DLN: 93493295010419 OMB No. 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 D Employer identification number B Check if applicable US Justice Ăction Network ☐ Address change 47-2975432 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 444 N Capitol Street NW No 200 ☐ Amended return ☐ Application pending (202) 624-7769 City or town, state or province, country, and ZIP or foreign postal code Washington, DC $\,$ 20001 G Gross receipts \$ 5,600,120 Name and address of principal officer H(a) Is this a group return for Holly Harris VonLuehrte ☐Yes **☑**No subordinates? 444 N Capitol Street NW No 200 H(b) Are all subordinates Washington, DC 20001 ☐ Yes ☐No ıncluded? ☐ 501(c)(3) **☑** 501(c) (4) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► http://www.justiceactionnetwork.org/ L Year of formation 2015 Summary 1 Briefly describe the organization's mission or most significant activities Advocacy organization supporting criminal justice system reform- See Schedule O Activities & Governance 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) . 4 1 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year 8 Contributions and grants (Part VIII, line 1h) . 3,959,000 5,600,000 Ravenua 9 Program service revenue (Part VIII, line 2g) . 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 20 120 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,959,020 5,600,120 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 1,525,321 1,163,531 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 645,808 504,723 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 2,528,053 2,986,408 4,699,182 4,654,662 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -740,162 Revenue less expenses Subtract line 18 from line 12 . 945,458 Net Assets or Fund Balances Beginning of Current Year **End of Year** 760,681 1,894,709 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 219,889 408,459 22 Net assets or fund balances Subtract line 21 from line 20 . 540,792 1,486,250 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-10-22 Signature of officer Sign Here Holly Harris VonLuehrte Executive Director Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2019-10-22 P01049760 Paid self-employed Firm's name Rogers & Company PLLC Firm's EIN ► 58-2676261 Preparer Use Only Firm's address ▶ 8300 Boone Boulevard Suite 600 Phone no (703) 893-0300 Vienna, VA 22182 ✓ Yes 🗆 No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)					Page 2
Pa	rt III Statemer	nt of Program Service	e Accomplis	hments		
	Check if Sch	hedule O contains a respo	nse or note to	any line in this Part III		🗹
1	Briefly describe the	e organization's mission				
to th	e criminal justice sys		ne effective and	fair use of limited publ	tizens of the United States by advo	
2	Did the organizatio	on undertake any significa	nt program ser	vices during the year w	hich were not listed on	_
	the prior Form 990	or 990-EZ?				☐ Yes 🗹 No
	If "Yes," describe t	hese new services on Sch	nedule O			
3	Did the organization	on cease conducting, or m	ake significant	changes in how it condi	ucts, any program	
	services?					🗌 Yes 🗹 No
	If "Yes," describe t	hese changes on Schedul	e O			
4	Section 501(c)(3)		ns are required	to report the amount of	largest program services, as meas of grants and allocations to others,	
4a	(Code) (Expenses \$	2,613,059	including grants of \$	365,000) (Revenue \$)
	See Additional Data					<u> </u>
4b	(Code See Additional Data) (Expenses \$	1,742,039	including grants of \$	798,531) (Revenue \$)
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d		vices (Describe in Schedi	,			
	(Expenses \$		uding grants of	•) (Revenue \$)
4e	Total program se	ervice expenses >	4,355,0	98		Form 990 (2018)

Form 990 (2018) Page 3 **Checklist of Required Schedules** Yes Nο Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Νo 1 2 Yes Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆 . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates Yes 3 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? 4 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? 5 Nο 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? No 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Nο 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? Nο If "Yes," complete Schedule D, Part III 8 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 No 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Nο permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 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? No 11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Nο assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its Νo 11c Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Nο 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Nο Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f Νo 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?

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

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

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

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

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

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

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

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

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

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

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

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

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

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

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

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

12a Nο 12b Nο

Νo

Nο

Nο

Nο

Nο

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Nο

No

Νo

Nο

Form 990 (2018)

13

14a

14b

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20a

20b

21

Yes

Part	Checklist of Required Schedules (continued)			
			Yes	No
	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	Yes	
	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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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	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		No
	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		No
	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		No
	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		No
	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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is reated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Check if Schedule O contains a response or note to any line in this Part V $\,$.

