

Form **990**

EXTENDED TO NOVEMBER 15, 2018

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2017

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasure ► Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service A For the 2017 calendar year, or tax year beginning and ending D Employer identification number C Name of organization Check if FLORIDA JUSTICE ASSOCIATION Name change 59-1291221 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 218 SOUTH MONROE STREET (850)224-9403 4,864,160. term City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amende TALLAHASSEE, FL 32301 H(a) Is this a group return F Name and address of principal officer PAUL JESS _Yes X No for subordinates? SAME AS C ABOVE H(b) Are all subordinates included? Yes Tax-exempt status 501(c)(3) X 501(c) (6 4947(a)(1) or) (insert no) If "No," attach a list. (see instructions) J Website: WWW.FLORIDAJUSTICEASSOCIATION.ORG H(c) Group exemption number ▶ Form of organization: X Corporation Trust Association Year of formation, 1972 M State of legal domicile; FL Part Summary PROMOTES THE DEVELOPMENT OF LAW Briefly describe the organization's mission or most significant activities Governance IN FLORIDA Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets 68 3 Number of voting members of the governing body (Part VI, line 1a) 67 Number of independent voting members of the governing body (Part VI, line 1b) 4 36 5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 200 6 Total number of volunteers (estimate if necessary) 609,143. 7a 7 a Total unrelated business revenue from Part VIII, column (C), line 12 <143,082.> b Net unrelated business taxable income from Form 990-T, line 34 **Current Year Prior Year** 32.129. 21,809. 8 Contributions and grants (Part VIII, line 1h) 746,394. 4,083,146. 9 Program service revenue (Part VIII, line 2g) 2,554 7,818. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 712,421. 074,495. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 4,855,572. 4,825,194. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 5,816. 4,612. 13 Grants and similar amounts paid (Part IX, column (A), lines 1 3) Λ. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 2,415,078. 2.478.086. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses (Part IX, column (D), line, 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f 24e, EC, EIVED 2,606,<u>68</u>1. 2,119,273. column (A), line 25) OSC 5,027,575. 4,601,971 18 Total expenses Add lines 13 17 (must equal Part IX <172,003.> 223,223. FEB 1 9 2019 Revenue less expenses Subtract line 18 from line 1: RS. ь **Beginning of Current Year End of Year** 3,30<u>6,266</u>. ,132,078. 20 Total assets (Part X, line 16) 478,032. 875,443. 21 Total liabilities (Part X, line 26) 430,823. 1,654,046. Net assets or fund balances Subtract line 21 from lin Part | Signature Block Under penalties of perjury, 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. 12 DEC Signature of office Sian PAUL JESS EXECUTIVE DIRECTOR Here Type or print name and title Date Check Preparer's signature Print/Type preparer's name 12/11/18 self-employed ₽00072267 SUMNER REED Paid RIGGS & INGRAM, LLC Firm's name CARR, 72-1396621 Preparer Firm's EIN Firm's address 2633 CENTENNIAL BLVD., STE 200 Use Only

Form **990** (2017)

Phone no. 850 . 878 . 8777

X Yes No

May the IRS discuss this return with the preparer shown above? (see instructions)

TALLAHASSEE, FL 32308

	990 (2017) FLORIDA JUSTICE ASSOCIATION	59-1291221 Page 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission PROMOTES THE DEVELOPMENT OF LAW IN FLORIDA	
	Did the organization undertake any significant program services during the year which were not listed on the	
2	prior Form 990 or 990·EZ?	Yes X No
_	If "Yes," describe these new services on Schedule O	Yes X No
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	Describe the organization's program service accomplishments for each of its three largest program services, as r	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	s, the total expenses, and
4-	revenue, if any, for each program service reported (Code) (Expenses S including grants of S) (Revenue	
4a	(Code) (Expenses S including grants of S) (Revenue MEMBER SERVICES - PROVIDE MEMBERS WITH EDUCATIONAL OPPOR	
		E ARE
	PUBLISHING A LAW JOURNAL IN PRINT AND ELECTRONICALLY, PRO	
	SEMINARS AND RESEARCH MATERIALS DISTRIBUTED FROM THE SEM	
	WORKSHOPS AND PROVIDING MEMBERS WITH PEER TO PEER OPPORTU	
	SHARE REFERENCES AND RESEARCH THROUGH LOCAL AND STATEWIDE	
	THE INTERNET.	
4b	(Code) (Expenses \$	Je S)
	LEGISLATIVE SERVICES - FLORIDA JUSTICE ASSOCIATION WORKS	TO ENSURE
	ACCESS TO THE COURTS FOR REDRESS OF ANY INJURY BOTH IN TI	HE LEGISLATIVE
	AND LEGAL ARENAS.	
4c	(Code) (Expenses S including grants of S) (Revenue	ue S)
	· · · · · · · · · · · · · · · · · · ·	
4d	Other program services (Describe in Schedule O)	`
_	(Expenses \$ Including grants of \$) (Revenue \$	
4e	Total program service expenses	Form 990 (2017)
		rorm 330 (2017)

59-1291221 Page 3

Form 990 (2017) FLORIDA JUSTICE ASSOCIATION Partily Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		l	
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5	Х	<u></u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	<u> </u>	Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		•	١.,
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			İ
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?	_		v
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	10		x
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Λ
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
_	as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D.			
a	Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	1.10		
-	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	1		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	l		٦,
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	4.5		v
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16_	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		х
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		-^-
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10		х
10	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		
19		19		х
	complete Schedule G. Part III		990	
		. 5111		(-017)

Form	990 (2017) FLORIDA JUSTICE ASSOCIATION 59	-1291221	Р	age 4
Pa	rt IV, Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes." complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's curre		-	
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete			
		23	х	
04-	Schedule J		 	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of	i the		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		х
	Schedule K If "No", go to line 25a	24a_		Λ
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	\sqcup	
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, an	id .		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	re		
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes	s, "		
	complete Schedule L, Part II	26	Х	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L., Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	MANAGE A	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Par			Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an o			
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
20	\cdot	29		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		}	х
0.4	contributions? If "Yes," complete Schedule M	30	\vdash	23
31	Did the organization liquidate, terminate, or dissolve and cease operations?			х
	If "Yes," complete Schedule N, Part I	31	\vdash	Λ
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32_	\vdash	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			37
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33_		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	r I	ا ا	
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entit	ty		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Щ	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization	zation?		
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes " complete Schedule R. Part VI	37	l i	X

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note. All Form 990 filers are required to complete Schedule O

Page 5

į

Form 990 (2017)

Form	990 (2017) FLORIDA JUSTICE ASSOCIATION 59-1291	221	Р	age 6
	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a		espons	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			<u> </u>
			Yes	No
12	Enter the number of voting members of the governing body at the end of the tax year 68		1.00	110
	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	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		1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1	1	
_	officer, director, trustee, or key employee?	2	 	x
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision		\vdash	<u> </u>
Ū	of officers, directors, or trustees, or key employees to a management company or other person?	3	ŀ	х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	х	
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
~	persons other than the governing body?	7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а		8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
•	organization's mailing address? If "Yes." provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and 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	Х	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		:	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
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	L	l
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶FL			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) as	/ailable	9	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X 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 policy, and	financ	ıal	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	MICHELLE EAGEN - 850-521-1037			
	218 SOUTH MONROE STREET, TALLAHASSEE, FL 32301			

