying nontaxable amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Lobbying ceiling amount

2a

Schedule C (Form 990 or 990-EZ) 2017

Return Reference

activity

(b)

Amount

(a)

No

Yes

### During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 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? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year С Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

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

## **Supplemental Financial Statements**

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

DLN: 93493319130698 OMB No 1545-0047

> Open to Public Inspection

(Form 990)

Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** LAWYERS' COMMITTEE FOR CIVIL RIGHTS UNDER LAW 52-0799246 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 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 ☐ No 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 purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b 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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 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 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? 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" on Form 990, Part IV, line 8. 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) Revenue included on 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 Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2017

|        | dule D (Form 990) 2017   |   |                     |              |          |                       |                  |             |                   | Page <b>2</b> |
|--------|--|---|---------------------|--------------|----------|-----------------------|------------------|-------------|-------------------|---------------|
| Par    | t IIII Organizations M   | aintaining Collection                     | ons of Art, His     | torical T    | reasur   | es, or Other Si       | nilar Assets     | (contin     | iued)             |               |
| 3      | Using the organization's acq<br>items (check all that apply)     | juisition, accession, and                 | other records, ch   | eck any of   | the foll | owing that are a sig  | Inificant use of | its colle   | ction             |               |
| а      | Public exhibition  |   |                     | d 🗌          | Loan c   | or exchange program   | ns               |             |                   |               |
| b      | Scholarly research   |   |                     | е 🗌          | Other    |                       |                  |             |                   |               |
| С      | Preservation for future  | e generations                             |                     |              |          |                       |                  |             |                   |               |
| 4      | Provide a description of the Part XIII                           | organization's collection                 | ns and explain hov  | they furt    | her the  | organization's exen   | npt purpose in   |             |                   |               |
| 5      | During the year, did the org<br>assets to be sold to raise ful   |   |                     |              |          |                       | _                | Yes         | □ N-              | 0             |
| Pa     |  | todial Arrangement<br>ganization answered |                     | 990, Part    | IV, lın  | e 9, or reported      | an amount o      | n Form      | 990,              | Part          |
| 1a     | Is the organization an agent<br>included on Form 990, Part       |   | other intermediary  | for contri   | butions  | or other assets not   |                  | Yes         | <b>☑</b> N        | o             |
| ь      | If "Yes," explain the arrange                                    | ement in Part XIII and c                  | omplete the follow  | ving table   |          |                       | Amou             | ———<br>nt   |                   | _             |
| c      | Beginning balance  |   |                     |              |          | 1c                    |                  |             |                   | _             |
| d      | Additions during the year  |   |                     |              |          | 1d                    |                  |             |                   | _             |
| е      | Distributions during the yea                                     | r   |                     |              |          | 1e                    |                  |             |                   | _             |
| f      | Ending balance   |   |                     |              |          | 1f                    |                  |             |                   | _             |
| 2a     | Did the organization include                                     | an amount on Form 99                      | 0, Part X, line 21, | for escrov   | v or cus | todial account liabil | ity?             | Yes         | □ N-              | _             |
| b      | If "Yes," explain the arrange                                    | amont in Dart VIII. Choc                  | k hara if the aval- | nation ha    | - haan n | arouded in Bart VIII  |                  |             |                   | ·             |
|        |  | <b>ds.</b> Complete if the o              |                     |              |          |                       |                  | <del></del> |                   |               |
| Fe     | Lildowillelit i dii  |   |                     | (b)Prior yea |          | c)Two years back (d   |                  | k (e)Fo     | our year          | rs back       |
| 1a     | Beginning of year balance .                                      |   | 2,297,916           |              | 2,499    | 2,291,857             | 2,272,4          |             |                   | 246,765       |
| b      | Contributions  |   |                     |              |          |                       |                  | -           | 2,0               | 000,000       |
| С      | Net investment earnings, gair                                    | ns, and losses                            | 128,321             | 6            | 9,266    | -13,376               | 168,2            | 71          |                   | 71,968        |
| d      | Grants or scholarships   |   |                     |              |          |                       |                  |             |                   |               |
| е      | Other expenditures for faciliti and programs                     | es  | 128,321             | 6            | 3,849    | -14,018               | 148,8            | 77          |                   | 46,270        |
| f      | Administrative expenses .  |   |                     |              |          |                       |                  |             |                   |               |
| g      | End of year balance  |   | 2,297,916           | 2,29         | 7,916    | 2,292,499             | 2,291,8          | 57          | 2,2               | 272,463       |
| 2<br>a | Provide the estimated perce<br>Board designated or quasi-e       | -   | •                   | ne 1g, colu  | mn (a))  | held as               |                  |             |                   |               |
| b      | Permanent endowment <b>&gt;</b>                                  | 93 590 %                                  |                     |              |          |                       |                  |             |                   |               |
| С      | Temporarily restricted endo                                      | wment ▶ 6 420 %                           |                     |              |          |                       |                  |             |                   |               |
|        | The percentages on lines 2a                                      | i, 2b, and 2c should equ                  | al 100%             |              |          |                       |                  |             |                   |               |
| 3а     | Are there endowment funds organization by                        | not in the possession o                   | f the organization  | that are h   | eld and  | administered for th   | ie               |             | Yes               | No            |
|        | (i) unrelated organizations                                      |   |                     |              |          | •                     |                  | 3a(i)       |                   | No            |
|        | (ii) related organizations                                       |   |                     |              | ¸ · ·    | •                     |                  | 3a(ii)      | $\longrightarrow$ | No            |
| ь<br>4 | If "Yes" on 3a(II), are the re<br>Describe in Part XIII the into | _   |                     |              |          |                       |                  | 3b          |                   |               |
|        | rt VI Land, Buildings,   |   | nzacion s endowin   | ent runus    |          |                       |                  |             |                   |               |
| e      |  | ganization answered                       | "Yes" on Form       | 990, Part    | IV, lın  | e 11a. See Form       | 990, Part X.     | line 10     | ).                |               |
|        | Description of property  | (a) Cost or other basi<br>(investment)    |                     | •            |          | (c) Accumulated depr  |                  |             | ok value          | e             |
| 1a     | Land   |   |                     |              |          |                       |                  |             |                   |               |
|        | Buildings  |   |                     |              |          |                       |                  |             |                   |               |
|        | Leasehold improvements   |   |                     | 5            | 78,713   |                       | 563,874          |             |                   | 14,839        |
|        | ,  |   |                     |              | 70 502   |                       | 166 706          |             |                   | 2 976         |