 \checkmark

10a

10b

11a

11b

12b

13b

13c

12a

13a

14a

14b

15

No

Nο

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

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

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

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

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

Enter the amount of reserves the organization is required to maintain by the states in

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

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

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

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

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

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

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

Form	990 (2018)			Page 6
Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	•	onse to l	ines
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No_
	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	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
	DC , AL , AK , AZ , AR , CA , CO , CT , DE , IN , IA , KS , KY , LA , ME , MD , MA , MI NE , NV , NH , NJ , NM , NY , NC , ND , OH SC , SD , TN , TX , UT , VT , VA , WA , WV	, MN , I , OK ,	MS , MO OR , PA), MT,
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			_
	Own website \square Another's website $ ewline olimits$ Upon request \square 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 State Services Organization 444 North Capitol Street NW Suite Washington, DC 20001 (202) 624-5490			

Part VII

year

(F)

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

 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, or 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

(C)

(D)

(E)

compensated employees, and former such persons Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(B)

Name and Title Reportable Reportable Estimated Average Position (do not check more hours per than one box, unless person compensation compensation amount of other is both an officer and a week (list from the from related compensation any hours director/trustee) organization organizations from the for related (W- 2/1099-(W-2/1099organization and Highest compensated employee 잌. Individual trustee organizations MISC) MISC) related Institutional Trust⊌e director below dotted organizations employ line) P 6.00 (1) Ashley Hanna Х Ω Х n Ω President/ Treasurer/ Dire 5 00 20 00 (2) Holly Harris VonLuehrte 137,626 137,626 11,708 **Executive Director** 20 00 20 00 (3) Jeanette Moll Χ 100,270 100.270 6,260 Deputy Director 20 00 20 00 (4) Carrie Glenn X 58,370 58,370 3,834 Director of Coalition/Outreach 20 00 20 00 (5) Syrıta Bowen Х 52,728 52,728 1,568 Event Manager 20 00

214 N Fayette Street Alexandria, VA 22314

compensation from the organization ▶ 8

(B)

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

Page **8**

(A) Name and Title		(B) Average hours per week (list any hours	than c	ne b	ox, ι n of or/t	t ch inle: ficei	r and a	son	(D) Reportable compensation from the organization (V 2/1099-MISC	from rela V- organization	ition ited ns (W-	Estim amount comper from	ated of other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1033-MI3C	2/1099-111		organızal rela organız	ted
	Sub-Total	art VII Section			•		*						
_							•		348,994	34	8,994		23,370
2	Total number of individuals (including of reportable compensation from the			e list	ed a	bov	e) who	rece	eived more than	\$100,000			
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule 2</i>				ey e	mpl-	oyee, d	or hi	ghest compensat	ed employee on		Yes	No
4	For any individual listed on line 1a, is organization and related organization individual	the sum of repo	ortable (No
5	Did any person listed on line 1a receivervices rendered to the organization										5		No
Se	ection B. Independent Contract												
1	Complete this table for your five high	est compensate									compe	nsation	
	from the organization Report comper	(A) and business addre		year	end	iing	WITH O	rwit	T	(B) escription of service	es		C) nsation
SKDK	Knickerbocker LLC								Consultir	ıg			404,861
	18th St NW Suite 800 nington, DC 20036												
	sion Strategies LLC								Public Re	lations			162,306
	New York Ave NW Suite 530 nington, DC 20001												
wasn	illigion, DC 20001								l				
	nson & Avella PLLC								State Lol	obying			150,000
Dickii 111 V	nson & Avella PLLC Washington Ave Suite 606								State Lol	obying			150,000
Dickii 111 V Albar	nson & Avella PLLC								State Lol				150,000
Dickii 111 V Albar Elmei 1201	nson & Avella PLLC Washington Ave Suite 606 ny, NY 12210												
Dickii 111 V Albar Elmei 1201 Wash	nson & Avella PLLC Washington Ave Suite 606 ny, NY 12210 ndorf Strategies LLC dba Subject Ma New York Ave NW Suite 900									obbying			·

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

(C)

(D)

(E)