6

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

(A)	(B)			(C				(D)	(E)	(F)
Name and Title	Average		not c		nore	than o		Reportable	Reportable	Estimated
	hours per					s both		compensation	compensation	amount of
	week	\vdash					, , , , , , , , , , , , , , , , , , ,	from the	from related	other
	(list any hours for	trustee or director						organization	organizations (W-2/1099-MISC)	compensation from the
	related	5 8	tee			sated		(W-2/1099-MISC)	(***2/1033-141100)	organization
	organizations	ruste	ll trus	i	yee	mpen		(** 2, 1000 1100)		and related
	below	gag	ution	ایا	oldm	st co	<u>ہ</u>			organizations
	line)	Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	Ро гтег	ļ		
(1) LAURIE J. BRIGGS	1.00									
DIRECTOR		Х						0.	0.	0
(2) RICHARD E. CHAIT	1.00									
DIRECTOR		Х				$oxed{oxed}$		0.	0.	0
(3) JASON F. LAMOUREUX	1.00							_	_	_
DIRECTOR		Х						0.	0.	0
(4) CHRISTOPHER LIGORI	1.00									_
DIRECTOR		Х				Ļ,		0.	0.	0
(5) TODD J. MICHAELS	1.00	_								
DIRECTOR		Х				Ш		0.	0.	0
(6) J. CLANCEY BOUNDS	1.00	_								•
DIRECTOR	1 00	Х						0.	0.	0
(7) VANESSA BRICE	1.00	,,						0.	0.	0
DIRECTOR (8) HUBERT R. BROWN	1.00	Х		\vdash		Н			0.	0
DIRECTOR	1.00	x						0.	0.	0
(9) PHILIP M. BURLINGTON	1.00	Ĥ		\vdash					- 0.	0
DIRECTOR	1.00	$ \mathbf{x} $						0.	0.	0
(10) THOMAS W. CAREY	1.00			\vdash		Н		Ŭ.	•	J
DIRECTOR	2,00	x	,					0.	0.	0
(11) NATHAN P. CARTER	1.00			\Box						
DIRECTOR		$ \mathbf{x} $						0.	0.	0
(12) WILLIAM T. COTTERALL	1.00	П				П				
DIRECTOR		x						0.	0.	0
(13) CLIFTON C. CURRY, JR.	1.00									
DIRECTOR		Х						0.	0.	0
(14) SHANNON DEL PRADO	1.00	$ \; $								
DIRECTOR		Х						0.	0.	0
(15) DAVID C. DISMUKE	1.00									
DIRECTOR		Х						0.	0.	0
(16) SEAN C. DOMNICK	1.00									
DIRECTOR		Х		Ш		Ш		0.	0.	0
(17) BETH WALKER FINIZIO	1.00									
DIRECTOR		X				L		0.	0.	Form 990 (20)

732007 11-28-17

Form 990 (2017)

Form 990 (2017) FLORIDA (OOSIICE	A	<u> </u>	$rac{1}{\sqrt{1}}$	<u>vi</u>	<u> 10</u>	7.4		23-12	2 J T Z	321	Page 0	
Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	l Hig	hes	t C	ompensated Employee	s (continued)				
(A)	(B)			(((D)	(E)		(F	:)	
Name and title	Average	_ر ا		Pos				Reportable	Reportable		Estim	ated	
	hours per	box	, unle:	heck r ss per	son :	s both	an	compensation	compensatio	n	amou	nt of	
	week	offi	cer an	d a d	recto	r/trus	tee)	from	from related		oth	er	
	(fist any	ector						the	organizations		comper		
	hours for	ā				pate		organization	(W-2/1099-MIS	C)	from		
	related	stee	truste			beus		(W-2/1099-MISC)		l l	organi		
	organizations below	直	onal		ploye	س <u>و</u>					and re organiz		
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former				organiz	ations	
(18) MATTHEW K. FOSTER	1.00	=	트	0	<u>×</u>	主志	<u> </u>						
DIRECTOR		X	ŀ					0.		0.		0.	
(19) BRENDA S. FULMER	1.00												
DIRECTOR		х						0.		0.		0.	
(20) RODNEY G. GREGORY	1.00											_	
DIRECTOR		х						0.		0.		0.	
(21) JAMES W. GUARNIERI, JR.	1.00												
DIRECTOR	1 22	X				_		0.		0.		0.	
(22) JAMES W. GUSTAFSON, JR.	1.00	١,,								,		0	
DIRECTOR	1 00	X	\vdash	Н	_	\vdash	_	0.		0.		0.	
(23) AMBER HALL	1.00	X						0.		0.		0	
OIRECTOR (24) SCOTT L. HENRATTY	1.00	^		\vdash		├		0.		- 		0.	
DIRECTOR	1.00	X						0.		0.		0.	
(25) JOHN H. (JACK) HICKEY	1.00	-						-		*			
DIRECTOR		х						0.		0.		0.	
(26) KIMBERLY HOGAN	1.00												
DIRECTOR		X						0.		0.		0.	
1b Sub-total							▶	0.		0.		<u> </u>	
c Total from continuation sheets to Part VI	II, Section A						▶	1,467,716.		0.		522.	
d Total (add lines 1b and 1c)							<u> </u>	1,467,716.		0.	<u>88,</u>	522.	
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable			_	
compensation from the organization												8	
										_	Ye	s No	
3 Did the organization list any former officer,		ıste	, ke	у еп	olqr	yee,	or I	highest compensated en	nployee on	-	 	لــــ∣ـــا	
line 1a? If "Yes," complete Schedule J for s					_					ŀ	3 X	+	
4 For any individual listed on line 1a, is the su and related organizations greater than \$150	-							•	ne organization	-	4 X	<u>-</u>	
5 Did any person listed on line 1a receive or a			•						lual for services	<u> </u>	 	+-1	
rendered to the organization? If "Yes." com	· ·				-						5	X	
Section B. Independent Contractors								·					
1 Complete this table for your five highest co	•									ensatı	on from		
the organization Report compensation for	the calendar ye	ear e	ndın	g w	th c	r wi	thin		ear I				
(A) Name and business	address							(B) Description of s	envices	C,	(C) Compensation		
DECINALD D. CADOLA D. A							\dashv	- Description of s	3. 1.003				

(A) Name and business address	(B) Description of services	(C) Compensation
REGINALD R. GARCIA, P.A. P.O. BOX 11069, TALLAHASSEE, FL 32302	CONSULTING	105,000.
Total number of independent contractors (including but not limited to those).	e listed above) who received more than	

Total number of independent contractors (including but not limited to those listed above)