749,038

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) ) .

73,681 92,396

675,357

| Part VII Investments—Other Securities. Complete if the ord See Form 990, Part X, line 12.  | ganızatıon  | answ              | ered "Yes" on Form 990,        | Part IV, line 11b.                |
|--|-------------|-------------------|--------------------------------|-----------------------------------|
| (a) Description of security or category (including name of security)   | B           | b)<br>ook<br>alue | (c) Method<br>Cost or end-of-y | of valuation<br>ear market value  |
| (1) Financial derivatives          (2) Closely-held equity interests          (3)Other   | · ·         |                   |                                |                                   |
| (A)  |             |                   |                                |                                   |
| (B)  |             |                   |                                |                                   |
| (C)  |             |                   |                                |                                   |
| (D)  |             |                   |                                |                                   |
| (E)  |             |                   |                                |                                   |
| (F)  |             |                   |                                |                                   |
| (G)  |             |                   |                                | _                                 |
| (H)  |             |                   |                                |                                   |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 12)   | •           |                   |                                |                                   |
| Part VIII Investments—Program Related.  Complete if the organization answered 'Yes' on Form  | 990, Part   | IV, lır           | ne 11c. See Form 990, Pa       | art X, line 13.                   |
| (a) Description of investment  | (b) Book    |                   | (c) Method                     |                                   |
| (1)  |             |                   | cose of charty                 | cui market value                  |
| (2)  |             |                   |                                |                                   |
| (3)  |             |                   |                                |                                   |
| (4)  |             |                   |                                |                                   |
| (5)  |             |                   |                                |                                   |
| (6)  |             |                   |                                |                                   |
| (7)  |             |                   |                                |                                   |
| (8)  |             |                   |                                |                                   |
| (9)  |             |                   |                                |                                   |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )  | •           |                   |                                |                                   |
| Part IX Other Assets. Complete if the organization answered 'Yes'  (a) Description   | on Form 99  | 90, Par           | rt IV, line 11d See Form 99    | 0, Part X, line 15 (b) Book value |
| (1)  |             |                   |                                |                                   |
| (2)  |             |                   |                                |                                   |
| (3)  |             |                   |                                |                                   |
| (4)  |             |                   |                                |                                   |
| (5)  |             |                   |                                |                                   |
| (6)  |             |                   |                                |                                   |
| (7)  |             |                   |                                |                                   |
| (8)  |             |                   |                                |                                   |
| (9)  |             |                   |                                |                                   |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 15 )  Part X  Other Liabilities. Complete if the organization answers  See Form 990, Part X, line 25. | ered 'Yes'  | on Fo             | rm 990, Part IV, line 11e      | or 11f.                           |
| 1. (a) Description of liability  (1) Federal income taxes  |             | <b>(b)</b> Bo     | pok value                      |                                   |
| DEFERRED RENT AND CONSTRUCTION ALLOWANCE (2)   |             |                   | 184,876                        |                                   |
| (3)  |             |                   |                                |                                   |
| (4)  |             |                   |                                |                                   |
| (5)  |             |                   |                                |                                   |
| (6)  |             |                   |                                |                                   |
| (7)  |             |                   |                                |                                   |
| (8)  |             |                   |                                |                                   |
| (9)  |             |                   |                                |                                   |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )  | <u> </u>    |                   | 184,876                        |                                   |
| 2. Liability for uncertain tax positions In Part XIII, provide the text of the   | footnote to |                   | ganızatıon's fınancıal statem  | _                                 |
| organization's liability for uncertain tax positions under FIN 48 (ASC 740)  | спеск nere  | ii the i          | text of the foothote has been  | i provided in Part XIII L         |