	Statement of Davis						rage 3
Part				. los a us that Dast VIII	1		
	Check if Schedule O contains	a respor	ise or note to an	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	1a Federated campaigns	1a			revenue		512 - 514
ats Its	b Membership dues	1b					
ig n	c Fundraising events						
%, Q	C rundraising events	1c					
	d Related organizations	1d					
E	e Government grants (contributions)	1e					
S. S.	f All other contributions, gifts, grants, and similar amounts not included	1f	E 600 000				
Contributions, Gifts, Grants and Other Similar Amounts	above g Noncash contributions included	11	5,600,000				
Cont	in lines 1a - 1f \$ h Total. Add lines 1a-1f		•	5,600,000			
ı			Busines				
Program Service Revenue	2a						
خ خ	h —	-					
<u>د</u>	b — — — — — — — — — — — — — — — — — — —						
ž.	d						
S	e	_					
grar	f All other program service revenue						
ď	9Total. Add lines 2a-2f	,	•				
	3 Investment income (including divid			.	1		
	similar amounts)			12	20		120
	4 Income from investment of tax-exe	empt bor	nd proceeds I	>			
	5 Royalties			>			
	(1) Rea	I	(II) Personal	4			
	6a Gross rents						
	b Less rental expenses						
	c Rental income or	-		_			
	(loss)						
	d Net rental income or (loss)		· · · •	_			
	(ı) Securit	ties	(II) Other				
	7a Gross amount from sales of						
	assets other than inventory						
	b Less cost or			4			
	other basis and						
	sales expenses C Gain or (loss)			\dashv			
	d Net gain or (loss)	. '	•	_			
	8a Gross income from fundraising ev	ents [
ne	(not including \$ contributions reported on line 1c)	of					
듄	See Part IV, line 18	a					
Re	b Less direct expenses	ь					
ē	c Net income or (loss) from fundrais	ing eve	nts 🕨				
Other Revenue	9a Gross income from gaming activit See Part IV, line 19	ies					
_	See Farry, line 15	a					
	b Less direct expenses	ь		-			
	c Net income or (loss) from gaming	activitie	?S ▶				
	10a Gross sales of inventory, less						
	returns and allowances	a					
	b Less cost of goods sold	ь		\dashv			
	c Net income or (loss) from sales of	L	ry >				
	Miscellaneous Revenue	IIIVEIILO	Business Code				
	11 a						
	b	-+		1			
	с					1	
	- -						
	d All other revenue				1		
	e Total. Add lines 11a-11d	L	•		+	-	
					1		
	12 Total revenue. See Instructions		• • • •	5,600,12	20	0	0 120
							Form 990 (2018)

Forr	n 990 (2018)				Page 10
	art IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all columns to the statement of Functional Expenses	-	•	` ,	
	Check if Schedule O contains a response or note to any	line in this Part IX .			🗸
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	1,163,531	1,163,531		
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, line 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	143,479	86,087	57,392	
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	310,495	186,297	124,198	
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	7,900	4,740	3,160	
9	Other employee benefits	14,709	8,826	5,883	
10	Payroll taxes	28,140	16,884	11,256	
11	Fees for services (non-employees)				
a	a Management				
ŀ	o Legal	31,662		31,662	
•	a Accounting	23,356		23,356	
•	il Lobbying	1,255,044	1,255,044		
€	e Professional fundraising services See Part IV, line 17				
f	Investment management fees			·	
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	805,443	805,443		
	Advertising and promotion				1
	Office expenses	13,526	3,354	10,172	
	Information technology	4,222	1,591	2,631	<u> </u>
	Royalties				1
	Occupancy	86,604	60,623	25,981	1
	Travel	58,728	58,728		1
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings	703,950	703,950		1
	Interest				1
	Payments to affiliates				1
	Depreciation, depletion, and amortization				1
	Insurance	3,873		3,873	
	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			!	1
l	b			!	<u> </u>
	С			!	<u> </u>
	d				<u> </u>
	e All other expenses				1
25	Total functional expenses. Add lines 1 through 24e	4,654,662	4,355,098	299,564	0

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)

1	Cash-non-interest-bearing	735,801	1	1,599,557
2	Savings and temporary cash investments	20,032	2	20,152
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	4,848	4	275,000
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			

6

7 8 9

10c 11

12

13 14

15

16

17

1,894,709

408,459

760,681

219,889

Assets

15

16

17

Liabilities

Net Assets or Fund Balances

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses .

	Part II of Schedule L	l				
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					
7	Notes and loans receivable, net					
8	Inventories for sale or use					
9	Prepaid expenses and deferred charges	Γ				
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D					
b	Less accumulated depreciation 10b					
11	Investments—publicly traded securities .					
12	Investments—other securities See Part IV, line 11					
13	Il of Schedule L					
14	Intangible assets	Γ				

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

r · · · · · · · · · · · · · · · · · · ·			
Grants payable		18	
Deferred revenue		19	
Tax-exempt bond liabilities		20	
Escrow or custodial account liability Complete Part IV of Schedule D		21	
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	
Secured mortgages and notes payable to unrelated third parties		23	
Unsecured notes and loans payable to unrelated third parties		24	
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	
Total liabilities.Add lines 17 through 25	219,889	26	408,459
Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	540,792	27	1,486,250
Temporarily restricted net assets		28	
Permanently restricted net assets		29	
Organizations that do not follow SFAS 117 (ASC 958),			
check here ► □ and complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
Paid-in or capital surplus, or land, building or equipment fund		31	
Retained earnings, endowment, accumulated income, or other funds		32	
Retained carmings, chaowinene, accumulated income, or other rands			
Total net assets or fund balances	540,792	33	1,486,250
	Deferred revenue	Deferred revenue	Deferred revenue

Form	990 (2018)				Page 12
Pa	Reconcilliation 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			,600,120
2	Total expenses (must equal Part IX, column (A), line 25)	2			,654,662
3	Revenue less expenses Subtract line 2 from line 1	3			945,458
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			540,792
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,	,486,250
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			<u> </u>	✓
				Yes	No
1	Accounting method used to prepare the Form 990				ĺ
	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?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basıs,			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii Audit Act and OMB Circular A-133?	ngle	3a		No