\$100,000 of compensation from the organization ▶ 1

SEE PART VII, SECTION A CONTINUATION SHEETS

	A JUSTICE	AS	SO	CI	A'I'	10	N		59-129	1221
Part VII Section A. Officers, Directors	, Trustees, Key Er	nplo	yee:	s, an	ıd H	lighe	est	Compensated Employe	es (continued)	
(A) Name and title	(B)			(C Posi				(D) Reportable	(E) Reportable	(F) Estimated
Name and title	Average hours	 (cl		all t			W	compensation	compensation	amount of
	per week (list any hours for related	or director				Highest compensated employee	,,,_	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensatio from the organization and related
	organizations below line)	Individual trustee	Institutional trustee	Officer	Key employee	Highest com	Former			organizations
(27) JAMES R. HOLLAND, II	1.00	х						0.	0.	· 0
DIRECTOR	1 00	^	_	\dashv	\dashv			· ·	0.	
(28) CELENE HUMPHRIES DIRECTOR	1.00	x				!		0.	0.	c
(29) PETER HUNT	1.00			\vdash	\neg					
DIRECTOR	1.00	x						0.	0.	C
(30) DANIEL A. IRACKI	1.00							-		
DIRECTOR		x						0.	0.	C
(31) STEVEN R. JAFFE	1.00									
DIRECTOR	,	Х						0.	0.	C
(32) HEATHER FREEMAN JONES	1.00				ĺ			_	_	_
DIRECTOR		Х						0.	0.	C
(33) JULIE BRAMAN KANE	1.00								•	
DIRECTOR	1 00	Х		\vdash				0.	0.	C
(34) CHRISTOPHER J. KELLER	1.00							,	0.	c
DIRECTOR	1.00	X		\vdash		_		0.	0.	
(35) GLENN M. KLAUSMAN DIRECTOR	1.00	X						0.	0.	O
(36) ADAM J. LANGINO	1.00	^	_	\vdash	\neg				<u> </u>	
DIRECTOR	1.00	х						0.	0.	C
(37) JAMES L. MAGAZINE	1.00									
DIRECTOR		х						0.	0.	C
(38) DAMIAN B. MALLARD	1.00									
DIRECTOR		Х						0.	0.	C
(39) RICARDO M. MARTINEZ-CID	1.00									
DIRECTOR		X		Ш				0.	0.	0
(40) ALLISON MCMILLEN	1.00								•	_
DIRECTOR	1 00	X		\vdash	-			0.	0.	C
(41) DANIEL A. MOWREY	1.00	J							0	_
DIRECTOR	1 00	X		\dashv	\dashv	_		0.	0.	0
(42) CURRY G. PAJCIC DIRECTOR	1.00	x						0.	0.	0
(43) DARYL D. PARKS	1.00	^		\vdash	\dashv	H	_			
DIRECTOR	1.00	х						0.	0.	C
(44) H. L. (LARRY) PERRY	1.00			\vdash	\exists			- · ·	<u>~</u>	
DIRECTOR		x						0.	0.	C
(45) SKIP PITA	1.00			T	\exists					
DIRECTOR		х	L					0.	0.	C
(46) MATTHEW N. POSGAY	1.00									
		Х		1			l	0.	0.	C

۲.

	JUSTICE									1221
Part VII Section A. Officers, Directors, Tru	istees, Key Er	npic	yee	s, ar	nd H	ligh	est (Compensated Employe	es (continued)	
(A) Name and title	(B) Average			(C Posi	c) tion			(D) Reportable	(E) Reportable	(F) Estimated amount of
	hours per week (list any hours for related organizations below line)	stee or director	heck trustee		Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(47) ANTHONY QUACKENBUSH DIRECTOR	1.00	х						0.	0.	0.
(48) TROY RAFFERTY DIRECTOR	1.00	х						0.	0.	0.
(49) HERMAN J. RUSSOMANNO, III DIRECTOR	1.00	X						0.	0.	0 .
(50) GLORIA SEIDULE	1.00	X						0.	0.	0.
DIRECTOR (51) KERRI C. SMITH	1.00								_	
DIRECTOR (52) BRENT G. STEINBERG	1.00	X						0.	0.	0
DIRECTOR (53) WAYLON THOMPSON	1.00	Х						0.	0.	0
DIRECTOR (54) HENDRIK UITERWYK	1.00	Х						0.	0.	0
DIRECTOR		х	<u> </u>					0.	0.	0
(55) A. DANIEL VAZQUEZ DIRECTOR	1.00	Х						0.	0.	0
(56) BERNARD F. WALSH DIRECTOR	1.00	х						0.	0.	0
(57) STEPHEN WATREL DIRECTOR	1.00	х						0.	0.	0
(58) JEANMARIE WHALEN	1.00	х						0.	0.	0
(59) JASON K. WHITTEMORE	1.00	X						0.	0.	0
(60) GREGORY M. YAFFA	1.00									
DIRECTOR (61) O. MARK ZAMORA	1.00	X		\dashv				0.1	0.	0
DIRECTOR (62) EDWARD H. ZEBERSKY	1.00	Х		\dashv	\dashv	_		0.	0.	0
DIRECTOR (63) PAUL D. JESS	45.00	Х		\dashv	-			0.	0.	0
EXECUTIVE DIRECTOR (64) DALE M. SWOPE	1.00			Х				292,976.	0.	18,423
IMMEDIATE PAST PRESIDENT				Х				0.	0.	0
(65) LAKE H. LYTAL, III PRESIDENT	1.00			х				0.	0.	0
(66) TIFFANY M. FADDIS	1.00			х				0.	0.	0

4.

(A) Name and title	Form 990 FLORIDA	JUSTICE	ΑS	SSC	CI	ΑT	'IC	N		59-129	1221
Name and title	Part VII Section A. Officers, Directors, Tr	rustees, Key Er	nplo	yee	s, a	nd F	ligh	est	Compensated Employe	es (continued)	
week		Average hours	(с	(C) Position					Reportable compensation	Reportable compensation	Estimated amount of
TREASURER (68) LESLIE MITCHELL KROEGER (70) JEFF PORTER POLITICAL DIRECTOR (71) KEVIN SWEENY POLITICAL DIRECTOR (72) JOHN BRAZZELL PORTEY EXCIDENCE OR		week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	ОИнсег	Key employee	Highest compensated employee	Former	the organization	organizations	compensation from the organization and related organizations
PRESIDENT-ELECT (69) JEFF PORTER POLITICAL DIRECTOR (70) ROS PAULK (70) ROS PAULK (71) KEVIN SWEENY POLITICAL DIRECTOR (71) REVIN SWEENY POLITICAL DIRECTOR (72) JOHN BRAZZELL DEPUTY EXEC DIRECTOR 4 GEN (74) STEVE STEWART FORMER FINANCE DIRECTOR (75) DEBRA HENLEY PORMER EXEC DIRECTOR (76) DEBRA HENLEY PORMER EXEC DIRECTOR (77) DEBRA HENLEY PORMER EXEC DIRECTOR (78) DEBRA HENLEY PORMER EXEC DIRECTOR (79) DEBRA HENLEY PORMER EXEC DIRECTOR (70) ROS PAULK (70) DEBRA HENLEY PORMER EXEC DIRECTOR (71) REVIN SWEENY (72) JOHN BRAZZELL (73) G. MURRAY (74) STEVE STEWART (75) DEBRA HENLEY PORMER EXEC DIRECTOR (76) DEBRA HENLEY PORMER EXEC DIRECTOR (77) DEBRA HENLEY PORMER EXEC DIRECTOR (78) DEBRA HENLEY PORMER EXEC DIRECTOR (79) ROS PAULK (79) DEBRA HENLEY PORMER EXEC DIRECTOR (79) ROS PAULK (79) DEBRA HENLEY PORMER EXEC DIRECTOR (79) ROS PAULK (79) DEBRA HENLEY PORMER EXEC DIRECTOR (79) DEBRA HENLEY PORMER EXEC DIRECTOR (79) DEBRA HENLEY PORMER EXEC DIRECTOR (79) ROS PAULK (79) DEBRA HENLEY PORMER EXEC DIRECTOR (79) ROS PAULK (71) REVIN SWEENY (70) DEBRA HENCH (71) DEBRA HENCH (71) DEBRA HENCH (71) DEBRA HENCH (79)		1.00			х				0.	0.	0
(69) JEFF PORTER 40.00		1.00	-		X				0.	0.	0
(70) ROB PAULK UND DEVELOPMENT DIRECTOR (71) KEVIN SWEENY POLITICAL DIRECTOR (72) JOHN BRAZZELL 40.00 EVERTY EXEC DIRECTOR 4 GEN (73) G.C. MURRAY PORTOR FINANCE DIRECTOR (75) DEBRA HENLEY PORMER FINANCE DIRECTOR (75) DEBRA HENLEY PORMER EXEC DIRECTOR (75) DEBRA HENLEY PORMER EXEC DIRECTOR (75) DEBRA HENLEY PORMER EXEC DIRECTOR (76) DEBRA HENLEY PORMER EXEC DIRECTOR (77) DEBRA HENLEY PORMER EXEC DIRECTOR (78) DEBRA HENLEY PORMER EXEC DIRECTOR (79) DEBRA HENLEY PORMER EXECUTED D		40.00				x					15,058
(71) KEVIN SWEENY	(70) ROB PAULK	40.00	Π								13,407
146,334. 0. 3,1	(71) KEVIN SWEENY	40.00				<u> </u>	x				
(73) G.C. MURRAY DEPUTY GENERAL COUNSEL (74) STEVE STEWART PORMER FINANCE DIRECTOR (75) DEBRA HENLEY PORMER EXEC DIRECTOR (75) DEBRA HENLEY PORMER EXEC DIRECTOR (76) DEBRA HENLEY DEPUTY AND ARROWS AND ARRO	(72) JOHN BRAZZELL	40.00			ļ						3,106
120,266. 0. 15,00	(73) G.C. MURRAY	40.00									
(75) DEBRA HENLEY	(74) STEVE STEWART	40.00									
	(75) DEBRA HENLEY	45.00	-				^	x			15,065
	Julie Billion							-	133,343.	<u> </u>	
	· · · · · · · · · · · · · · · · · · ·										
				\vdash							
			\vdash								<u> </u>
	···										
		-									
Total to Part VII, Section A, line 1c 1, 467, 716. 88, 53	Total to Part VII. Section A. line 1.	_1	!	l					1,467,716.		88,522

