

Form 990

Department of the Treasury  
Internal Revenue Service

## A For the 2018 calendar year, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

## B Check if applicable

Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

## C Name of organization

SAFETY AND JUSTICE OREGON

## Doing business as

Number and street (or P O box if mail is not delivered to street address)

825 NE 20TH AVENUE, SUITE 250

## D Employer identification number

30-0457438

## E Telephone number

503-335-8449

## City or town, state or province, country, and ZIP or foreign postal code

PORTLAND OR 97232

## G Gross receipts \$

72,849

## F Name and address of principal officer

ANDY KO  
825 NE 20TH AVENUE, SUITE 250  
PORTLAND OR 97232H(a) Is this a group return for subordinates?  Yes  NoH(b) Are all subordinates included?  Yes  No

If "No," attach a list (see instructions)

## Tax-exempt status

501(c)(3)

501(c)

( 4 )

◀ (insert no)

4947(a)(1) or

527

## Website ► WWW.SJACTIONFUND.ORG

## H(c) Group exemption number ►

## K Form of organization

 Corporation Trust Association Other ►

## L Year of formation 2007

## M State of legal domicile OR

## Part I Summary

## 1 Briefly describe the organization's mission or most significant activities

SAFETY &amp; JUSTICE OREGON (SJO) ADVANCES POLICYMAKING THAT ENSURES A MORE EFFECTIVE AND EQUITABLE CRIMINAL JUSTICE AND PUBLIC SAFETY SYSTEM FOR PEOPLE CONVICTED OF CRIME, SURVIVORS OF CRIME, AND THE FAMILIES OF BOTH.

2 Check this box ►  if the organization discontinued its operations or disposed of more than 25% of its net assets

## 3 Number of voting members of the governing body (Part VI, line 1a)

3 7

## 4 Number of independent voting members of the governing body (Part VI, line 1b)

4 7

## 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)

5 0

## 6 Total number of volunteers (estimate if necessary)

6 40

## 7a Total unrelated business revenue from Part VIII, column (C), line 12

7a 0

## b Net unrelated business taxable income from Form 990-T, line 38

7b 0

## 8 Contributions and grants (Part VIII, line 1h)

## Prior Year

## Current Year

104,214

72,400

## 9 Program service revenue (Part VIII, line 2g)

671

0

## 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

0

## 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

449

## 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)

104,885

72,849

## 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

0

## 14 Benefits paid to or for members (Part IX, column (A), line 4)

0

## 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

79,012

104,511

## 16a Professional fundraising fees (Part IX, column (A), line 11e)

0

## b Total fundraising expenses (Part IX, column (D), line 25) ►

11,549

## 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

72,935

111,574

## 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)

151,947

216,085

## 19 Revenue less expenses Subtract line 18 from line 12

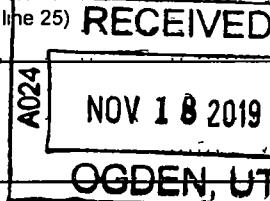
-47,062

-143,236

## 20 Total assets (Part X, line 16)

## 21 Total liabilities (Part X, line 26)

## 22 Net assets or fund balances Subtract line 21 from line 20



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

Sign  
Here

Signature of officer

Anita Rodgers

11-12-19

Date

FINANCE &amp; OPS. DIR.

ANITA RODGERS

Type or print name and title

Paid  
Preparer  
Use Only

Preparer's name

JAMES E. RICHMAN

Preparer's signature

James E. Richman

Date

11/07/19

Check

if self-employed

P00088854

Firm's name

RICHMAN &amp; ASSOCIATES, LLC

Firm's EIN

82-4091509

Firm's address

1 SW COLUMBIA ST STE 400  
PORTLAND, OR 97204-2005

Phone no

503-295-3780

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

X Yes  No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2018)

DAA

990 (2018)

990 (2018)

