Form	99	0
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(Rev January 2020)

Department of the Treasury

• Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Open to Public

	nal Revenue				www.irs.gov/Form9	90 for instruct	tions and	the latest info	rmation.	1.0	<u> </u>	Inspection	
Α	For the 2			r tax year beg	inning		, 2019	, and ending			,		
В	Check if app	plicable	С		· 				D	Employer	ployer identification number		
	Addres				S ADVANCIN	G JUSTIC	E				57756		
	Name (TA INC	Danimisir	40			E	Telephon	e number		
	Initial r				PARKWAY #1	48				(404) 585	5-8446	
	Final retu	urn/terminated	NORCRU	OSS, GA 3	0093								
	Amend	led return							G	Gross rec	eipts \$	2,335,816.	
	Applica	ation pending	F Name a	ind address of prin	icipal officer			\sim 1	(a) Is this a grou			ales? Yes X No	
		[:	SAME A	AS C ABOV	E			~ 、ケル	(b) Are all subo If No," atta	rdinates ii	ncluded?	Yes No	
1	Tax exempt status X 501(c)(3) 501(c) ()										(555 115(11	301.01.0,	
J	Websit	e:► WWV	V. ADVA	NCINGJUS:	TICE-ATLAN	ra.org		Н	(c) Group exem	ption nun	nber 🏲		
K	Form of c	organization	X Corpora	tion Trust	Association	Other ►	L	Year of formation	2010	M Sta	ate of lega	al domicile GA	
Pa		Summary											
	1 Brie	efly describ	e the org	anızatıon's mi	ssion or most si	gnificant activ	rities SI	EE_SCHEDU	JLE_O				
ø			. 										
auc	ļ												
Ë													
Governance	2 Che	eck this box	(▶	if the organiza	ition discontinue	d its operation	ns or disp	osed of more -	than 25% o	f its net			
প্ৰ	3 Nur				verning body (Pa ers of the gover			1b) .		-	3	$\frac{13}{12}$	
3 2027 Activities & 0	5 Tot				d in calendar yea		· • • • • • • • • • • • • • • • • • • •			\vdash	5	13 27	
\$ ₹	6 Tot			eers (estimate		2013 (1 4.1	1		~		6	50	
Act of	7a Tot				m Part VIII, colu	mn (C), line 1	12 + 4	CG 232	-		7a	0.	
-	b Net	t unrelated 1	business	taxable incon	ne from Form 99	0-T, line 39	'	. .	•	-	7b	0.	
۰							I	(J Prior	Year		Current Year	
AUG e	8 Cor	ntributions a	and grant	ts (Part VIII, li	ne 1h)				27, 1	20,78	39.	2,276,611.	
Revenue	9 Pro	gram servi	ce revenu	ue (Part VIII, I	ine 2g)					29,99	98.	3,738.	
l è					1 (A), lines 3, 4,								
2 4					, l _i nes 5, 6d, 8c,							18,475.	
				 	11 (must equal F		ımn (A), lıı	ne 12)		50,78		2,298,824.	
3	1				rt IX, column (A)				1	84,53	36.	126,717.	
Q	1				t IX, column (A)				<u></u>				
ø	í			·	yee benefits (Pa		(A), lines	5-10)	8	<u>62,92</u>	28.	1,290,224.	
Expenses	16 a Pro	ifessional fu	ındraisinç	g fees (Part IX	(, column (A), lır	ne 11e)							
- d	b Tot	al fundraisii	ng expen	ses (Part IX,	column (D), line	25) ►		56,013.			- 1	•	
மி	17 Oth	er expense	s (Part I)	K, column (A)	, lines 11a-11d,	11f-24e)			6	43,45	55.	869,449.	
	18 Tot	al expenses	s Add lin	ies 13-17 (mu:	st equal Part IX,	column (A),	line 25)			90,91		2,286,390.	
	19 Rev	venue less e	expenses	Subtract line	e 18 from line 12	<u>:</u>				59,86		12,434.	
500								,	Beginning of			End of Year	
sets	20 Tot	al assets (F	art X, lin	ie 16)						40,90		1,789,836.	
Ass J Ba	21 Tot	al liabilities	(Part X,	line 26)						16,67	75.	53,171.	
Net Funda	22 Net	assets or f	und bala	nces Subtrac	t line 21 from lin	e 20			1,7	24,23	31.	1,736,665.	
	rt II	Signature	Block						·				
		_ -			rn, including accompar I on all information of	ying schedules an	d statements,	and to the best of	my knowledge a	nd belief, if	t is true, c	orrect, and	
comp	olete Declara	ation of prepare	er (other tha	n officer) is based	on all information of	which preparer h	nas any know	rledge 		11			
				\sim					- Z	<u> 30/8</u>	<i>ROAL</i>)	
Sig		Signature	of officer		\wedge		λ	1	Date	•			
He	re			nie Cr	10 trec	utive_	Direct	TOC					
			orint name a			L							
		Print/Type pre			Prepaler's sign	Ture A D A	$\cap \Delta$	Date	Che	ىب	ıf PT		
Pai	id SHEILA M. KOZAK, CPA COCACCTI PULLY								1 NV self	employed	P	00687026	
	eparer	Firm's name			DZAK, CPA								
Us	e Only	Firm's address			BORO RD STE				Firm	s EIN ►		1403280	
	MORROW, GA 30260-2944						Pho	ne no		61-4200			
					er shown above		tions)					X Yes No	
BAA	A For Par	erwork Red	duction A	ct Notice, se	e the separate in	structions.		TEEA	0101L 01/21/20)		Form 990 (2019)	