1,

1			Check if Schedule O conta	ains a response	or note to any iin	(A)	(B)	(C)	(D) Revenue excluded
						Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts s	1	а	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		b	Membership dues	1b					
2 3		С	Fundraising events	1c]			
業月		d	Related organizations	1d					
S,E		е	Government grants (contributi	ons) 1e					
ē		f	All other contributions, gifts, grant	ts, and					
# E			similar amounts not included above	/e 1f	21,809.				
들		g	Noncash contributions included in lines	la-1f \$					
<u>ರಿ ಕ</u>		h	Total. Add lines 1a-1f			21,809.			
					Business Code				<u> </u>
9	2	а	EAGLE DISTRIBUT	IONS		1,816,893.			
Program Service Revenue		b	MEMBERSHIP DUES			1,365,572.			
š I		C	CLE SEMINARS		611600	790,116.	790,116.		
le V			LEGISLATIVE RET		900099	59,228.	59,228.		
<u>6</u> 4		е	CLE VIDEO & AUD	10	611710	51,337.	51,337.		
ਕ∣		f	All other program service reve	nue	L	1 222 116			
_		g	Total. Add lines 2a-2f			4,083,146.			
	3		Investment income (including	dividends, intere	est, and				7 010
			other similar amounts)		•	7,818.		-	7,818.
	4		Income from investment of tax	exempt bond p	proceeds	4 507			4 507
	5	1	Royalties			4,507.			4,507.
				(i) Real	(II) Personal	Ì			
	6	а	Gross rents	26,000.					
			Less rental expenses	38,966.					
				<12,966.		<12,966.>		<12,966.>	
	_		Net rental income or (loss)	() ()	6) 045 47	<u> </u>		12,300.2	
	7	а	Gross amount from sales of	(i) Securities	(iı) Other				
		L	assets other than inventory						
		D	Less cost or other basis				•		
		_	and sales expenses		 				
			Gain or (loss) Net gain or (loss)	L					
			Gross income from fundraising	a ovente (not					
e l	•	а	including \$	of					
Revenue			contributions reported on line						
			Part IV, line 18	10, 000					
Other		b	Less direct expenses	b					
ŏ			Net income or (loss) from fund						
	9		Gross income from gaming ac	-					
}	_	_	Part IV, line 19	а					
		ь	Less direct expenses	b		1		<u> </u>	
			Net income or (loss) from gam		•				
	10		Gross sales of inventory, less i						
ļ	•		and allowances	а					
1		b	Less cost of goods sold						
			Net income or (loss) from sales		>				
Ī			Miscellaneous Revenue		Business Code				
1	11	а	ADMIN FEES (FJA		541900	460,000.		460,000.	
}			MISCELLANEOUS		900099	96,271.	96,271.		
- 1			ADMIN FEES (TLE	L)	541900	93,789.		93,789.	
			All other revenue		541800	70,820.	2,500.	68,320.	
ı		е	Total. Add lines 11a-11d		>	720,880.		,	
- 1	12		Total revenue See instructions.			4,825,194.	4,181,917.	609,143.	12,325.

732009 11-28-17

Form 990 (2017) FLORIDA JUSTI Part IX Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must comp			mplete column (A).	
	Check if Schedule O contains a respon		(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21	``			
2	Grants and other assistance to domestic	4 640			
	individuals See Part IV, line 22	4,612.			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				<u></u>
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	007 725		,	
_	trustees, and key employees	897,735.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
-	persons described in section 4958(c)(3)(B) Other salaries and wages	1,222,455.			
7	Pension plan accruals and contributions (include	1,222, 333.		-	
8	section 401(k) and 403(b) employer contributions)	53,044.			
	Other employee benefits	162,844.			
9 10	Payroll taxes	142,008.			
11	Fees for services (non-employees)	222,0001			
''	Management				
b	Legal	*			
c	Accounting	30,275.	·		
d		331,926.			
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	20,262.			
g	Other (If line 11g amount exceeds 10% of line 25,				
_	column (A) amount, list line 11g expenses on Sch O.)	229,201.			
12	Advertising and promotion				
13	Office expenses	88,882.			
14	Information technology	152,529.			
15	Royalties				
16	Occupancy	75,488. 117,991.			
17	Travel	117,991.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	220,278.			
20	Interest	7,278.			
21	Payments to affiliates	70 420			
22	Depreciation, depletion, and amortization	79,438.			
23	Insurance	80,185.			
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 0)				
а	COST OF CLE SEMINARS	235,680.			
b	LEGISLATIVE RETREAT EXP	110,699.			
c	MEDIA	73,750.			
d	COST OF THE JOURNAL	71,907.			
е	All other expenses	193,504.			
25	Total functional expenses Add lines 1 through 24e	4,601,971.			
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 If following SOP 98-2 (ASC 958-720)				5 000 (2247)