Part XI

2

b

4

b

c

Part XII

5

1

2

c

d

3 4

b

5

Part XIII

See Additional Data Table

Return Reference

Schedule D (Form 990) 2017

Page 4

33,110,522

7,241,908

7.241.908

Schedule D (Form 990) 2017

#### 2c c d 2d e 3

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . .

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments . . . .

Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Add lines **4a** and **4b** . . . . . . .

Donated services and use of facilities . . .

Other (Describe in Part XIII ) . . . . . .

Add lines 2a through 2d . . . . . . . . .

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

**Supplemental Information** 

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

33,110,522

2e

3

4c

5

168.747

33.110.522

4a 4b Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . . Reconciliation of Expenses per Audited Financial Statements With Expenses per R

2a

2b

2a

2b

2c

2d

4a

4b

Explanation

| 2e      | 33,2/9,269 |  |  |  |  |
|---------|------------|--|--|--|--|
| 3       | 9,533,880  |  |  |  |  |
|         |            |  |  |  |  |
|         |            |  |  |  |  |
|         |            |  |  |  |  |
| 4c      | 0          |  |  |  |  |
| 5       | 9,533,880  |  |  |  |  |
| Return. |            |  |  |  |  |
|         |            |  |  |  |  |
| 1       | 40,352,430 |  |  |  |  |

| Page <b>5</b> | Schedule D (Form 990) 2017 |                             |  |  |
|---------------|----------------------------|-----------------------------|--|--|
|               | ormation (continued)       | Part XIII Supplemental Info |  |  |
|               | Explanation                | Return Reference            |  |  |
|               |                            |                             |  |  |
|               |                            |                             |  |  |
|               |                            |                             |  |  |
|               |                            |                             |  |  |
|               |                            |                             |  |  |
|               |                            |                             |  |  |
|               |                            |                             |  |  |
|               |                            |                             |  |  |
|               |                            |                             |  |  |

Schedule D (Form 990) 2017

## **Additional Data**

Software Version:

Name: LAWYERS' COMMITTEE FOR CIVIL RIGHTS

Software ID:

UNDER LAW

**Supplemental Information** 

Return Reference PART IV, LINE 2B

Explanation

**EIN:** 52-0799246

THE LAWYERS' COMMITTEE HAS RECORDED A LIABILITY OF \$129,612 RELATED TO SETTLEMENT AWARDS T HAT IT HAS RECEIVED THE LAWYERS' COMMITTEE WILL CONTINUE TO PRESENT THESE FUNDS AS A LIAB ILITY UNTIL IT CAN DETERMINE THE PROPER DISPOSITION OF THESE AWARDS.

| Supplemental Information |  |
|--------------------------|--|
| Return Reference         | Explanation  |
| PART V, LINE 4           | THE LAWYERS' COMMITTEE'S ENDOWMENTS CONSIST OF FUNDS ESTABLISHED FOR A VARIETY OF PUPOSES AS REQUIRED BY GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, NET ASSETS ASSOCIATED WITH THESE ENDOWMENTS ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS THE \$2,000,000 CONTRIBUTION FROM A FOUNDATION RECEIVED IN 2013 IS TO BE USE D TO CREATE AN OPERATING RESERVE FUND (THE RESERVE) THE LAWYERS' COMMITTEE IS PERMITTED T O BORROW FUNDS FROM THE RESERVE AS LONG AS SUCH BORROWINGS COMPLY WITH THE APPROVED POLICY GOVERNING THE USE OF THE FUNDS THE LAWYERS' COMMITTEE IS ALSO ENCOURAGED TO HAVE A REPAY MENT PLAN IN PLACE FOR ANY BORROWINGS MADE FROM THE RESERVE DURING 2014, FOR REPORTING PU RPOSES, THE LAWYERS' COMMITTEE CONCLUDED THAT IT WAS APPROPRIATE TO PRESENT CERTAIN OF ITS TEMPORARILY RESTRICTED FUNDS AS PART OF ITS "ENDOWMENT" TOTALS THUS, THE COMPARATIVE HIS TORICAL DATA PRESENTED IN PART V OF SCHEDULE D HAS BEEN ADJUSTED TO ALLOW FOR COMPARABILIT Y OF THE DATA |