Par		_
		X
1	,	
	SEE_SCHEDULE O	
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 X 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 X 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	
4 a	(Code) (Expenses \$ 743,367. including grants of \$ 126,717.) (Revenue \$	<u>一</u>
	ORGANIZING AND CIVIC ENGAGEMENT	- '
	IN 2019, WE HELD A SOUTHEASTERN REGIONAL ORGANIZER ACADEMY, CO-HOSTED BY THE	
	SOUTHEAST IMMIGRANT RIGHTS NETWORK (SEIRN). OVER THE COURSE OF FOUR DAYS, 60 PEOPLE	
	REPRESENTING COMMUNITIES OF COLOR ACROSS 23 DIFFERENT CITIES AND 9 DIFFERENT STATES,	
	AGED ANYWHERE FROM 13 TO 40 YEARS OLD, CAME TOGETHER TO ENVISION AND BUILD SOLIDARITY	Ϋ́
	IN THE SOUTH.	
4 b	(Code) (Expenses \$ 616,650. including grants of \$) (Revenue \$ 3,738.	.)
	LEGAL SERVICES	
	ASIAN AMERICANS ADVANCING JUSTICE - ATLANTA PROVIDES A RANGE OF FREE AND LOW COST	
	IMMIGRATION LEGAL SERVICES TO REFUGEES, ASYLUM SEEKERS, IMMIGRANTS, AND MIGRANTS IN	
	GEORGIA. OUR MULTILINGUAL STAFF PROVIDES IMMIGRATION LEGAL SERVICES TO HELP ELIGIBLE	
	PERSONS AND THEIR FAMILIES OBTAIN LEGAL STATUS AND CITIZENSHIP AND PROVIDES LEGAL	
	REPRESENTATION IN REMOVAL PROCEEDINGS. IN ADDITION, THE LEGAL SERVICES PROGRAM	
	COLLABORATES WITH VARIOUS COMMUNITY PARTNERS AND IMMIGRANT RIGHTS ORGANIZATIONS TO	
	HOLD FREE LEGAL WORKSHOPS AND COMMUNITY EDUCATION PROGRAMS IN GEORGIA.	
4 c		_)
	POLICY ADVOCACY	
	EVERY YEAR WE HOST AN ADVOCACY DAY FOR THE LARGEST GATHERING OF THE ASIAN AMERICAN	
	COMMUNITY, BUSINESS, AND FAITH LEADERS AT OUR STATE CAPITOL. OUR WORK IS IMMENSELY	
	IMPORTANT DURING THE LEGISLATIVE SESSION BECAUSE WE ARE ONE OF THE ONLY GROUPS	
	THAT HAS A REGULAR PRESENCE AT THE STATE CAPITOL EACH YEAR. WE WORK COLLABORATIVELY	
	WITH OTHER IMMIGRANT AND CIVIL RIGHTS GROUPS TO MAKE SURE THAT WE STAND UNITED AND	
	WORK ON ISSUES THAT IMPACT PEOPLE OF COLOR.	
4 d	Other program services (Describe on Schedule O)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4 e	Total program service expenses ► 1,976,667.	