Form 990 (2018) **SAFETY AND JUSTICE OREGON**

30-0457438

**Part 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

**SAFETY & JUSTICE OREGON (SJO) ADVANCES POLICYMAKING THAT ENSURES A MORE EFFECTIVE AND EQUITABLE CRIMINAL JUSTICE AND PUBLIC SAFETY SYSTEM FOR PEOPLE CONVICTED OF CRIME, SURVIVORS OF CRIME, AND THE FAMILIES OF BOTH.**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 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?  Yes  No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code ) (Expenses \$ 185,360 including grants of \$ ) (Revenue \$ )  
**SJO IS LAYING THE GROUNDWORK FOR MORE HOLISTIC AND COST-EFFECTIVE SOLUTIONS TO CRIME; ADVOCATING FOR BALANCE AND EQUITY IN CRIMINAL JUSTICE AND PUBLIC SAFETY POLICYMAKING TO ACHIEVE REFORMS THAT BETTER SERVE ALL IMPACTED INDIVIDUALS AND DIVERSE COMMUNITIES.**

4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
**N/A**

4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
**N/A**

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses ► 185,360

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		X
2	Is the organization required to complete Schedule B, <i>Schedule of Contributors</i> (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	X	
4	<b>Section 501(c)(3) organizations.</b> 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		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		
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		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI		X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
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		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		
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	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		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 foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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		X

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**Part IV Checklist of Required Schedules (continued)**

		Yes	No
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	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	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	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	X
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)	28a	X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c	X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	29	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	34	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	35a	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35b	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	36	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	37	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	38	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O		

**Part 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 

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  
 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  
 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

1a	4	Yes	No
1b	0		
1c	X		

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**Part VII Statements Regarding Other IRS Filings and Tax Compliance (continued)**

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 0

2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b

**Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)

3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a

b If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* 3b

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a

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) 4b

5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b

c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c

6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b

**7 Organizations that may receive deductible contributions under section 170(c).**

a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a

b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b

c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c

d If "Yes," indicate the number of Forms 8282 filed during the year 7d

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f

g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g

h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h

**8 Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8

**9 Sponsoring organizations maintaining donor advised funds.**

a Did the sponsoring organization make any taxable distributions under section 4966? 9a

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b

**10 Section 501(c)(7) organizations.** Enter

a Initiation fees and capital contributions included on Part VIII, line 12 10a

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b

**11 Section 501(c)(12) organizations.** Enter

a Gross income from members or shareholders 11a

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b

**12a Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041? 12a

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b

**13 Section 501(c)(29) qualified nonprofit health insurance issuers.**

a Is the organization licensed to issue qualified health plans in more than one state? 13a

**Note.** See the instructions for additional information the organization must report on Schedule O

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 13b

c Enter the amount of reserves on hand 13c

**14a** Did the organization receive any payments for indoor tanning services during the tax year? 14a

b If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* 14b

**15** Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15

*If "Yes," see instructions and file Form 4720, Schedule N*

**16** Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16

*If "Yes," complete Form 4720, Schedule O*

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

**Section A. Governing Body and Management**

1a Enter the number of voting members of the governing body at the end of the tax year  
 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

1a **7**

1b Enter the number of voting members included in line 1a, above, who are independent

1b **7**

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 **X**

3 Did the organization delegate control over management duties customarily performed by or under the direct  
 supervision of officers, directors, or trustees, or key employees to a management company or other person?

3 **X**

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

4 **X**

5 Did the organization become aware during the year of a significant diversion of the organization's assets?

5 **X**

6 Did the organization have members or stockholders?

6 **X**

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 **X**

b Are any governance decisions of the organization reserved to (or subject to approval by) members,  
 stockholders, or persons other than the governing body?

7b **X**

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following

a The governing body?

8a **X**

b Each committee with authority to act on behalf of the governing body?

8b **X**

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 **X**

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code)

10a Did the organization have local chapters, branches, or affiliates?

10a **X**

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters,  
 affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?