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

0

Form **990** (2018)

3b

Additional Data

Software ID:

Software Version:

EIN: 47-2975432

Name: US Justice Action Network

Form 990 (2018)

E- -- 000 P- | TTT | 1:-- 4

Form 990, Part III, Line 4a:

Lobbying and Policy Advocacy U.S. Justice Action Network (USJAN) advocated for reforms at both the state and federal level that will make our criminal justice system fairer, more efficient and effective while ensuring public safety. USJAN collaborated with other nonprofits, criminal justice advocates, and law enforcement to engage in both grassroots and direct lobbying efforts at the federal and state level on criminal justice issues. USJAN assisted with drafting legislation, testified before state legislatures, and participated in press conferences to highlight proposed reforms. See Schedule O for continuation.

Education U.S. Justice Action Network (USJAN) hosted various summits and forums to educate the public and policy leaders on the need for criminal justice reform. USJAN hosted events to discuss federal criminal justice reform with both state and federal leaders, along with participating in state specific events. USJAN staff also collaborated with other organizations by speaking at various events and participating in summits highlighting criminal justice issues. USJAN engaged traditional and social media to

Form 990, Part III, Line 4b:

highlight current issues within the criminal justice system

SCHEDULE C

Political Campaign and Lobbying Activities

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

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-

EZ)

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

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

Inspection

DLN: 93493295010419

• : • : f the	Section 501(c) (other than section 5 Section 527 organizations Comple e organization answered "Yes" o Section 501(c)(3) organizations tha	implete Parts I-A and B Do not complete 501(c)(3)) organizations Complete Part te Part I-A only n Form 990, Part IV, Line 4, or Form 9 t have filed Form 5768 (election under 9 t have NOT filed Form 5768 (election un	s I-A and C below 990-EZ, Part VI, Imsection 501(h)) Co	i e 47 (Lobb mplete Part	· ying Actıvit II-A Do not	i es), com	plete Part II-l	
Pro	xy Tax) (see separate instruction		x) (see separate ir	nstructions) or Form 99	90-E	Z, Part V, lin	e 35c
Nar	Section 501(c)(4), (5), or (6) organi me of the organization Justice Action Network	zations Complete Part III			Employer id	entii	fication nun	nber
Par	t I-A Complete if the orga	nization is exempt under section	on 501(c) or is			niza	tion.	
1		nization's direct and indirect political car	mpaign activities in	Part IV (se	e instruction	s for	definition of	
2	"political campaign activities") Political campaign activity expend	ditures (see instructions)				¢		36,000
3	Volunteer hours for political camp	· · ·				₽.		
Par		nization is exempt under section	on 501(c)(3).					
1	Enter the amount of any excise to	ax incurred by the organization under s	ection 4955		>	\$		
2	Enter the amount of any excise to	ax incurred by organization managers u	inder section 4955		>	\$		
3	If the organization incurred a sec	tion 4955 tax, did it file Form 4720 for	this year?				☐ Yes	□ No
4a	Was a correction made?						☐ Yes	□ No
ь	If "Yes," describe in Part IV							
Par	t I-C Complete if the orga	nization is exempt under section	on 501(c), exce	pt sectio	n 501(c)(:	3).		
1	Enter the amount directly expend	led by the filing organization for section	527 exempt funct	ion activitie:	s >	\$.		
2	Enter the amount of the filing org function activities	ganization's funds contributed to other c	organizations for se	ection 527 e	xempt •	\$.		36,000
3	Total exempt function expenditur	es Add lines 1 and 2 Enter here and o	n Form 1120-POL,	lıne 17b	•	\$		36,000
4	Did the filing organization file Fo	rm 1120-POL for this year?					✓ Yes	□ No
5	organization made payments For of political contributions received	employer identification number (EIN) of r each organization listed, enter the am that were promptly and directly deliver ee (PAC) If additional space is needed,	ount paid from the ed to a separate po	filing organ olitical orgai	ization's fund nization, suc	ds A	the filing Iso enter the	e amount
	(a) Name	(b) Address	(c) EIN	filing or funds If	unt paid from ganization's none, enter -0-		(e) Amount contributions and promp directly deliv separate p organization enter	s received ptly and vered to a political in If none,
(1) Repu	ublican State Leadership Committee Inc	1201 F Street NW Suite 675 Washington, DC 20004	05-0532524		30,00	00		
(2) Your	ng Republican National Federation Inc	623 1st Avenue Point Pleasant Borough, NJ 08742	52-1082056		6,00	00		
3								
4								
5								
6								
or P	aperwork Reduction Act Notice, see	the instructions for Form 990 or 990-EZ.	Cat	No 50084S	Schedule (C (Fo	rm 990 or 990	0-EZ) 2018