' Form 990 (2019) ASIAN AMERICANS ADVANCING JUSTICE

27-2577567

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1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			_
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
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	11 b		Х
c	Did the organization report an amount for investments — program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	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	11 f	Х	
	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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	14b		х
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	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
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)	17		Х
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	18	Х	
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	19		Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
ЗДД	TFFA01031 07/31/19	Form	990	(2019)

' Form 990 (2019) ASIAN AMERICANS ADVANCING JUSTICE Partily Checklist of Required Schedules (continued)

	8.10			Yes	No	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	individuals on Part IX,	22		X	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of and former officers, directors, trustees, key employees, and highest compensated employees Schedule J	the organization's currer? If 'Yes,' complete	23		Х	
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of mithe last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b is complete Schedule K. If 'No, 'go to line 25a	ore than \$100,000 as of through 24d and	24a		Х	
ŧ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exc	eption?	24b			
(Did the organization maintain an escrow account other than a refunding escrow at any time di any tax-exempt bonds?	uring the year to defease	24c			
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the	ne year?	24d			
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an e transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	xcess benefit	25a		Х	
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified p that the transaction has not been reported on any of the organization's prior Forms 990 or 990 Schedule L, Part I		25b		Х	
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payable former officer, director, trustee, key employee, creator or founder, substantial contributor, or 3 or family member of any of these persons? If 'Yes,' complete Schedule L, Part II	es to any current or 35% controlled entity	26		X	
27	Did the organization provide a grant or other assistance to any current or former officer, direct employee, creator or founder, substantial contributor or employee thereof, a grant selection comember, or to a 35% controlled entity (including an employee thereof) or family member of an persons? If 'Yes,' complete Schedule L, Part III	ommittee	27		Х	
28	Was the organization a party to a business transaction with one of the following parties (see Sinstructions, for applicable filing thresholds, conditions, and exceptions)	Schedule L, Part IV				
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial 'Yes,' complete Schedule L, Part IV	contributor? If	28a		х	
t	A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part I	'V	28b		Х	
C	; A 35% controlled entity of one or more individuals and/or organizations described in lines 28a Yes,' complete Schedule L, Part IV	or 28b? If	28c		х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete	Schedule M	29		X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, contributions? If 'Yes,' complete Schedule M	or qualified conservation	30		х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete	Schedule N, Part I	31		Х	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets 2 is Schedule N, Part II	If 'Yes,' complete	32		х	
33	Did the organization own 100% of an entity disregarded as separate from the organization und 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	der Regulations sections	33		Х	
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule and Part V, line 1	R, Part II, III, or IV,	34		х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		35a		X	
t	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	on with a controlled	35b			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chorganization? If 'Yes,' complete Schedule R, Part V, line 2	arıtable related	36		Х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a relative treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part		s 37		х	
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 Q						
Par	Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part V			Vaa	l Na	
1 9	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1 a	25	Yes	No	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b	0			
	Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?		1 c			
					22.2	