10b **X**

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

11a **X**

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 **X**

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

12b **X**

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 **X**

13 Did the organization have a written whistleblower policy?

13 **X**

14 Did the organization have a written document retention and destruction policy?

14 **X**

15 Did the process for determining compensation of the following persons include a review and approval by  
 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

15a The organization's CEO, Executive Director, or top management official

15a **X**

b Other officers or key employees of the organization  
 If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)

15b **X**

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 **X**

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 **X**

**Section C. Disclosure**

17 List the states with which a copy of this Form 990 is required to be filed ► **OR**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)  
 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

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 policy, and  
 financial 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 ►

**ANITA RODGERS**  
**PORLTND**

**825 NE 20TH AVENUE, SUITE 250**

**OR 97232**

**503-335-8449**

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**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

 Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highly compensated employee			
(1) <b>DANA HEPPER</b>	1.00								
CHAIR	1.00	X		X			0	0	0
(2) <b>EMMA KALLAWAY</b>	1.00								
TREASURER	0.00	X					0	0	0
(3) <b>REYNA LOPEZ</b>	1.00								
SECRETARY	0.00	X					0	0	0
(4) <b>AISLING COGHLAN</b>	1.00								
BOARD MEMBER	0.00	X					0	0	0
(5) <b>ARTHUR TOWERS</b>	1.00								
BOARD MEMBER	0.00	X					0	0	0
(6) <b>LAMAR WISE</b>	1.00								
BOARD MEMBER	0.00	X					0	0	0
(7) <b>ROEY THORPE</b>	1.00								
BOARD MEMBER	0.00	X					0	0	0
(8) <b>IRIS MARIA CHAVEZ</b>	1.00								
BOARD MEMBER	1.00	X					0	0	0
(9) <b>ANDY KO</b>	2.00								
EXECUTIVE DIRECTOR	38.00			X			0	89,157	7,128
(10) <b>ANITA RODGERS</b>	4.50								
FINANCE & OPS. DIR.	35.50			X			0	74,996	1,749
(11)									

**Part VII: Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

**1b Sub-total**

164,153 8,877

**c Total from continuation sheets to Part VII, Section A**

--	--

**d Total (add lines 1b and 1c)**

164,153 8,877

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 ► 0

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

4 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 individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

---

**Section B. Independent Contractors**

1 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.

Compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.		
(A) Name and business address	(B) Description of services	(C) Compensation

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

## Form 990 (2018) SAFETY AND JUSTICE OREGON

30-0457438

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## Part VIII Statement of Revenue

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

Contributions, Gifts, Grants and Other Similar Amounts			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated campaigns	1a				
1b	Membership dues	1b				
1c	Fundraising events	1c				
1d	Related organizations	1d				
1e	Government grants (contributions)	1e				
1f	All other contributions, gifts, grants, and similar amounts not included above	1f	72,400			
g	Noncash contributions included in lines 1a-ff		\$			
h	Total. Add lines 1a-1f		►	72,400		
Program Service Revenue		Busn. Code				
2a						
b						
c						
d						
e						
f	All other program service revenue					
g	Total. Add lines 2a-2f		►			
3	Investment income (including dividends, interest, and other similar amounts)					
4	Income from investment of tax-exempt bond proceeds					
5	Royalties					
6a	Gross rents	(i) Real	(ii) Personal			
b	Less rental exps					
c	Rental inc or (loss)					
d	Net rental income or (loss)					
7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b	Less cost or other basis & sales exps					
c	Gain or (loss)					
d	Net gain or (loss)					
8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c)					
	See Part IV, line 18	a				
b	Less direct expenses	b				
c	Net income or (loss) from fundraising events		►			
9a	Gross income from gaming activities.					
	See Part IV, line 19	a				
b	Less direct expenses	b				
c	Net income or (loss) from gaming activities		►			
10a	Gross sales of inventory, less returns and allowances	a				
b	Less cost of goods sold	b				
c	Net income or (loss) from sales of inventory		►			
Miscellaneous Revenue		Busn. Code				
11a	REIMBURSED EXPENSES			449		449
b						
c						
d	All other revenue					
e	Total. Add lines 11a-11d		►	449		
12	Total revenue. See instructions		►	72,849	0	0

**Part IX Statement of Functional Expenses***Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)*Check if Schedule O contains a response or note to any line in this Part IX 