Grassroots ceiling amount

Part I-A, Line 1

	Form 5768 (election	on under section 501(h)).				
For e	ach "Yes" response on lines 1a throu	ugh 1: below, provide in Part IV a detailed description of the lobbying	(a)	,	(b)	
activi	·		Yes	No	Amount	: _
1		enization attempt to influence foreign, national, state or local legislation, public opinion on a legislative matter or referendum, through the use of				_
а	Volunteers?	l e e e e e e e e e e e e e e e e e e e			İ	
b	• ,	compensation in expenses reported on lines 1c through 1i)?			ı	
c	Media advertisements?	ı			ı <u> </u>	
d	Mailings to members, legislators, or	•				_
e	Publications, or published or broadc	cast statements?				
f	Grants to other organizations for lo	obbying purposes?				
g	Direct contact with legislators, their	ır 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	e organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any ta	ax incurred under section 4912			ı	
С	If "Yes," enter the amount of any ta	tax incurred by organization managers under section 4912	[]			
d		section 4912 tax, did it file Form 4720 for this year?	ll			
Par	t III-A Complete if the orga 501(c)(6).	panization is exempt under section 501(c)(4), section 501(c))(5), or	· section	<u> </u>	
						No
1	, ,	re) dues received nondeductible by members?		1		
2	· · · · · · · · · · · · · · · · · · ·	house lobbying expenditures of \$2,000 or less?		2		
3		y over lobbying and political expenditures from the prior year?		3		
Par		panization is exempt under section 501(c)(4), section 501(c) OTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part				5)
1	Dues, assessments and similar amo	ounts from members	1			
2	Section 162(e) nondeductible lobby expenses for which the section !	ying and political expenditures (do not include amounts of political 527(f) tax was paid).				
a	Current year		2a			
b	Carryover from last year		2b			
c	Total		2c			
3		tion 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4		nt on line 2c exceeds the amount on line 3, what portion of the excess does it to the reasonable estimate of nondeductible lobbying and political	4			
5	· ·	olitical expenditures (see instructions)	5			—
	art IV Supplemental Infor	·				_
Prov	vide the descriptions required for Par	ort I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), complete this part for any additional information	, Part II-/	A, lines 1	and 2 (see	_
	Return Reference	Explanation				
ــــاء	<u>_</u> _					

Through event sponsorships, USJAN provided indirect political support to Section 527 organizations

DLN: 93493295010419 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number US Justice Action Network 47-2975432 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant 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 recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization cash (book, FMV, appraisal, noncash assistance or assistance grant or government assistance other) (1) See Additional Data (2) (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Grant recipients and USJAN staff collaborate weekly via email and phone calls to strategize program activities Grant recipients and USJAN staff also regularly

collaborate on events and conferences. Grant recipients also provide detailed quarterly reports outlining use of grant funds and general progress on criminal justice

Schedule I (Form 990) 2018

(4) (5) (6)

Explanation

related projects

Return Reference

Part I, Line 2

Additional Data

201 N Union Street Suite 370 Alexandria, VA 22314

722 12th Street NW Suite 400

Americans for Tax Reform

Washington, DC 20005

Software ID: Software Version:

EIN: 47-2975432

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government

American Conservative Union 52-1294680 501(c)(3) 50,000 N/A IN/A Foundation

52-1403587

Name: US Justice Action Network

501(c)(4)

110,000 N/A

N/A

Partner Support -

Criminal Justice Reform

Grassroots Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 30-0192708 501(c)(4) 50.000 N/A IN/A Center for American Progress Partner Support -Criminal Justice Reform Action Fund

Criminal Justice Reform

1333 H Street NW 10th Floor Washington, DC 20005

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

436 14th St Suite 920

Oakland, CA 94612

Dream Corps 26-1140201 501(c)(3) 125.000 N/A IN/A Partner Support -

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Faith and Freedom Coalition 27-0182697 501(c)(4) 40.000 N/A IN/A Partner Support -

Criminal Justice Reform

Families Against Mandatory	52-1750248	501(c)(4)	80,000	N/A	NA	Partner Support -
Inc 3700 Crestwood Pkwy Suite 975 Duluth, GA 30096		,,,,	,	,		Criminal Justice Reform

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

Minimums

1100 H Street NW Suite 1000 Washington, DC 20005

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-1349353 501(c)(4) 200.000 N/A IN/A Freedom Works Inc Partner Support -Criminal Justice Reform

111 K Street NE Suite 600 Washington, DC 20002 52-0789800 N/A Partner Support -

Leadership Conference on Civil 501(c)(4) 200,000 N/A & Human Rights Criminal Justice Reform