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493319130698 OMB No 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990. Name of the organization **Employer identification number** LAWYERS' COMMITTEE FOR CIVIL RIGHTS UNDER LAW 52-0799246 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations ☐ Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No 1 8 10 Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat No 50083H Schedule G (Form 990 or 990-EZ) 2017

|                 | edule G (Form 990 or 990-EZ) 2017   |                             |   |                          | Page 2   |
|-----------------|---|-----------------------------|---|--------------------------|--|
| Pa              | rt II Fundraising Events. Complethan \$15,000 of fundraising 6 gross receipts greater than \$ | event contributions and     |   |                          |  |
|                 | gross receipts greater than \$  | (a)Event #1 HIGGINBOTHAM    | <b>(b)</b> Event #2                                     | (c)Other events          | (d) Total events (add col (a) through          |
| Ð               |   | DINNER (event type)         | (event type)  | (total number)           | col (c))                                       |
| Revenue         |   |                             |   |                          |  |
|                 | 1 Gross receipts  | 1,970,435                   |   |                          | 1,970,435                                      |
|                 | 2 Less Contributions  | 1,831,865                   |   |                          | 1,831,865                                      |
|                 | Gross income (line 1 minus line 2)  | 138,570                     |   |                          | 138,570  |
|                 | 4 Cash prizes   |                             |   |                          |  |
| S<br>လ          | 5 Noncash prizes  |                             |   |                          |  |
| ense.           | 6 Rent/facility costs   | 277,793                     |   |                          | 277,793  |
| ă               | <b>7</b> Food and beverages   | 19,428                      |   |                          | 19,428   |
| Direct Expenses | 8 Entertainment   |                             |   |                          |  |
| ă               | 9 Other direct expenses   | 20,862                      |   |                          | 20,862   |
|                 | <b>10</b> Direct expense summary Add lines 4  | through 9 in column (d)     |   |                          | 318,083  |
|                 | 11 Net income summary Subtract line 10  |                             |   | •                        | -179,513                                       |
| Pai             | on Form 990-EZ, line 6a.  | anızatıon answered "Ye      | s" on Form 990, Part I                                  | IV, line 19, or reported | i more than \$15,000                           |
| Revenue         |   | (a) Bingo                   | <b>(b)</b> Pull tabs/Instant<br>bingo/progressive bingo | (c) Other gaming         | (d) Total gaming (add col (a) through col (c)) |
| Re              | 1 Gross revenue   |                             |   |                          |  |
| Expenses        | 2 Cash prizes   |                             |   |                          |  |
| å               | 3 Noncash prizes  |                             |   |                          |  |
| ect             | 4 Rent/facility costs   |                             |   |                          |  |
| <u>ā</u>        | 5 Other direct expenses   |                             |   |                          |  |
|                 |   | ☐ Yes%                      | ☐ Yes%  | ☐ Yes %                  |  |
|                 | 6 Volunteer labor   | □ No                        | ☐ No  | □ No                     |  |
|                 | 7 Direct expense summary Add lines 2  | through 5 in column (d)     |   | •                        |  |
|                 | 8 Net gaming income summary Subtrac   | t line 7 from line 1, colum | n (d)   | •                        |  |
| 9               | Enter the state(s) in which the organizat   | ion conducts gaming activ   | ities   |                          |  |
| а               | Is the organization licensed to conduct g   | <del>-</del>                | these states?   |                          | ☐ Yes ☐ No                                     |
| b               | If "No," explain  |                             |   |                          |  |
|                 |   |                             |   |                          |  |
| 10a<br>b        | Were any of the organization's gaming li<br>If "Yes," explain                                 |                             |   | ·                        | Yes No   |
|                 |   |                             |   |                          |  |
|                 |   |                             |   |                          |  |