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A) Total expenses</b>	<b>(B) Program service expenses</b>	<b>(C) Management and general expenses</b>	<b>(D) Fundraising expenses</b>
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	<b>14,004</b>	<b>5,081</b>	<b>8,719</b>	<b>204</b>
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	<b>70,576</b>	<b>63,580</b>	<b>392</b>	<b>6,604</b>
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	<b>2,921</b>	<b>2,645</b>	<b>14</b>	<b>262</b>
9 Other employee benefits	<b>8,481</b>	<b>7,629</b>	<b>58</b>	<b>794</b>
10 Payroll taxes	<b>8,529</b>	<b>7,103</b>	<b>808</b>	<b>618</b>
11 Fees for services (non-employees)				
a Management				
b Legal	<b>1,600</b>	<b>715</b>	<b>885</b>	
c Accounting	<b>5,800</b>		<b>5,800</b>	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	<b>82,269</b>	<b>81,112</b>	<b>282</b>	<b>875</b>
12 Advertising and promotion				
13 Office expenses	<b>2,127</b>	<b>1,545</b>	<b>160</b>	<b>422</b>
14 Information technology	<b>3,350</b>	<b>2,083</b>	<b>99</b>	<b>1,168</b>
15 Royalties				
16 Occupancy	<b>6,272</b>	<b>5,625</b>	<b>543</b>	<b>104</b>
17 Travel	<b>4,872</b>	<b>4,839</b>	<b>33</b>	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	<b>3,030</b>	<b>2,313</b>	<b>672</b>	<b>45</b>
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	<b>66</b>	<b>49</b>	<b>17</b>	
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 OTHER EXPENSES	<b>1,207</b>	<b>162</b>	<b>608</b>	<b>437</b>
b TELEPHONE	<b>981</b>	<b>879</b>	<b>86</b>	<b>16</b>
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	<b>216,085</b>	<b>185,360</b>	<b>19,176</b>	<b>11,549</b>
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 ► <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

## 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
Assets	1 Cash—non-interest bearing	157,831	1	34,586
	2 Savings and temporary cash investments		2	78,568
	3 Pledges and grants receivable, net	145,325	3	260
	4 Accounts receivable, net	452	4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees			
	Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	b Less accumulated depreciation	10b		10c
	11 Investments—publicly traded securities			11
	12 Investments—other securities See Part IV, line 11			12
	13 Investments—program-related See Part IV, line 11			13
	14 Intangible assets			14
15 Other assets See Part IV, line 11			15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	303,608	16	113,414	
Liabilities	17 Accounts payable and accrued expenses	32,988	17	18,198
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	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 Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	32,988	26	18,198
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	98,042	27	95,216
	28 Temporarily restricted net assets	172,578	28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	270,620	33	95,216
	34 Total liabilities and net assets/fund balances	303,608	34	113,414

**Part 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	72,849
2 Total expenses (must equal Part IX, column (A), line 25)	2	216,085
3 Revenue less expenses Subtract line 2 from line 1	3	-143,236
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	270,620
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	-32,168
10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	95,216

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII 

	Yes	No
1 Accounting method used to prepare the Form 990. <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	<input checked="" type="checkbox"/>
2b Were the organization's financial statements audited by an independent accountant? 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 <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	<input checked="" type="checkbox"/>
2c 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	<input checked="" type="checkbox"/>
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 Act and OMB Circular A-133? 3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3a	<input checked="" type="checkbox"/>
	3b	

Form 990 (2018)

**SCHEDULE C**  
**(Form 990 or 990-EZ)**
Department of the Treasury  
Internal Revenue Service
**Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

**2018****Open to Public  
Inspection**

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of organization	Employer identification number
<b>SAFETY AND JUSTICE OREGON</b>	<b>30-0457438</b>

**Part A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")	► \$	59,615
2 Political campaign activity expenditures (see instructions)	► \$	0
3 Volunteer hours for political campaign activities (see instructions)	► \$	0