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing /	985,446.	1	615,658
2	Savings and temporary cash investments	269,840.	2	569,342
3	Pledges and grants receivable, net	_	3	
4	Accounts receivable, net	17,77 <u>6.</u>	4	17,52
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
Ì	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
Ì	employers and sponsoring organizations of section 501(c)(9) voluntary			
3	employees' beneficiary organizations (see instr) Complete Part II of Sch L	952,165.	6	893,41
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	76,899.	9	83,13
10a				
	basis Complete Part VI of Schedule D 10a 2,728,948.	260 000		222.66
Ь	Less accumulated depreciation 10b 1,790,281.	960,089.	10c	938,66
11	Investments · publicly traded securities	29,092.	11	
12	Investments - other securities See Part IV, line 11		12	
13	Investments · program-related See Part IV, line 11		13	
14	Intangible assets	14.050	14	14 22
15	Other assets See Part IV, line 11	14,959.	15	14,33
16	Total assets. Add lines 1 through 15 (must equal line 34)	3,306,266.	16	3,132,07
17	Accounts payable and accrued expenses	349,277.	17	436,66
18	Grants payable	700 000	18	E07 03
19	Deferred revenue	728,992.	19	597,93
20	Tax-exempt bond liabilities	 	20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons			
22	Complete Part II of Schedule L	205 066	22	220 61
23	Secured mortgages and notes payable to unrelated third parties	285,966.	23	230,61
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			,
	parties, and other liabilities not included on lines 17-24) Complete Part X of	511,208.	25	212,82
	Schedule D	1,875,443.	25 26	1,478,03
26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ► X and	T,013,443.	20	I, I, O, UJ
	<u> </u>			
07	complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	1,430,823.	27	1,654,04
27	_	1,30,023+	28	1,001,01
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets Organizations that do not follow SEAS 117 (ASC 959) check here.		23	
:	Organizations that do not follow SFAS 117 (ASC 958), check here			
30	and complete lines 30 through 34.		30	
30	Capital stock or trust principal, or current funds		31	
31	Paid-in or capital surplus, or land, building, or equipment fund		32	
27 28 29 30 31 32	Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	1,430,823.	33	1,654,04
33	[3,306,266.	34	3,132,07
34	Total liabilities and net assets/fund balances	3,300,2001	34	Form 990 (2

Form	990 (2017) FLORIDA JUSTICE ASSOCIATION	59-	1291221	Page 12
Pa	rt XI Reconciliation of Net Assets		_	
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,194.
2	Total expenses (must equal Part IX, column (A), line 25)	2		L,971.
3	Revenue less expenses Subtract line 2 from line 1	3		3,223.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,430),823.
5	Net unrealized gains (losses) on investments	` 5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
_	column (B))	10	1,654	1,046.
Pa	t XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII		***	X
				Yes No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			1 1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	.	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		1 1
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis		-	
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,		1 1
	consolidated basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis			1
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,		<u></u>
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Aud	r	
	Act and OMB Circular A-133?		3a	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audi		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
			Form	990 (2017)

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

 Section 501(c)(4), (5), or (6) organizat 	ions Complete Part III			
Name of organization			Emp	loyer identification number
FLORIDA	JUSTICE ASSOCIA	TION		59-1291221
Part I-A Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527 or	ganization.
 Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai 	ures	cal campaign activities	ın Part IV ▶ \$	3
Part I-B Complete if the org	anization is exempt und	ler section 501(c)	(3).	
1 Enter the amount of any excise tax			· · · · · · · · · · · · · · · · · · ·)
2 Enter the amount of any excise tax	• •			
3 If the organization incurred a section	, -			Yes No
4a Was a correction made?		,		Yes No
b If "Yes," describe in Part IV				
Part I-C Complete if the org	anization is exempt und	er section 501(c),	, except section 501(c	:)(3).
1 Enter the amount directly expended	by the filing organization for se	ection 527 exempt fund	ction activities > \$	S
2 Enter the amount of the filing organ	ization's funds contributed to of	ther organizations for s	ection 527	
exempt function activities			▶ \$	
3 Total exempt function expenditures	Add lines 1 and 2 Enter here a	and on Form 1120-POL	-,	
line 17b			▶ \$	Yes No
4 Did the filing organization file Form	1120-POL for this year?			☐ Yes ☐ No
5 Enter the names, addresses and emmade payments. For each organizate contributions received that were propolitical action committee (PAC). If a	tion listed, enter the amount pai omptly and directly delivered to	d from the filing organi a separate political org	zation's funds. Also enter the janization, such as a separat	e amount of political
		_		T
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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

Schedule C (Form 990 or 990-EZ) 2017

LHA

732041 11-09-17

Schedule C (Form 990 or 990-EZ) 2017 FI Part II-A Complete if the organ	ORIDA JUS	TICE ASSOCI	ATION n 501(c)(3) and file	59-: d Form 5768 (el	1291221 Page 2 ection under
section 501(h)).					
A Check ▶ ☐ If the filing organization	belongs to an aff	iliated group (and list ii	n Part IV each affiliated (group member's nam	ne, address, EIN,
expenses, and share o	f excess lobbying	expenditures)			
B Check 🕨 🔲 if the filing organization	checked box A a	nd "limited control" pro	ovisions apply		
Limits o (The term "expenditu	n Lobbying Expe res" means amou)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence	ce public opinion (arass roots lobbying)			
b Total lobbying expenditures to influence					
c Total lobbying expenditures (add lines	_	ay (ancor lossying)	ļ l		
d Other exempt purpose expenditures	Ta and To,				
e Total exempt purpose experiationes	dd lines 1c and 1c	4\		-	
f Lobbying nontaxable amount Enter th			h columns		
					
If the amount on line 1e, column (a) or (b)		bying nontaxable are	11		
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000,00		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500,000		00 plus 10% of the exc	i I		
Over \$1,500,000 but not over \$17,000		00 plus 5% of the exce	ss over \$1,500,000		
Over \$17,000,000	\$1,000	,000			
g Grassroots nontaxable amount (enter	25% of line 1f)				
h Subtract line 1g from line 1a If zero or	•		<u> </u>		_
i Subtract line 1f from line 1c If zero or					
If there is an amount other than zero of	· ·	line 1. did the organiz	ation file Form 4720		<u> </u>
reporting section 4911 tax for this yea		ine ii, did the organiz	41011 IIIC 1 01111 4120		Yes No
reporting acousti 40 17 tax for this year		eraging Period Under	section 501(h)		
(Some organizations that	made a section 5	01(h) election do not	have to complete all o	f the five columns b	elow.
		ate instructions for li			
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					1
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form 990 or 990-EZ) 2017 FLORIDA JUSTICE ASSOCIATION 59-1291221 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

—— For e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(i	b)
	e lobbying activity	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?	 			
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?		<u> </u>		
f	Grants to other organizations for lobbying purposes?		ļ		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		ļ		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		ļ		
i	Other activities?				
j	Total Add lines 1c through 1i				
	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				
C	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?	- FO4/-\/	<u> </u>	A	
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 504(c)(4)	ո 501(Ե)(:	ە), or sec	tion	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	e prior year	⁷ 3	Ain-	X
Par	t III-B Complete if the organization is exempt under section 501(c)(4), sectio 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				3 ie
	answered "Yes."	110, 011			
1	Dues, assessments and similar amounts from members		1	3,182	2,465.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	cal			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		3,212.
b	Carryover from last year		2b		1,453.
c	Total		2c		7,665.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	681	L,402.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pro-	olitical			
	expenditure next year?		4	1,856	<u>5,263.</u>
	Taxable amount of lobbying and political expenditures (see instructions)	1	5		
Par		.			
Provi	de 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 a	nd 2 (see	
ınstn	uctions), and Part II-B, line 1 Also, complete this part for any additional information				

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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. ➤Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

FLORIDA JUSTICE ASSOCIATION

Employer identification number 59-1291221

Pa	til Organizations Maintaining Donor Advise		Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, Iin	e 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)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advised	funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be us	ed only
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose coi	nferring
	impermissible private benefit?		Yes No
Pa	till Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, Pa	rt IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a histori	cally important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form of	a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rela	eased, extinguished, or terminated by the or	ganization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	ement is located >	
5	Does the organization have a written policy regarding the per	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conser	vation easements during the year
			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation	n easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense sta	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ion's financial statements that describes the	organization's accounting for
	conservation easements	·	
<u> Pai</u>	tillij Organizations Maintaining Collections of	Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue statemer	it and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	ibition, education, or research in furtherance	e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	oes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement an	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	lucation, 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		► \$ ► \$
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financial ga	
	the following amounts required to be reported under SFAS 1:	=	
а	Revenue included on Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		▶ \$
	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.	Schedule D (Form 990) 2017