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

1629 K Street NW 10th Floor Washington, DC 20006

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

Criminal Justice Reform

Rebuild The Dream 436 14th St Suite 920 Oakland, CA 94612	90-0741275	501(c)(4)	50,000	N/A	I .	Partner Support - Criminal Justice Reform
Texas Public Policy Foundation	74-2524057	501(c)(3)	121,031	N/A	N/A	Partner Support -

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

901 Congress Avenue

Austin, TX 78701

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 26-2404352 501(c)(4) 50.000 N/A IN/A Empower Iowa Fund State Coalition Support - Support Education 5750 Westown Pkwy Ste 200-Efforts in Iowa

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

158 WDM. IA 50266

Pegasus Institute Inc 81-3358989 501(c)(3) 50.000 N/A IN/A State Coalition Support 235 S 5th Street 1st Floor - Kentucky Criminal Louisville, KY 40202 Justice Reform

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 46-3292694 501(c)(3) 30.000 N/A IN/A Veterans Defense Project State Coalition Support - Minnesota Criminal Justice Reform

Reform Campaign

3201 Hennepin Ave Minneapolis, MN 55408

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

PO Box 10069

Cranston, RI 02910

Rhode Island Center for 45-2805369 501(c)(3) 7,500 N/A N/A State Coalition Support - Rhode Island's CAE Freedom and Prosperity

efil	e GRAPHIC pr	int - DO NOT PROCESS	-	DLN: 934	9329	5010	419
Sch	edule J	Compensation	on Information	ОМ	B No	1545-0	0047
(For	n 990)	For certain Officers, Directors, Tro	ustees, Key Employees, and Hig	hest			
		Compensat ► Complete if the organization answe	ed Employees	line 23	20	18	}
		► Attach t	o Form 990.				
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/Form990</u> for in	nstructions and the latest inforn	nation.		o Pul ectio	
	ne of the organiza			Employer identificat			
05.	Justice Action Netwo	K		47-2975432			
Pa	rt I Questi	ons Regarding Compensation					
						Yes	No
1a		piate box(es) if the organization provided any of t ection A, line 1a Complete Part III to provide any					
	First-class	or charter travel	Housing allowance or residence for	personal use			
		· -	Payments for business use of persoi				
		· · · · · · · · · · · · · · · · · · ·	Health or social club dues or initiation				
	☐ Discretion	ary spending account LJ F	Personal services (e g , maid, chauf	reur, cner)			
b		es in line 1a are checked, did the organization foll Il of the expenses described above? If "No," comp		nent or reimbursement	1 b		
2		tion require substantiation prior to reimbursing or		. 1-2	2		
	directors, truste	es, officers, including the CEO/Executive Director,	regarding the items checked in line	e la'			
3		f any, of the following the filing organization used		ne			
		EO/Executive Director Check all that apply Do no d organization to establish compensation of the CE		n Part III			
			Mushban and I am and a submark				
			Written employment contract Compensation survey or study				
			Approval by the board or compensa	tion committee			
		-					
4	related organiza	did any person listed on Form 990, Part VII, Sect tion	ion A, line Ta, with respect to the n	lling organization or a			
а	Receive a sever	ance payment or change-of-control payment?			4a		No
b		receive payment from, a supplemental nonqualifi	ed retirement plan?		4b		No
c		receive payment from, an equity-based compens	3		4c		No
	If "Yes" to any o	f lines 4a-c, list the persons and provide the appli	cable amounts for each item in Part	: III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations m	oust complete lines 5-9				
5		d on Form 990, Part VII, Section A, line 1a, did th	-				
	compensation co	ontingent on the revenues of	, , , , ,				
а	The organization	?			5a		No
b	Any related orga				5b		No
	•	5a or 5b, describe in Part III					
6		d on Form 990, Part VII, Section A, line 1a, did th ontingent on the net earnings of	e organization pay or accrue any				
а	The organization	?			6 a		No
b	Any related orga				6b		No
_	•	6a or 6b, describe in Part III					
7	payments not de	d on Form 990, Part VII, Section A, line 1a, did th escribed in lines 5 and 67 If "Yes," describe in Part	III	1	7		No
8		nts reported on Form 990, Part VII, paid or accure utial contract exception described in Regulations se		escribe			
					8		No
9	If "Yes" on line 8 53 4958-6(c)?	3, did the organization also follow the rebuttable p	resumption procedure described in	Regulations section	9		
For E		ction Act Notice, see the Instructions for For	m 990 Cat No. 5	i0053T Schedule J		990)	2018

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

(A) Name and Title		(B) Breakdov	vn of W-2 and/or 1099-MISC	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
Holly Harris VonLuehrte	(i)	107,997	29,629	0	3,850	2,004	143,480	0
(ii) 107,997 29,629 2 Jeanette Moll (i) 79,670 20,600		29,629	0	3,850	2,004	143,480	0	
2 Jeanette Moll Deputy Director	$\overline{}$		20,600	0	2,800	330	103,400	0
	(ii)	79,670	20,600	0	2,800	330	103,400	0
	!]	, 			,	1
								1
	+						,	1