| Sche | dule G (Form 990 or 990-EZ) 2017  |  |            |      | F   | Page 3   |
|------|---|--|------------|------|-----|----------|
| 11   | Does the organization conduct gaming  | activities with nonmembers?  |            | Yes  | □No |          |
| 12   | Is the organization a grantor, beneficial formed to administer charitable gaming    | ry or trustee of a trust or a member of a partnership or other entit   | Y          | □Yes | □No |          |
| 13   | Indicate the percentage of gaming acti  | vity conducted in  |            |      |     |          |
| а    | The organization's facility   |  | 13         | а    |     | %        |
| b    | An outside facility   |  | 13         | ь    |     | %        |
| 14   | Enter the name and address of the per   | son who prepares the organization's gaming/special events books  | and record | s    |     |          |
|      | Name ►  |  |            |      |     |          |
|      | Address •   |  |            |      |     |          |
| 15a  | Does the organization have a contract revenue?                                      | with a third party from whom the organization receives gaming  |            | □Yes | □No |          |
| b    |   | evenue received by the organization > \$ a the third party > \$  | and the    |      |     |          |
| c    | If "Yes," enter name and address of the   | e third party  |            |      |     |          |
|      | Name ►  |  |            |      |     |          |
|      | Address ►   |  |            |      |     |          |
| 16   | Gaming manager information  |  |            |      |     |          |
|      | Name ▶  |  |            |      |     |          |
|      | Gaming manager compensation ▶ \$  |  |            |      |     |          |
|      | Description of services provided ►  |  |            |      |     |          |
|      | ☐ Director/officer  | ☐ Employee ☐ Independent contractor  |            |      |     |          |
| 17   | Mandatory distributions   |  |            |      |     |          |
| а    | Is the organization required under state retain the state gaming license?           | e law to make charitable distributions from the gaming proceeds to   | )          | □Yes | Пио |          |
| b    | Enter the amount of distributions requing the organization's own exempt activities. | red under state law distributed to other exempt organizations or spities during the tax year <b>&gt;</b> \$                  | pent       | 03   |     |          |
| Pai  |   | on. Provide the explanations required by Part I, line 2b, col<br>5c, 16, and 17b, as applicable. Also provide any additional |            |      |     | <u> </u> |
|      | Return Reference  | Explanation  |            |      |     |          |

Schedule G (Form 990 or 990-EZ) 2017

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493319130698 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** LAWYERS' COMMITTEE FOR CIVIL RIGHTS 52-0799246 UNDER LAW 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 ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) (book, FMV, appraisal, noncash assistance organization grant cash or assistance or government assistance other) (1) See Additional Data (3) (5) (6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . 10 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2017

Part IV

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference Explanation

## **Additional Data**

1620 L STREET NW SUITE

WASHINGTON, DC 20036

1050

Software ID: Software Version: EIN: 52-0799246 Name: LAWYERS' COMMITTEE FOR CIVIL RIGHTS UNDER LAW Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (b) EIN (q) Description of (h) Purpose of grant (a) Name and address of (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or aovernment assistance other) THE NATIONAL COALITION ON 52-1253112 501(C)(3) 10,000 SUB-GRANT FOR BLACK CIVIC PARTICIPATION PROGRAM 1050 CONNECTICUT AVE NW 5TH FLOOR WASHINGTON, DC 20036 ASIAN AMERICAN ADVANCING 13-3619000 501(C)(3) 20,000 SUB-GRANT FOR JUSTICE PROGRAM

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 94-3082546 501(C)(3) 37.500 SUB-GRANT FOR THE WORKING GROUP PO BOX 7023 PROGRAM

OAKLAND, CA 946120232

CHICAGO LAWYERS
COMMITTEE FOR CIVIL
RIGHTS
100 NORTH LASALLE STREET
SUITE 600

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHICAGO, IL 60602

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 52-1959306 501(C)(3) 40.000 SUB-GRANT FOR ARAB AMERICA INSTITUTE FOUNDATION PROGRAM 1600 K STREET NW SUITE 601 WASHINGTON, DC 20006 04-3490614 501(C)(3) 25.000 SUB-GRANT FOR LAWYERS COMMITTEE FOR CIVIL RIGHTS & ECONOMIC PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

JUSTICE

5TH FLOOR BOSTON, MA 02110

61 BATTERYMARCH STREET

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MESA, AZ 85202

| AYUDA<br>6925B WILLOW STREET NW<br>WASHINGTON, DC 20012                   | 52-0971440 | 501(C)(3) | 20,000 |  |     | SUB-GRANT FOR<br>PROGRAM |
|---|------------|-----------|--------|--|-----|--------------------------|
| COUNCIL ON AMERICAN ISLAMIC RELATIONS OF ARIZONA 1819 S DOBSON ROAD SUITE | 86-1045521 | 501(C)(3) | 15,000 |  | I . | SUB-GRANT FOR<br>PROGRAM |

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 26-3307578 501(C)(3) 10.000 SUB-GRANT FOR FUND FOR LEADERSHIP EQUITY ACCESS & DIVERSITY PROGRAM