732051 10-09-17

		JUSTICE AS							91221	
Pa	tillij Organizations Maintaining C	ollections of Ar	t, Hist	orical Tre	asures, o	r Othe	r Simila	r Assets	(continu	ed)
3	Using the organization's acquisition, accessi	on, and other records	s, check	any of the f	ollowing tha	t are a si	gnificant ι	ise of its c	ollection it	ems
	(check all that apply)									
а	Public exhibition	d		Loan or exc	hange progr	ams				
b	Scholarly research	e		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how th	ey further th	ie organizatio	on's exen	npt purpo	se ın Part	XIII	
5	During the year, did the organization solicit of					er sımılar	assets		_	
	to be sold to raise funds rather than to be ma								Yes	No_
Pai	Escrow and Custodial Arran		ete if the	organizatio	n answered	"Yes" on	Form 990), Part IV,	line 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	an or other intermed	ary for	contributions	s or other as:	sets not i	ıncluded		-	
	on Form 990, Part X?								」Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing t	able						
	_								Amount	
С.	Beginning balance						1c			
d	Additions during the year						1d	_		
e	Distributions during the year						1e 1f			
f O-	Ending balance Did the organization include an amount on F-	orm COA Bort V line	21 for	OCCEON OF CH	etodial acco	unt kabili			Yes	No
	If "Yes," explain the arrangement in Part XIII	•					ity [,]		_ 162	= "
Par							10			
1.4		(a) Current year		Prior year	(c) Two yea		(d) Three	ears back	(e) Four y	ears back
1a	Beginning of year balance	(a) continue your	(0).	no. you.	(6) / 110 / 120	caux	(4) 1100	ouro bush	107.00.	
b	Contributions									
c	Net investment earnings, gains, and losses									
ď	Grants or scholarships			-						
е	Other expenditures for facilities						·			
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g	g, column (a)) held as					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organiza	tion tha	t are held an	id administei	red for th	e organiza	ation	_	
	by								<u> </u>	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(II)	_
Ь	If "Yes" on line 3a(ii), are the related organization	•							3b	
4 IDos	Describe in Part XIII the intended uses of the		wment f	unds						
rai	t _t VI∎ Land, Buildings, and Equipm		D-4 II.	/ lun 11 - C) Dad V	h 10			
	Complete if the organization answere								(-1) D1-	
	Description of property	(a) Cost or o		(b) Cost basis			ccumulate preciation	ea	(d) Book	value
	Lond	Dasis (investin	ioni)		8,500.	00	p. colation		258	,500.
	Land				$\frac{3,300.}{2,975.}$	1 (069,0	32.		,943.
	Buildings Leasehold improvements				2,827.		108,7			,110.
	Equipment				3,572.		82,1			,447.
	Other				1,074.		530,4			,667.
_	. Add lines 1a through 1e (Column (d) must e	gual Form 990 Part	X colun	•			,,-	•		,667.

Schedule D (Form 990) 2017

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED VACATION AND SICK LEAVE	212,823.
(3)	
(4)	
(5)	
(6)	
(8)	
(9)	
Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.)	212,823.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2017

59-1291221 Page 4 FLORIDA JUSTICE ASSOCIATION Schedule D (Form 990) 2017 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 4,864,160. Total revenue, gains, and other support per audited financial statements 1 1 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains (losses) on investments 2a b Donated services and use of facilities 2b c Recoveries of prior year grants 2c 38,966. d Other (Describe in Part XIII) 2d 38,966. e Add lines 2a through 2d 2e 4,825,194. 3 3 Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990. Part VIII, line 7b 4h b Other (Describe in Part XIII) c Add lines 4a and 4b 4с 4.825 Total revenue Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 4,640,937. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities 2a 2b b Prior year adjustments c Other losses 2c 38,966. 2d d Other (Describe in Part XIII) 38,966. e Add lines 2a through 2d 2e 4,601,971. 3 Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 4b **b** Other (Describe in Part XIII) 0. c Add lines 4a and 4b 4c 5 601 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental 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 XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information PART X, LINE 2: FJA UTILIZES THE ACCOUNTING REQUIREMENTS ASSOCIATED WITH UNCERTAINITY IN INCOME TAXES USING THE PROVISIONS OF FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ASC 740, INCOME TAXES. USING THAT GUIDANCE, TAX POSITIONS INITIALLY NEED TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS WHEN IT IS MORE-LIKELY-THAN-NOT THE POSITIONS WILL BE SUSTAINED UPON EXAMINATION BY THE TAX AUTHORITIES. IT ALSO PROVIDES GUIDANCE FOR DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURE AND TRANSITION. AS OF DECEMBER 31, 2017, FJA HAS NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATMENTS.

Schedule D (Form 990) 2017 FLORIDA JUSTICE ASSOCIATION	59-1291221 Page 5
Schedule D (Form 990) 2017 FLORIDA JUSTICE ASSOCIATION Part XIII Supplemental Information (continued)	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
RENTAL EXPENSES	38,966.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
THE HILL BE OTHER TEROPORTION IN	·
RENTAL EXPENSES	38,966.
	-
· · · · · · · · · · · · · · · · · · ·	

Schedule D (Form 990) 2017

Department of the Treasury Internal Revenue Service SCHEDULE (Form 990)

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

► Go to www.irs.gov/Form990 for the latest information. ► Attach to Form 990.

OMB No 1545-0047

Employer identification number 59-1291 FLORIDA JUSTICE ASSOCIATION Name of the organization

1 General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection
the use of crant funds in the United States
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
ime and address of organization (b) EIN (c) IRC section (d) Amount of (f applicable) cash grant
·
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
for Form 990

Page 2

59-1291221

Schedule I (Form 990) (2017) FLORIDA JUSTICE ASSOCIATION

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
AWARDS	6	0	4 612 PMV		ROPHIES
			,		
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	luired in Part I, lin	e 2, Part III, column	(b), and any other ac	Iditional information	
			٠		
	i i				

Schedule I (Form 990) (2017)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury Internal Revenue Service

FLORIDA JUSTICE ASSOCIATION

Employer identification number 59-1291221

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	<u> </u>
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	L.
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III			
	X Compensation committee X Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			2
	organization or a related organization		<u>x</u>	
	Receive a severance payment or change-of-control payment?	4a	X	\vdash
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
-	contingent on the revenues of		=	
а	The organization?	5a		
	Any related organization?	5b		
-	If "Yes" on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
-	contingent on the net earnings of			
а	The organization?	6a		
	Any related organization?	6b		
	If "Yes" on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		
LHA		le J (Forn	n 990)	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 J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i) (iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of	W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(n) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)·(b)	in column (B) reported as deferred on prior Form 990
(1) PAUL D. JESS	Ξ	289,792.	512.	2,672.	0	18,423.	311,399.	0
EXECUTIVE DIRECTOR	Ξ	0			• 0			0.
(2) JEFF PORTER	Θ	250,000.	5,512.	12,240.	• 0	15,058.	282,810.	0.
TICAL DIRECTOR	▣				0			.0
(3) ROB PAULK	Ξ	270,530.	18,00	1,584.	0	~ 13,407.	303,527.	0.
FUND DEVELOPMENT DIRECTOR	(ii)			0	• 0	• 0	0	0
(4) DEBRA HENLEY	(1)	110,857.	0.	29,092.	• 0	0	139,949.	0
FORMER EXEC DIRECTOR	Œ	0.	0.	• 0	• 0	0	0	0
	(i)							
	[m]							
	Θ							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	(iii)							
	(!)							
	Ξ	•						
	(1)							
	3							
	Ξ							
	3							
	Ξ							
	Ξ							
	Ξ							
	≞							
	Ξ							
	Ξ							
	Ξ							
	▣							
	Ξ							
	▣							
772315 10.17.17							Schedu	Schedule J (Form 990) 2017