**Part B Complete if the organization is exempt under section 501(c)(3).**

1 Enter the amount of any excise tax incurred by the organization under section 4955	► \$	
2 Enter the amount of any excise tax incurred by organization managers under section 4955	► \$	
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4a Was a correction made?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b If "Yes," describe in Part IV		

**Part C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities	► \$	59,615
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	► \$	
3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	► \$	59,615
4 Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV		

	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 **SAFETY AND JUSTICE OREGON****30-0457438**

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**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

**A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

**B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount Enter the amount from the following table in both columns														
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess 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 less, enter -0														
i	Subtract line 1f from line 1c If zero or less, enter -0														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 **SAFETY AND JUSTICE OREGON****30-0457438**

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

		(a)	(b)
	Yes	No	Amount
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		
a	Volunteers?		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		
c	Media advertisements?		
d	Mailings to members, legislators, or the public?		
e	Publications, or published or broadcast statements?		
f	Grants to other organizations for lobbying purposes?		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		
i	Other activities?		
j	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)?		
b	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		
d	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).

1 Were substantially all (90% or more) dues received nondeductible by members?  
 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  
 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?

Yes	No
1	X
2	X
3	X

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) 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."

1 Dues, assessments and similar amounts from members  
 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).  
 a Current year  
 b Carryover from last year  
 c Total  
 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  
 4 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?  
 5 Taxable amount of lobbying and political expenditures (see instructions)

1	
2a	
2b	
2c	
3	
4	
5	

**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

**SCHEDULE C, PART I-A, LINE 1**

**SJO SUPPORTS POLICYMAKERS AND DISTRICT ATTORNEYS WHO ARE PROTECTING AND STRENGTHENING SERVICES FOR CRIME VICTIMS, SUPPORTING COMMUNITY-BASED ADDICTION TREATMENT, MENTAL HEALTH SERVICES, RE-ENTRY PROGRAMS, AND LAW ENFORCEMENT APPROACHES PROVEN TO REDUCE CRIME AND CREATE LONG-TERM SAVINGS FOR THE STATE. THE FILING ORGANIZATION INCURRED ADMINISTRATIVE AND**

**Part IV** **Supplemental Information (continued)**

**FUNDRAISING COSTS OF ITS PAC, AND OVERHEAD AND RECORD KEEPING ASSOCIATED  
WITH THE ABOVE ACTIVITIES.**

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2018**Open to Public  
Inspection

Name of the organization

Employer identification number

**SAFETY AND JUSTICE OREGON****30-0457438****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

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 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 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 7

1 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 a historically important land area Protection of natural habitat Preservation of open space Preservation of a certified historic structure

2 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

a Total number of conservation easements

Held at the End of the Tax Year	
2a	
2b	
2c	
2d	

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

 Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8 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)?

 Yes  No

9 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

**Part III** Organizations Maintaining Collections of Art, Historical Treasures, or Other 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 (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

b 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 ► \$

2 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

a Revenue included on Form 990, Part VIII, line 1 ► \$

b Assets included in Form 990, Part X ► \$

Schedule D (Form 990) 2018 **SAFETY AND JUSTICE OREGON****30-0457438**

Page 2

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a  Public exhibition  
 b  Scholarly research  
 c  Preservation for future generations

d  Loan or exchange programs  
 e  Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Yes  No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

Yes  No

b If "Yes," explain the arrangement in Part XIII and complete the following table

c Beginning balance  
 d Additions during the year  
 e Distributions during the year  
 f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10

1a Beginning of year balance  
 b Contributions  
 c Net investment earnings, gains, and losses  
 d Grants or scholarships  
 e Other expenditures for facilities and programs  
 f Administrative expenses  
 g End of year balance

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a					
b					
c					
d					
e					
f					
g					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ► %

b Permanent endowment ► %

c Temporarily restricted endowment ► %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations  
 (ii) related organizations

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

Yes	No
3a(i)	
3a(ii)	

3b

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

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

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018

**SAFETY AND JUSTICE OREGON****30-0457438**

Page 3

**Part VII Investments—Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year 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, line 11c. See Form 990, Part X, line 13

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(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" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(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 answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ►

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) 2018 **SAFETY AND JUSTICE OREGON**

30-0457438

Page 4

**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

1 Total revenue, gains, and other support per audited financial statements

1

2 Amounts included on line 1 but not on Form 990, Part VIII, line 12

2a
2b
2c
2d

2e

3
4a
4b

4c

5
---

4 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  
b Other (Describe in Part XIII )  
c Add lines 4a and 4b

5 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.