Schedule J (Form 990) 2018 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Schedule J (Form 990) 2018

efile GRAPH	Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Attach to Form 990 or 990-EZ. For the Treasur Form 990 or 990-EZ. For the Interview of the Intervi						
CCHEDIII	CHEDIUE O						
(Form 990 or EZ)		Complete to pro	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 for the latest information. Employer identification number 47-2975432 That Information Explanation Explanation Explanation in the country progressive and conservative partners and collaborate with law enforceme rights, victims' rights, and faith-based groups to make our justice sy live and cost-efficient. The Justice Action Network employs federal and sta				
Department of the T	reasurv	► Go to <u>u</u>		Aformation to Form 990 or 990-EZ Information for responses to specific questions on EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Ins. Ins. Inspection Employer identification number 47-2975432 Explanation Explanation Explanation Explanation Explanation Inspection Employer identification number 47-2975432			
					Employer identi	2018 Open to Public Inspection	
US Justice Action N	letwork				47-2975432		
Return Reference				Explanation			
Form 990, Part I, Line 1, Description of Mission and Significant Activities	to bring to nt, busines stem more te-specific nal justice ng reforms rm crimina safety thro rriers face	gether progressive and co ss, civil rights, victims' righ e effective and cost-efficier lobbying, public advocacy reforms that advance the s that safely address the p al codes to end the system bugh effective rehabilitation d by those returning home	nservative partners arts, and faith-based groat. The Justice Action of and public education following policy goals rison population and a atic problems of overcon programs To reduce after detention or income.	nd collaborate with law enforcements to make our justice sy Network employs federal and state of the following the following criming the following the follo	0000		

Return Reference	Explanation
Form 990, Part III, Line 4a Lobbying and Policy Advocacy (continued)	USJAN highlighted state successes for members of Congress in support of federal criminal j ustice reform USJAN was also active in Arizona, Arkansas, Iowa, Kentucky, Louisiana, Minn esota, Mississippi, New Mexico, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhod e Island, Tennessee, and Utah on state-specific criminal justice reform issues

990 Schedule O, Supplemental Information

Return
Reference

Explanation

Part V, Lines	Coalition for Public Safety (CFPS), a related organization, serves as the common paymaster
2a & b, Part	and files all required federal employment returns. The number of employees reported in Pa
VII, Part IX	rt V, Line 2a represents the number of CFPS employees reported on Form W-3 filed by the co
Compensation	mmon paymaster USJAN reimburses staffing costs to CFPS under an agreement based upon time
& Benefits	sheet allocations and actual payroll costs
Reporting	

Return Explanation

Form 990, A draft of the Federal Form 990 is circulated to the Board of Directors for review prior to filing with the IRS

Part VI,

Section B,

line 11b

Return Explanation
Reference

line 12c

Form 990,
Part VI,
Section B,
Compliance with the conflict of interest policy is monitored on an ongoing basis for new conflicts and on an annual basis at the annual board meeting

Return Explanation
Reference

Form 990, Part VI, Section B, line 15

990 Schedule O, Supplemental Information

Return

Reference		
Form 990, Part VI,	The Organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request	1
Section C, line 19	Toques.	I

Explanation

Return Explanation Reference

11010101100	
Form 990,	Communications consulting Program service expenses 667,443 Management and general expens
Part IX line	es 0. Fundraising expenses 0. Total expenses 667 443. Polling. Program service expenses 13

8,000 Management and general expenses 0 Fundraising expenses 0 Total expenses 138,000

990 Schedule O, Supplemental Information

Return Explanation

Reference	
Form 990, Part XII, Line	The Board of Directors assumes responsibility for the oversight of the audit and the selection of the independent accountant
0-	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R** (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

2018

DLN: 93493295010419 OMB No 1545-0047

> **Open to Public** Inspection

Name of the organization JS Justice Action Network							Employ	er identifi	cation	number		
							47-297	5432				
Part I Identification of Disregarded Entities Complete	f the organ	ızatıon answe	red "Yes	" on Form	990, Part	IV, line 33	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary act	vity	(c Legal domi or foreign) cile (state country)	(d) Total inco	ome E	(e) nd-of-year ass	sets		f) ontrolling tity	
Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	ns Comple	te if the orgai	nızatıon	answered '	'Yes" on F	orm 990,	Part IV,	line 34 bed	cause it	had one or	more	
Name, address, and EIN of related organization	Prima	(b) ary activity	Legal dor	(c) nicile (state in country)	(d Exempt Coo) le section	Public chai (if section	rity status	Dire	(f) ct controlling entity	Section (13) co ent	ntrolled ity?
(1)Coalition for Public Safety 444 N Capitol Street NW Washington, DC 20001 47-2675069	Charitable-	See Part VII		VA	501(c)(3)		Line 7				Yes	No No
The Design of Design of the Land Making of the Total Making of the	000			+ No E012					Sah	Iula D (Fauna	000) 3	210