59-1291221

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

INE 1A:	THE ORGANIZATION PAID SOCIAL CLUB DUES FOR PAUL JESS AND JEFF PORTER.	INES 4A-B:	DEBRA HENLEY RECEIVED A SEVERANCE PAYMENT OF \$110,857 AND A CASH OUT OF HER	NONQUALIFIED RETIREMENT PLAN IN THE AMOUNT OF \$29,092.								Schedule J (Form 990) 2017
PART I, LINE 1A:	THE ORGANIZATION P	PART I, LINES 4A-B:	DEBRA HENLEY RECEI	NONQUALIFIED RETIR					:			

SCHEDULE L

Transactions With Interested Persons

(Form 990 or 990-EZ)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

2017

OMB No 1545-0047

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

➤ Go to www.irs.gov/Form990 for instructions and the latest information.

Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)

Open To Public Inspection

Name of t	ne organization
-----------	-----------------

FLORIDA JUSTICE ASSOCIATION

Employer identification number 59-1291221

Complete if the organization	n answered "Yes" on Form 990, Part IV, I	ine 25a or 25b, or Form 990-EZ, Part V, line 40b		
1,,,,	(b) Relationship between disqualified	(-) December of Assessment	(d) Cor	rected?
(a) Name of disqualified person	person and organization	(c) Description of transaction	Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958

\$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization

reported an amount on Form 990, Part X, line 5, 6, or 22
Name of (b) Relationshin (c) Purpose (d) Loan

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	fror	oan to or n the szation?	(e) Original principal amount	(f) Balance due	(g) defa		(h) Ap by bo comm	ard or	(ı) W agreei	
			То	From			Yes	No	Yes	No	Yes	No
EAGLE	OWNER	ADMINIST		Х	0.	105,126.		Х		Х		Х
EAGLE	OWNER	DISTRIBU		X	0.	178,536.		X		Х		Х
EAGLE	OWNER	PLEDGES		Х	0.	359,267.		Х		Х		Х
FLORIDA JUSTICE	COMMON B	TO FUND		Х	275,000.	250,483.		Х	Х			Х
FLORIDA JUSTICE	COMMON B	ADMINIST	Х	Ĺ	3,190.	0.		Х		Х		Х
					_		L					
												<u> </u>
Total	•				▶ \$	893,412.						

Part III Grants or Assistance Benefiting Interested Persons.

 	n answered "Yes" on Form 990, Pa			1 (15 (
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
			-	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2017

SEE PART V FOR CONTINUATIONS

732131 10-18-17

14341211 794202 45-01817.000

Schedule L (Form 990 or 990-EZ) 2017 FLORID	A JUSTICE ASSOCIATIO	N	59-1291	.221	Page 2
Part IV Business Transactions Involv					
(a) Name of interested person	"Yes" on Form 990, Part IV, line 28a, 21 (b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	aring of zation's
				Yes	No
		-			
		_	_		
				├	ļ
	-				
Part V Supplemental Information					
Provide additional information for response	onses to questions on Schedule L (see i	nstructions)			
SCHEDULE L, PART II, LOANS	TO AND FROM INTERES	TED PERSONS	S:		
(A) NAME OF PERSON: EAGLE					
(C) PURPOSE OF LOAN: ADMIN	TSTRATIVE EXPENSES R	EIMBURSABLE	2		
(C) TORTODE OF BOILT. IDEATH	IDITATIVE EMPERORS	.BIIIBOIIBII	<u> </u>		
(A) NAME OF PERSON: EAGLE					
(11) THE OF THEORY BRODE					
(C) PURPOSE OF LOAN: DISTR	IBUTIONS RECEIVABLE				
-					
(A) NAME OF PERSON: EAGLE		<u>-</u>			
(a) DUDDOGE OF LOWE DIEDO	EC DECETUADIE				
(C) PURPOSE OF LOAN: PLEDG	ES RECEIVABLE	 			
(1) OF DEPOSIT FLORED					
(A) NAME OF PERSON: FLORID	A JUSTICE PAC				
(B) RELATIONSHIP WITH ORGA	NIZATION: COMMON BOA	RD			
			-		
(C) PURPOSE OF LOAN: TO FU	ND OPERATING EXPENSE	S			
		-			
(A) NAME OF PERSON: FLORID	A JUSTICE PAC				
(B) RELATIONSHIP WITH ORGA	NIZATION: COMMON BOA	RD			
(C) PURPOSE OF LOAN: ADMIN	ISTRATIVE EXPENSES R	EIMBURSABLE	<u> </u>		

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

➤ Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public

Inspection Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service Employer identification number Name of the organization 59-1291221 FLORIDA JUSTICE ASSOCIATION FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS MEMBERS. FORM 990, PART VI, SECTION A, LINE 7A: THE ORGANIZATION'S MEMBERS ELECT THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION A, LINE 7B: RECOMMENDATIONS BY THE GOVERNING BODY TO AMEND THE ARTICLES OF INCORPORATION OR THE BYLAWS MUST BE APPROVED BY A TWO-THIRDS' (2/3) VOTE OF THE MEMBERS PRESENT AT ANY MEETING OF THE MEMBERSHIP. FORM 990, PART VI, SECTION B, LINE 11B: THE ORGANIZATION POSTS THE RETURNS ON A SECURE WEBSITE AND INFORMS THE GOVERNING BODY THEY ARE READY TO REVIEW. THEY HAVE A WEEK TO REVIEW THE RETURNS UNLESS THERE ARE QUESTIONS, WHICH WILL EXTEND THE TIME THEY ARE ABLE TO REVIEW. FORM 990, PART VI, SECTION B, LINE 12C: BOARD OF DIRECTORS SIGN A STATEMENT THAT THEY WILL COMPLY WITH THE CONFLICT OF INTEREST POLICY. ANY POTENTIAL CONFLICT IS TO BE REVIEWED BY THE RELEVANT COMMITTEE AND BROUGHT BEFORE THE BOARD OF DIRECTORS FOR REVIEW. FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE DIRECTOR'S COMPENSATION IS DETERMINED BY THE BUDGET ADOPTED BY THE BOARD OF DIRECTORS AND IS INCLUDED IN HIS WRITTEN EMPLOYMENT

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 732211 09-07-17

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

AGREEMENT.