1 Total expenses and losses per audited financial statements

1

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

2a
2b
2c
2d

2e

3
4a
4b

4c

5
---

5 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 - FIN 48 FOOTNOTE**

**UNDER FASB ASC TOPIC 740, INCOME TAXES, AN ORGANIZATION MUST ALSO EVALUATE ITS TAX POSITIONS AND PROVIDE FOR A LIABILITY FOR ANY POSITIONS THAT WOULD NOT BE CONSIDERED "MORE LIKELY THAN NOT" TO BE UPHELD UNDER A TAX AUTHORITY EXAMINATION. MANAGEMENT HAS EVALUATED ITS TAX POSITIONS AND HAS CONCLUDED THAT A PROVISION FOR A TAX LIABILITY IS NOT NECESSARY AT DECEMBER 31, 2018.**

**Part XIII Supplemental Information (continued)**

**SCHEDULE O**  
 (Form 990 or 990-EZ)
Department of the Treasury  
Internal Revenue Service

Name of the organization

**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.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

**2018****Open to Public  
Inspection****SAFETY AND JUSTICE OREGON**

Employer identification number

**30-0457438**

**FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990**  
**THE 990 IS DRAFTED BY THE PREPARER AND FINANCE AND OPERATIONS DIRECTOR. IT**  
**IS THEN SENT TO THE FINANCE AND OPERATIONS COMMITTEE OF THE BOARD (WHICH**  
**INCLUDES THE EXECUTIVE DIRECTOR) FOR REVIEW AND APPROVAL. THE FINAL 990 IS**  
**SENT TO THE ENTIRE BOARD BEFORE FILING.**

**FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY**  
**THE CONFLICT OF INTEREST POLICY COVERS DIRECTORS AND OFFICERS OF THE**  
**ORGANIZATION. DETERMINATIONS OF WHETHER A CONFLICT EXISTS AND THE REVIEW**  
**OF ACTUAL CONFLICTS ARE MADE AT THE BOARD LEVEL. WHEN THE BOARD BECOMES**  
**AWARE OF A POTENTIAL CONFLICT OF INTEREST, THEY SHALL OBTAIN MATERIAL FACTS**  
**ABOUT THE FINANCIAL INTEREST. AFTER ANY DISCUSSION WITH THE INTERESTED**  
**PERSON, THE INTERESTED PERSON SHALL LEAVE THE MEETING WHILE THE BOARD**  
**DETERMINES WHETHER A CONFLICT OF INTEREST EXISTS. IF THE BOARD DETERMINES**  
**THAT A CONFLICT EXISTS, THE BOARD SHALL FOLLOW THESE PROCEDURES TO ADDRESS**  
**IT: 1) THE INTERESTED PERSON MAY MAKE A PRESENTATION TO THE BOARD, BUT AFTER**  
**THE PRESENTATION, SHALL LEAVE THE MEETING DURING THE DISCUSSION OF AND THE**  
**VOTE ON THE TRANSACTION OR ARRANGEMENT INVOLVING THE CONFLICT. 2) THE BOARD**  
**SHALL INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT.**  
**AFTER EXERCISING DUE DILIGENCE, THE BOARD SHALL DETERMINE WHETHER THE**  
**TRANSACTION OR ARRANGEMENT IS FAIR TO THE CORPORATION. THE TRANSACTION**  
**MUST BE APPROVED BY A MAJORITY OF ALL THE MEMBERS OF THE BOARD WHO HAVEN NO**  
**DIRECT OR INDIRECT INTEREST IN THE TRANSACTION. IF A MAJORITY OF THE**  
**DIRECTORS VOTE TO APPROVE THE TRANSACTION OR ARRANGEMENT, A QUORUM IS**  
**PRESENT FOR THE PURPOSE OF TAKING ACTION, EXCEPT THAT SUCH A TRANSACTION OR**

## Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization

SAFETY AND JUSTICE OREGON

Employer identification number

30-0457438

**ARRANGEMENT CANNOT BE APPROVED BY A SINGLE DIRECTOR.**

**FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION**  
**THE ORGANIZATION CONSIDERS REQUESTS FOR DISLOSURE OF ITS GOVERNING**  
**DOCUMENTS, FINANCIAL STATEMENTS AND CONFLICT OF INTEREST POLICIES ON A**  
**CASE-BY-CASE BASIS.**

**FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES****DESCRIPTION**

	<b>TOT/PROG SERVICE</b>		<b>MGT &amp; GENERAL</b>		<b>FUNDRAISING</b>
<b>COMMUNICATIONS CONSULTANT</b>	\$ 30,048	\$	266	\$	872
<b>PROGRAM CONSULTANT</b>	\$ 25,400	\$	0	\$	0
<b>ELECTORAL CONSULTANT</b>	\$ 23,044	\$	0	\$	0
<b>GOVERNMENT RELATIONS</b>	\$ 2,400	\$	0	\$	0
<b>ORGANIZATIONAL DEVELOPMENT</b>	\$ 162	\$	11	\$	3
<b>TECHNOLOGY SERVICES</b>	\$ 58	\$	5	\$	0
<b>TOTAL</b>	\$ 81,112	\$	282	\$	875

**FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION****REMOVE PAC ACCOUNT** \$ -32,168**PAGE 1 OF 2**

Schedule O (Form 990 or 990-EZ) (2018)

## Schedule O (Form 990 or 990-EZ) (2018)

Page 2

Name of the organization

**SAFETY AND JUSTICE OREGON**

Employer identification number

**30-0457438**

**THE PAC'S CHECKING ACCOUNT WAS PREVIOUSLY INCLUDED ON THE ORGANIZATION'S  
BALANCE SHEET.**

**PAGE 2 OF 2**

Schedule O (Form 990 or 990-EZ) (2018)

**SCHEDULE R**  
**(Form 990)**
**Related Organizations and Unrelated Partnerships**

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

Department of the Treasury  
Internal Revenue Service

Name of the organization

**SAFETY AND JUSTICE OREGON**

► Attach to Form 990.  
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**2018**

**Open to Public  
Inspection**

Employer identification number  
**30-0457438**

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

	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(5)						

**Part III** **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

	(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 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity
(1) <b>SAFETY AND JUSTICE PAC</b> PO BOX 42307 PORTLAND OR 97242	47-2950426	ELECTIONS OR	527			<b>SAFETY AND JUSTICE PAC</b>	<b>Yes</b>
(2)							
(3)							
(4)							
(5)							

**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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate alloc?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
									Yes	No
(1)										
(2)										
(3)										
(4)										

**Part IV** **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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									

**Part V****Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 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?

- 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)
- f Dividends from related organization(s)
- g Sale of assets to related organization(s)
- h Purchase of assets from related organization(s)
- i Exchange of assets with related organization(s)
- j Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- l 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)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o Sharing of paid employees with related organization(s)
- p Reimbursement paid to related organization(s) for expenses
- q Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- 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 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)					
(2)					
(3)					
(4)					
(5)					
(6)					

## Unrelated Organizations Taxable as a Partnership

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

Schedule R (Form 990) 2018

**SAFETY AND JUSTICE OREGON**

**30-0457438**

Page 5

**Part VII**

**Supplemental Information.**

Provide additional information for responses to questions on Schedule R. See Instructions

ATKIN & ASSOCIATES  
CENTER FOR NONPROFIT LAW

January 14, 2019

DEPARTMENT OF JUSTICE  
Charitable Activities Section  
100 SW Market Street  
Portland, Oregon 97201

RE: Safety and Justice Oregon  
DOJ # 38151

Dear Friends:

As of January 3, 2019, Safety and Justice Action Fund filed Articles of Amendment to change the name to:

Safety and Justice Oregon

Enclosed please find a copy of the filed Articles of Amendment.