1701 PENN AVE NW SUITE 200 WASHINGTON, DC 20006 04-3697166 501(C)(3) 40.000 SUB-GRANT FOR GIRLS FOR GENDER EQUITY 25 CHAPEL STREET SUITE PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1006 BROOKLYN, NY 11201

| efil       | e GRAPHIC pr                                | int - DO NOT PROCESS   | As Filed Data   | a -   | DLN: 934                  | 9331       | 9130   | 698  |
|------------|---|--|---|---|---------------------------|------------|--------|------|
| Sch        | edule J                                     | Col  | mpensati  | ion Information   | OM                        | IB No      | 1545-0 | 0047 |
| (Form 990) |   | For certain Officers, Directors, Trustees, Key Employees, and Highest    |   |   |                           |            |        |      |
|            |   | ➤ Complete if the orga   | Compensated Employees  ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. |   |                           |            |        |      |
| Б          | 64 7  |  | ▶ Attach  | to Form 990.<br>(Form 990) and its instructions                                 |                           |            | )17    |      |
|            | tment of the Treasurv<br>al Revenue Service | P Information abo  |   | gov/form990.  | is at                     |            | ectio  |      |
|            | ne of the organiza<br>/YERS' COMMITTEE I    |  |   |   | Employer identificat      | ion nu     | ımber  |      |
|            | DER LAW                                     | OR CIVIE RIGHTS  |   |   | 52-0799246                |            |        |      |
| Pa         | rt I Questi                                 | ons Regarding Compensati   | on  |   |                           |            |        |      |
| _          |   |  |   |   |                           |            | Yes    | No   |
| 1a         |   |  |   | the following to or for a person liste<br>y relevant information regarding the  |                           |            |        |      |
|            |   | or charter travel  |   | Housing allowance or residence for  | •                         |            |        |      |
|            | _   | companions   | 님   | Payments for business use of perso  |                           |            |        |      |
|            |   | infication and gross-up payments   | H   | Health or social club dues or initiation.  Personal services (e.g., maid, chauf |                           |            |        |      |
|            | Discretion                                  | ary spending account   |   | reisonal services (e.g., maid, chau   | reur, cher)               |            |        |      |
| b          |   | kes in line 1a are checked, did the<br>Il of the expenses described abov |   | ollow a written policy regarding paym<br>plete Part III to explain              | nent or reimbursement     | 1b         |        |      |
| 2          | Did the organiza                            | tion require substantiation prior t                                      | o reimbursing o   | or allowing expenses incurred by all<br>r, regarding the items checked in line  | 152                       | 2          |        |      |
|            | directors, truste                           | es, officers, including the CEO/EX                                       | ecutive Director  | , regarding the items thetked in line   | : Iar                     |            |        |      |
| 3          |   |  |   | d to establish the compensation of the  | ne                        |            |        |      |
|            |   | EO/Executive Director  Check all t<br>d organization to establish compe  |   | CEO/Executive Director, but explain i   | n Part III                |            |        |      |
|            | <b>✓</b> Compensa                           | tion committee   | <b>✓</b>  | Written employment contract   |                           |            |        |      |
|            |   | ition committee<br>ent compensation consultant                           | ✓   | Written employment contract Compensation survey or study                        |                           |            |        |      |
|            | ·   | of other organizations   | $\overline{\mathbf{Z}}$   | Approval by the board or compensa   | tion committee            |            |        |      |
| 4          |   |  | 90, Part VII, Se  | ction A, line 1a, with respect to the f   |                           |            |        |      |
|            | related organiza                            | tion   |   |   |                           |            |        |      |
| a          |   | ance payment or change-of-contro   |   |   |                           | 4a         |        | No   |
| b          | •   | receive payment from, a suppler  | •   | · ·   |                           | 4b<br>4c   |        | No   |
| С          |   | receive payment from, an equity<br>if lines 4a-c, list the persons and i | •   | isation arrangement?<br>ilicable amounts for each item in Part                  | : III                     | 40         |        | No   |
|            | ,   | , ,  |   |   |                           |            |        |      |
|            |   | ), 501(c)(4), and 501(c)(29) o   | _   | •   |                           |            |        |      |
| 5          |   | ed on Form 990, Part VII, Section ontingent on the revenues of           |   | the organization pay or accrue any  |                           |            |        |      |
| а          | The organization                            | ٦٦   |   |   |                           | 5a         |        | No   |
| b          | Any related orga                            |  |   |   |                           | 5b         |        | No   |
| _          | -   | 5a or 5b, describe in Part III   |   |   |                           |            |        |      |
| 6          |   | ed on Form 990, Part VII, Section on the net earnings of                 | A, line 1a, did t   | the organization pay or accrue any  |                           |            |        |      |
| а          | The organization                            |  |   |   |                           | <b>6</b> a |        | No   |
| b          | Any related orga                            |  |   |   |                           | 6b         |        | No   |
| 7          | •   | 6a or 6b, describe in Part III   | A lunc to Hill  | the organization provide and particle   | d                         |            |        |      |
| 7          | payments not d                              | escribed in lines 5 and 67 If "Yes,"                                     | ' describe in Pa  |   | u                         | 7          |        | No   |
| 8          |   |  |   | red pursuant to a contract that was<br>section 53 4958-4(a)(3)? If "Yes," do    | escribe                   |            |        | N' - |
| 9          |   | 3, did the organization also follow                                      | the rebuttable  | presumption procedure described in  | Regulations section       | 9          |        | No   |
| Ear I      |   | ction Act Notice, see the Instr  | uctions for Ea  | orm 990   | 50053T <b>S</b> chedule 1 |            | , 000) | 2017 |