(a) e, address, and EIN of lated organization		Legal domicile (state or foreign country)	Direct controlling entity		ted, total incom om		Disprop alloca	rtionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	parti	nging ner?	Percent owners
							Yes	No		Yes	No	
ations Taxable as a Coorganizations treated as	Corporation a corporation	or Trus on or tru	t Complete st during th	 If the orga ne tax year.	nization ans	 swered "Yes	" on F	l orm 99	l 90, Part IV,	line	34	
(b) Primary activity	L do (state	.egal mıcıle or foreıgn			(e) Type of entity C corp, S corp, or trust)	(f) Share of total income		year	of- Perce	ntage	(13	(i) ection ! 3) con entit
												Yes
												\perp
												\dashv
	organizations treated as	(b) Primary activity (state	zations Taxable as a Corporation or Trus organizations treated as a corporation or tru	rations Taxable as a Corporation or Trust Complete organizations treated as a corporation or trust during the legal domicile (state or foreign	country) sections 51 514) rations Taxable as a Corporation or Trust Complete If the orga organizations treated as a corporation or trust during the tax year. (b) Primary activity (c) Legal domicile (state or foreign Direct controlling entity (d)	country) sections 512- 514) Eations Taxable as a Corporation or Trust Complete If the organization ansorganizations treated as a corporation or trust during the tax year. (b) Primary activity (c) Legal domicile (state or foreign (d) Direct controlling entity (C corp, S corp, or trust)	country) sections 512- 514) Eations Taxable as a Corporation or Trust Complete if the organization answered "Yes organizations treated as a corporation or trust during the tax year. (b) Primary activity (c) Legal domicile (state or foreign Direct controlling entity (C corp, S corp, or trust) (Type of entity (C corp, S corp, or trust) (Type of entity or trust)	rations Taxable as a Corporation or Trust Complete If the organization answered "Yes" on Forganizations treated as a corporation or trust during the tax year. Corporation Corporat	country) sections 512- 514) Yes No Yes No Rations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 9 organizations treated as a corporation or trust during the tax year. (b) Primary activity (c) Legal domicile (state or foreign Direct controlling entity (Corp., S corp., or trust) organizations (g) Share of total income year assets	country) sections 512- 514) Yes No Yes No Rations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, organizations treated as a corporation or trust during the tax year. (b) Primary activity (c) Legal domicile (state or foreign Direct controlling entity (C) Type of entity Type of entity (C) Share of total income year assests assests assests assests	country) Sections 512- Yes No Yes Yes No Yes Yes No Yes Yes	country) sections 512- 514) Yes No

(1)Coalition for Public Safety

(2)Coalition for Public Safety

(3)Coalition for Public Safety

Schedule k (Form 990) 2018		Pa	ige 3
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		Yes	No
1 During the tax year, did the orgranization 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	1a		No
b Gift, grant, or capital contribution to related organization(s)	1 b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g	$\overline{}$	No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1 i	\vdash	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	10	Yes	
p Reimbursement paid to related organization(s) for expenses	1р	Yes	
q Reimbursement paid by related organization(s) for expenses	1 q		No
r Other transfer of cash or property to related organization(s)	1r	<u> </u>	No
. Other transfer of cash of property to related organization(3).			NO.

k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No						
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		No						
m	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)										
О	Sharing of paid employees with related organization(s)	10	Yes							
р	Reimbursement paid to related organization(s) for expenses	1 p	Yes							
q		1q		No						
			ĺ							
r	Other transfer of cash or property to related organization(s)	1r		No						
s	Other transfer of cash or property from related organization(s)	1 s		No						
2	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 Amount involved Method of determining amount type (a-s)	(d) of determining amount involved								

Ν

0

96,911

504,723

598,365

Shared services agreement

Time sheet allocations

Reimbursed expenses

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

was not a related organization. See instructions regarding exclusion																		
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	sections 512-	section 501(c)(3) organizations?						(f) (g) Share of total income end-of-year assets		(h) Disproprtionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership	
			514)	Yes	No	<u> </u>		Yes	No		Yes	No	١					
Schedule R (Form 990) 2018												0) 2018						

Schedule R (Form 990) 2018 Page 5 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Return Reference Explanation Schedule R, Part II, Column (b)-The Coalition for Public Safety's mission is to make our criminal justice system smarter, fairer, and more cost effective at the federal, state, and local level Coalition for Public Safety

Schedule R (Form 990) 2018