Please let us know if you need any additional documentation or if any further action should be taken on our part.

Very truly yours,

*J. Stafford*

Jess Stafford  
Client Support Coordinator

Encl.: Articles of Amendment

cc: Safety and Justice Oregon

***"Helping the People Who Change the World"***

Director: David E. Atkin, Attorney at Law  
590 W. 13<sup>th</sup> Avenue, Eugene, Oregon 97401  
MAIL: P.O. Box 10008, Eugene, Oregon 97440  
Phone (541)342-6336 Fax (541)484-3926



Secretary of State  
Corporation Division  
255 Capitol Street NE, Suite 151  
Salem, OR 97310-1327  
  
Phone (503)986-2200  
www.filinginoregon.com

**Registry Number:** 469347-90  
**Type:** DOMESTIC NONPROFIT CORPORATION

**Next Renewal Date:** 10/09/2019

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SAFETY AND JUSTICE OREGON  
825 NE 20TH AVE STE 250  
PORTLAND OR 97232

### Acknowledgment Letter

The document you submitted was recorded as shown below. Please review and verify the information listed for accuracy.

**Document**  
ARTICLES OF AMENDMENT

<b>Filed On</b> 01/03/2019	<b>Jurisdiction</b> OREGON	<b>Nonprofit Type</b> PUBLIC BENEFIT
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**Name**  
SAFETY AND JUSTICE OREGON

**Principal Place of Business**  
825 NE 20TH AVE #250  
PORTLAND OR 97232

**Registered Agent**  
ANDY KO  
825 NE 20TH AVE #250  
PORTLAND OR 97232

**Mailing Address**  
825 NE 20TH AVE STE 250  
PORTLAND OR 97232

**President**  
ANDY KO  
825 NE 20TH AVE STE 250  
PORTLAND OR 97232

**Secretary**  
EMMA KALLAWAY  
825 NE 20TH AVE STE 250  
PORTLAND OR 97232



## Articles of Amendment - Nonprofit

Secretary of State - Corporation Division - 256 Capitol St NE, Suite 151 - Salem, OR 97310-1327 - [sos.oregon.gov/business](http://sos.oregon.gov/business) - Phone (503) 986-2200

REGISTRY NUMBER: 469347-90

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record.  
We must release this information to all parties upon request and it will be posted on our website.

For office use only

Please Type or Print Legibly in Black Ink

1) ENTITY NAME: Safety and Justice Action Fund

2) STATE THE ARTICLE NUMBER(S): and set forth the article(s) as it is amended to read. (Attach a separate sheet if necessary)

Safety and Justice Oregon

3) THE AMENDMENT WAS ADOPTED ON: September 25, 2018

(If more than one amendment was adopted, identify the date of adoption of each amendment)

4) CHECK THE APPROPRIATE STATEMENT:

Membership approval was not required. The amendment(s) was approved by a sufficient vote of the board of directors or incorporators

Membership approval was required.

The membership vote was as follows:

Class(es) entitled to vote	Number of members entitled to vote	Number of votes entitled to be cast	Number of votes cast FOR	Number of votes cast AGAINST

5) EXECUTION: (Must be signed by at least one officer or director)

I declare as an authorized signer, under penalty of perjury, that this document does not fraudulently conceal, obscure, alter, or otherwise misrepresent the identity of any person including officers, directors, employees, members, managers or agents. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

Signature

Printed Name:

Title:

Dana Hepper

CONTACT NAME: (To resolve questions with this filing)

David E. Atkin

PHONE NUMBER: (Include area code.)

541-342-6336

### FEES

Required Processing Fee \$50

No Fee for Nonprofit Type Change.

Processing Fees are nonrefundable. Please make check payable to "Corporation Division."

For copies are available at [sos.oregon.gov/business](http://sos.oregon.gov/business) using the Business Name Search program.