SCHEDULE R (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

Parti

Related Organizations and Unrelated Partnerships

Complete of the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

OMB No 1545-0047

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33

FLORIDA JUSTICE ASSOCIATION

2017 Open to Public Inspection Employer identification number 59-1291221

	1						
(a)	(q)	(၁)	(P)	(e)		£	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	e End-of-year assets		Direct controlling entity	
							}
				· · · 			
Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year	tions. Complete if the organization a	nswered "Yes" on Form 990,	Part IV, line 34, be	cause it had one	or more related tax-exer	mpt	
(a)	(9)	(၁)	(p)	(e)	(£)	(6) (6)	
Name, address, and EIN	Primary activity	Legal domicile (state or	ge	Public charity	Direct controlling	Section 512(b) controlled	(b)(13) led
of related organization		foreign country)	section	status (if section	entity	entify?	,
				501(c)(3))		Yes	S.
FLORIDA JUSTICE ASSOCIATION RESEARCH &							
EDUCATION FOUNDATION, INC - 59-314472, 218			<u>.</u>	170(B)(1)	FLORIDA JUSTICE		
SOUTH MONROE STREET, TALLAHASSEE, FL 32301	CHARITY AND RESEARCH	FLORIDA	501(C)(3)	(A)(VI)	ASSOCIATION	×	
FLORIDIANS FOR PATIENT PROTECTION -	EDUCATE THE PUBLIC						
01-0640014, 218 SOUTH MONROE STREET,	REGARDING PATIENT ADVOCACY						
TALLAHASSEE, FL 32301	& RIGHTS	FLORIDA	501(C)(4)				×

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

732161 09-11-17 LHA

Schedule R (Form 990) 2017

×

×

LORIDA JUSTICE SSOCIATION

501(C)(4)

PLORIDA

FAMILY PROTECTION ISSUES EDUCATE THE PUBLIC ABOUT

59-3424396, 218 SOUTH MONROE STREET COALITION FOR FAMILY SAFETY, INC

FLORIDA JUSTICE PAC - 59-1810894

TALLAHASSEE, FL 32301

218 SOUTH MONROE STREET TALLAHASSEE, FL 32301

527

PLORIDA

POLITICAL ORGANIZATION

59-1291221

FLORIDA JUSTICE ASSOCIATION

Schedule R (Form 990)

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	 2(b)(13) alled alton?
				501(c)(3))		Yes	Š
TRIAL LAWYER EMAIL LIST, INC - 59-2701463	NETWORKING OPPORTUNITY FOR						
218 SOUTH MONROE STREET	LAWYERS TO SHARE BEST				FLORIDA JUSTICE		
TALLAHASSEE, FL 32301	PRACTICES	FLORIDA	501(C)(6)		ASSOCIATION	×	
ACADEMY OF FLORIDA TRIAL LAWYERS -							:
59-2689373, 218 SOUTH MONROE STREET,							
TALLAHASSEE, FL 32301	EDUCATE THE PUBLIC	FLORIDA	501(C)(6)				×
CENTRAL FLORIDA CITIZENS FOR JUSTICE -							
45-5343455, 218 SOUTH MONROE STREET,							
TALLAHASSEE, FL 32301	POLITICAL ORGANIZATION	FLORIDA	527				×
NORTH FLORIDA CITIZENS FOR JUSTICE -							
45-5343516, 218 SOUTH MONROE STREET,							
TALLAHASSEE, FL 32301	POLITICAL ORGANIZATION	FLORIDA	527				×
SOUTH FLORIDA CITIZENS FOR JUSTICE -							
45-5343587, 218 SOUTH MONROE STREET,							
	POLITICAL ORGANIZATION	PLORIDA	527				×
L ac							
ATC TO SOUTH THE THE SOUTH							
HI.O.							
FT LAUDERDALE, FL 33301	POLITICAL ORGANIZATION	FLORIDA	527				×
		-					
	T						
	γ						
	T-						
	+						
	, ^						
	T						
	.						

34

59-1291221

Page 2

Schedule R (Form 990) 2017 FLORIDA JUSTICE ASSOCIATION

Part III) Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year

(k)	General or Percentage managing ownership					80.00%								10.4-1-2
9	aneral or anaging artner?	Yes No				×								
8	Code V-UBI amount in box m	K-1 (Form 1065) Y				N/A						-		4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
Ē	Disproportionate allocations?	No											•	70
=	Dispropi alloca	Yes				×								1
(6)	Share of end-of-year	933613				785,656.								,000 ming no "
(J)	Share of total income					1,793,741.								20/1 beautiful as
(e)	Predominant income (related, unrelated, exclinded from tax under	sections 512-514)				RELATED								
(p)	Direct controlling entity			FLORIDA	JUSTICE	ASSOCIATION								C. 40T. 10.40.
(2)	Legal domicile (state or	country)				FL								
(q)	Primary activity					FUNDRAISING								o older of the contract
(e)	Name, address, and EIN of related organization		ENDOWMENT FOR ASSOCIATION	GIVING TO LAW AND EDUCATION -	59-2678789, 218 SOUTH MONROE	STREET, TALLAHASSEE, FL								Constitution of the contraction

| Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year

1			ı		ı		ı		ı		i		ı
ΙΞ	ction	5 12(b)(13) controlled	2							 	_		
	တိ	512 con	Yak						L				
Ξ	. ·	Percentage											
(b)	; ;	Share of end-of-year	assets								•		
(£)		Share of total income										_	
(e)	: .	Type of entity (C corp, S corp,	or trust)										
(p)		Direct controlling entity											
(0)		Legal domicile (state or	country)										
(p)		Primary activity											
(a) (b)		Name, address, and EIN of related organization											

l

Schedule R (Form 990) 2017

5

<u>.</u>

<u>4</u> ₽ 2

Page 3

Part,V

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

- a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
 - - b Gift, grant, or capital contribution to related organization(s)
- c Gift, grant, or capital contribution from related organization(s)
 - d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- Dividends from related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)

ξ = đ

٥

- Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) c
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses ۵
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on will	ho must complete the	is line, including covered re	information on who must complete this line, including covered relationships and transaction thresholds
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved
(1) FLORIDA JUSTICE PAC	Ţ	460,000. FMV	FMV
(2) TRIAL LAWYER EMAIL LIST, INC	IJ	93,789. FMV	ŀΜV
ENDOWMENT FOR ASSOCIATION GIVING TO LAW &	တ	1,816,893. FMV	ıΜν
(4) FLORIDA JUSTICE PAC	A	6,592. FMV	, YW
(5)			
(9)	!		
732163 09-11-17	ì		Schedule R (Form 990) 2017

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) (b) (c) (d)	(q)	(0)	(p)	(e)	Œ	(b)	ε	3	9	3
Name, address, and EIN of entity	Primary activity	eig g	t income related, tax unc	Are all partners sec 501(c)(3) ler orgs?	•	Share of end-of-year	Dispropor- tionate allocations?	Cod amoun of Sch	General o managing partner?	Percentage ownership
		country)	sections 512-514) Y	Yes No	income	assets	Yes No		Yes No	
				+			$\frac{1}{4}$		1	
					-					
							•			
							_			
				+			1		$\frac{1}{1}$	
				_						<u></u>
				_			_			
					•					
				+			+		1	
	•									
									_	
					,					
						`				•
				_						
							-			
					-					
									L	
								Schodule	B (Eor	Schodule B (Form 990) 2017
								,	; -	>= (>>>

Schedule R (Form 990) 2017 FLORIDA JUSTICE ASSOCIATION	59-1291221 Page 5
Part VII Supplemental Information.	
Provide additional information for responses to questions on Schedule R. See instructions	
PART III, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS	PARTNERSHIP:
TIME THE TRANSPORT OF THE PROPERTY OF THE PROP	
NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:	
ENDOWMENT FOR ASSOCIATION GIVING TO LAW AND EDUCATION	
INDOMINATION OF THE TO BIN 1212 22 OF THE	····
EIN: 59-2678789	
A4A GOVERN MONTOR GERREIT	
218 SOUTH MONROE STREET	
TALLAHASSEE, FL 32301	