Form 990 (2019) ASIAN AMERICANS ADVANCING JUSTICE

[Rart Val Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No
2	a 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	2 a	27		
١	If at least one is reported on line 2a, did the organization file all required federal employment		2 b	X	~
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see inst	ructions)	子気	a Ti	1197,1
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year	7	3 a		X
1	o If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule O		3 b		
4	At any time during the calendar year, did the organization have an interest in, or a signature of financial account in a foreign country (such as a bank account, securities account, or other financial account.)	or other authority over, a cancial account)?	4 a	,	х
1	o If 'Yes,' enter the name of the foreign country		美雄	克科 。	it an
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Fin	ancial Accounts (FBAR)	- K.	4	
5 :	${f a}$ Was the organization a party to a prohibited tax shelter transaction at any time during the tax	year ⁹	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte	r transaction?	5 b		X
•	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
6	Does the organization have annual gross receipts that are normally greater than \$100,000, ar solicit any contributions that were not tax deductible as charitable contributions?	d did the organization	6 a		Х
١	o If 'Yes,' did the organization include with every solicitation an express statement that such connot tax deductible?	ntributions or gifts were	6 b		
7	Organizations that may receive deductible contributions under section 170(c).		海 森	13.84	14 - M
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and pa	rtly for goods and -	26.5	XX	74
	services provided to the payor?	,	7 a	X	
	of the organization notify the donor of the value of the goods or services provided?		7 b	Х	
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for wh Form 8282?	,	7 c		Х
	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d	1 Const	FET.	二组和
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal be		7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit		71	ļ	X
	g If the organization received a contribution of qualified intellectual property, did the organization as required?		7 g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?		7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maint organization have excess business holdings at any time during the year?	ained by the sponsoring	8	41.77-2	42.574
Ω.	Sponsoring organizations maintaining donor advised funds.		7. P. Net	#HE	50F1
9	a Did the sponsoring organization make any taxable distributions under section 4966?		9 a	** 55418	* 164.4 14.1
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related pers	on?	9 6		
	Section 501(c)(7) organizations. Enter	•	E7-33	L. Pres	ध्येर्डल्ट
	Initiation fees and capital contributions included on Part VIII, line 12	10 a		10	5
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b		5	7.15
	Section 501(c)(12) organizations. Enter			10.5	1
	Gross income from members or shareholders	11 a		1	137
Ł	Gross income from other sources (Do not net amounts due or paid to other sources			19	1
	against amounts due or received from them)	11 b	25	14.13	100
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of l		12 a		
	of Yes, enter the amount of tax exempt interest received or accrued during the year	12 b			1
	Section 501(c)(29) qualified nonprofit health insurance issuers.		1	it. Firt	1,432,521
ā	Is the organization licensed to issue qualified health plans in more than one state?	^	13 a	buses ha	124.2.4
	Note: See the instructions for additional information the organization must report on Schedule	0	N	2	
t	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	13 Ы	11.2		
	Enter the amount of reserves on hand	13 c		3	70
-	Did the organization receive any payments for indoor tanning services during the tax year?		14 a	41 64	X
	of Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on S	chedule Q	14 b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in				
	excess parachute payment(s) during the year?		15]	Х
	If 'Yes,' see instructions and file Form 4720, Schedule N		医学 独	Y.	233
16	Is the organization an educational institution subject to the section 4968 excise tax on net inve	estment income?	16		Х
	If 'Yes,' complete Form 4720, Schedule O		HIM?	Miss.	3.05
ÃΑ	TEEA0105L 07/31/19		Form	990 (2019)