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule 1, report compensation from the organization on row (i) and from related organizations, described in the

| ınstructions, on row (II) D                    | o no     | ot list any individuals that | ted on Schedule J, report<br>are not listed on Form 99 | 90, Part VII                        |                             | _              | ·                                  |   |
|--|----------|------------------------------|--|-------------------------------------|-----------------------------|----------------|------------------------------------|---|
| (A) Name and Title                             | s (B)    |                              | of W-2 and/or 1099-MISC                                |                                     | (C) Retirement and          | (D) Nontaxable |                                    | (F) Compensation in                               |
| (A) Name and Title                             |          | (i) Base compensation        | (ii) Bonus & incentive compensation                    | (iii) Other reportable compensation | other deferred compensation | benefits       | (E) Total of columns<br>(B)(ı)-(D) | column (B) reported as deferred on prior Form 990 |
| 1 KRISTEN CLARKE<br>PRESIDENT & EEXCUTIVE      | (i)      | 256,019                      | 0  | 0                                   | 7,725                       | 15,076         | 278,820                            | 0   |
| DIRECTOR                                       | (ii)     | 0                            | 0  | 0                                   | 0                           | 0              | 0                                  | 0   |
| 2 JON GREENBAUM<br>CHIEF COUNSEL & SENIOR      | (i)      | 227,577                      | 0  | 0                                   | 6,825                       | 2,969          | 237,371                            | 0   |
| DEBUTY DIRECT                                  | (ii)     | 0                            | 0  | 0                                   | 0                           | 0              | 0                                  | 0   |
| 3 LISA BORNSTEIN<br>VICE PRESIDENT, STRATEGY   | (i)      | 181,117                      | 0  | 0                                   | 5,516                       | 15,908         | 202,541                            | 0   |
| AND POLICY                                     | (ii)     | 0                            | 0  | 0                                   | 0                           | 0              | 0                                  | 0   |
| 4 KAREN MILLER<br>CHIEF DEVELOPMENT<br>OFFICER | (i)      | 207,360                      | 0  | 0                                   | 6,285                       | 7,991          | 221,636                            | 0   |
|  | (ii)     | 0                            | 0  | 0                                   | 0                           | 0              | 0                                  | 0   |
| 5 DIANE GLAUBER<br>CO-DIRECTOR FAIR            | (i)      | 147,901                      | 0  | 0                                   | 4,503                       | 74             | 152,478                            | 0   |
| HOUSING/COMM DEVEL                             | (ii)     | 0                            | 0  | 0                                   | 0                           | 0              | 0                                  | 0   |
| 6<br>MARCIA JOHNSON-BLANCO                     | (i)      | 142,862                      | 0  | 0                                   | 4,426                       | 19,455         | 166,743                            | 0   |
| CO-DIRECTOR OF VOTING RIGHTS                   | (ii)     | 0                            | 0  | 0                                   | 0                           | 0              | 0                                  | 0   |
| 7 EZRA ROSENBERG<br>CO-DIRECTOR OF VOTING      | (i)      | 138,907                      | 0  | 0                                   | 4,426                       | 21,969         | 165,302                            | 0   |
| RIGHTS   | (ii)     | 0                            | 0  | 0                                   | 0                           | 0              | 0                                  | 0   |
| 8 NANCY ANDERSON<br>DIRECTOR OF PRO BONO       | (i)      | 141,138                      | 2,500  | 0                                   | 4,501                       | 20,937         | 169,076                            | 0   |
| AND ACTING FINA                                | (ii)     | 0                            | 0  | 0                                   | 0                           | 0              | 0                                  | 0   |
|  |          |                              |  |                                     |                             |                |                                    |   |
|  |          |                              |  |                                     |                             |                |                                    |   |
|  |          |                              |  |                                     |                             |                |                                    |   |
|  |          |                              |  |                                     |                             |                |                                    |   |
|  |          |                              |  |                                     |                             |                |                                    |   |
|  | Н        |                              |  |                                     |                             |                |                                    |   |
|  | $\vdash$ |                              |  |                                     |                             |                |                                    |   |
|  | $\vdash$ |                              |  |                                     |                             |                |                                    |   |
|  |          |                              |  |                                     |                             |                |                                    |   |
| i  |          |                              |  |                                     |                             |                | Schedule                           | J (Form 990) 2017                                 |

Schedule J (Form 990) 2017 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation

Schedule 1 (Form 990) 2017

| efile GRAPH   | IIC print                                      | - DO NOT PROCESS                | As Filed Data - |                    | DLN                             | I: 93493319130698              |
|---|--|---------------------------------|-----------------|--------------------|---------------------------------|--------------------------------|
| SCHEDIII  | ΕΩ   | Supplement                      | al Informatio   | n to Form 990 or 9 | 90-F7                           | OMB No 1545-0047               |
| SCHEDULE O (Form 990 or 990-EZ)  Complete to provide information to Form 990 or 990-EZ or to provide any additional information.  Attach to Form 990 or 990-EZ.  Department of the Treasury  Department of the Treasury  Supplemental Information to Form 990 or 990-EZ.  Attach to Form 990 or 990-EZ.  Information about Schedule O (Form 990 or 990-EZ) and its instructions is www.irs.gov/form990. |  |                                 |                 |                    |                                 | 2017 Open to Public Inspection |
| Name of the org<br>LAWYERS' COMMIT<br>UNDER LAW   | TTEE FOR CIV                                   | VIL RIGHTS plemental Informatio |                 |                    | <b>Employer iden</b> 52-0799246 | tification number              |
| Return<br>Reference   | e 0, 3up                                       | premental Informatio            |                 | Explanation        |                                 |                                |
| FORM 990,<br>PART VI,<br>SECTION A,<br>LINE 7A  | THE EXECUTIVE COMMITTEE ELECTS ITS OWN MEMBERS |                                 |                 |                    |                                 |                                |

Return Explanation
Reference

FORM 990, A DETAILED REVIEW WAS CONDUCTED BY THE BOARD AUDIT COMMITTEE, EXECUTIVE DIRECTOR AND PRESIDENT, VICE PRESIDENT, STRATEGY AND POLICY, AND ACTING DIRECTOR OF FINANCE A FINAL COPY OF SECTION B, THE 990 WAS REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE PRIOR TO THE FILING

| Return<br>Reference                             | Explanation  |
|---|--|
| FORM 990,<br>PART VI,<br>SECTION B,<br>LINE 12C | THE PURPOSE OF THIS CONFLICT OF INTEREST POLICY IS TO ESTABLISH APPROPRIATE PROCEDURES FOR IDENTIFYING AND DISCLOSING ACTUAL OR POTENTIAL CONFLICTS OF INTEREST, SO THAT APPROPRIATE ACTION CAN BE TAKEN TO ENSURE THAT DECISIONS ARE NOT INFLUENCED BY THE POSSIBILITY OF PER SONAL OR PROFESSIONAL GAIN, THAT THERE IS NO APPEARANCE OF ANY IMPROPRIETY, AND THAT THE L AWYERS' COMMITTEE SUFFERS NO OTHER ADVERSE CONSEQUENCE THE CO-CHAIRS OF THE BOARD AND/OR THE EXECUTIVE DIRECTOR, AS APPROPRIATE, OR THEIR DESIGNEES, WILL BE RESPONSIBLE FOR MONITO RING TRANSACTIONS OR RELATIONSHIPS THAT HAVE BEEN APPROVED FOLLOWING A DISCLOSURE UNDER THIS POLICY TO ENSURE THAT THERE IS NO MATERIAL CHANGE IN CIRCUMSTANCE OR OTHER DEVELOPMENT THAT MIGHT NECESSITATE FURTHER DELIBERATIONS OR ACTION |

| Return<br>Reference | Explanation  |
|---------------------|--|
|                     |  |
| FORM 990,           | THE CO-CHAIRS OF THE BOARD OF DIRECTORS REVIEW AND DETERMINE THE COMPENSATION OF THE EXECU |
| PART VI,            | TIVE DIRECTOR BY REVIEWING 990 EXECUTIVE COMPENSATION FOR RELATED ORGANIZATIONS AND NON-PR |
| SECTION B,          | OFIT CEO COMPENSATION SEGMENTED BY GEOGRAPHICAL AREA, SIZE OF ORGANIZATION AND BUDGET AS R |
| LINE 15A            | EPORTED IN ASAE'S ANNUAL REPORT ON EXECUTIVE SALARIES THE CO-CHAIRS ALSO CONDUCT A PERFOR  |
|                     | MANCE EVALUATION THE CO-CHAIRS REPORT THEIR DECISION ON THE EXECUTIVE DIRECTOR'S COMPENSA  |
|                     | TION DIRECTLY TO THE VICE PRESIDENT, STRATEGY AND POLICY THE EXECUTIVE DIRECTOR, WITH THE  |
|                     | ASSISTANCE OF THE VICE PRESIDENT, STRATEGY AND POLICY, DETERMINES THE COMPENSATION OF ALL  |
| i                   | OTHER STAFF, INCLUDING KEY EMPLOYEES   |

Return Explanation
Reference

FORM 990, GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO FUNDERS UPON REQUEST PART VI, SECTION C, LINE 19

Return Explanation
Reference

LINE 2C

FORM 990, PART XII,