Form 990 (2019) ASIAN AMERICANS ADVANCING JUSTICE 27-2577567 Page 6 Part VI 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 on 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 No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year 13 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 on Schedule O b Enter the number of voting members included on line 1a, above, who are independent 1 b 13 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 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Χ X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7 a 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? Х 7 a 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 Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 a X b Each committee with authority to act on behalf of the governing body? $\overline{\mathbf{X}}$ 8 b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Nο Yes 10 a Did the organization have local chapters, branches, or affiliates? 10 a 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? 10 h X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O Х 12 a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12 b X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in SEE SCHEDULE O Х Schedule O how this was done 12 c 13 Did the organization have a written whistleblower policy? 13 14 14 Did the organization have a written document retention and destruction policy? 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? X a The organization's CEO, Executive Director, or top management official 15 a X SEE SCHEDULE O 15_b **b** Other officers or key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions) 16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16 a 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?	1001	_
Sec	ction C. Disclosure		_
17	List the states with which a copy of this Form 990 is required to be filed GA		_
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 5010 available for public inspection. Indicate how you made these available. Check all that apply	(c)(3)s only)	
	Own website		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year SEE SCHEDULE O	le to	
20	State the name, address, and telephone number of the person who possesses the organization's books and records		

20 State the name, address, and telephone number of the person who possesses the organization's books and records ► STEPHANIE CHO 5680 OAKBROOK PARKWAY STE 148 NORCROSS GA 30093 (404) 585-8446

Partivil 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

- 1 a 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

See instructions for the order in which to list the persons above

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee										
				(C))					
(A) Name and title	(B) Average hours per	15	both dir	ector	officer /trusti		3	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W 2/1099-MISC)	related organizations (W 2/1099 MISC)	compensation from the organization and related organizations
(1) STEPHANIE CHO	40							'		
EXECUTIVE DIR.	10			Х)		}	117,967.	0.	7,237.
(2) SHANEY B LOKKEN	1									
BOARD MEMBER	7-0-	x				}		0.	0.	0.
(3) BENJAMIN YIN	1									
BOARD MEMBER	0	Х		_				0.	0.	_ 0.
(4) BRYAN RAMOS	1					_	Γ			
BOARD MEMBER	0	X						0.	0.	0.
(5) DAN HUYNH	1						Γ			
BOARD MEMBER	0	Х						0.	0.	0.
(6) SHUAIB HANIEF	_11									
BOARD MEMBER	0	Х					<u>L</u> .	0.	0.	0.
(7) SAMEERA FAZILI	1_1_						ĺ	ĺ		
BOARD MEMBER	0	Х					L	0.	0.	0.
(8) LE DAM DOAN	1									
BOARD MEMBER	0	X					L	0.	0.	0.
(9) AMBREEN DELAWALLA	1					'				
BOARD MEMBER	0	Х					_	0.	0.	0.
(10) TRESSA COPENHAVER	1_1_									
BOARD MEMBER	0	Х			<u> </u>	<u> </u>		0.	0.	0.
(11) MAYU ARITA	11					,	}			
BOARD MEMBER	0	Х			L			0.	0.	0.
(12) CASSANDRA SOLOMON	2				}					
TREASURER	0	Х		Х			L	0.	0.	0.
(13) KIMBERLY BOURROUGHS DEBROW	2						i	_ !		
SECRETARY	0	X		Х	ļ			0.	0.	0.
(14) SONJUI L KUMAR	2								_	_
CHAIRMAN	0	Х		X	Į _			0.	0.	0.

Tart VII Section A. Officers, Directors, Ti	,	rtey		_		.es,	all	d riigilest coi	iipelisateu Eiii	pioyees (continued)
	(B)				C)					
(A)	Average	(do	not c	heck	sition more	than	one	(D)	(E)	(F)
Name and title	hours per	box,	, unle cer ar	ss pe	erson d <i>irec</i> t	ıs bott or/trusi	h an tee)	Reportable compensation from	Reportable compensation from	Estimated amount
	week the organization related organizations					of other compensation from				
	hours	Individual trustee or director	퇃	Officer	Key employee	흥울) T	(11-271033 111100)	(the organization and related
	related' organiza	eto Sual	ş	4	夏	yee co	역			organizations
	tions below	ੇ ਲੂ	호		Jyee	l ĝ				
	dotted line)	tee	nstitutional trustee			nsa				
			()			हि				
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(16)	<u> </u>									
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(21)						1-1				
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(23)										
	1	1	ĺĺ			ĺĺ				
(24)										
		1]		İ,)]				
(25)										
		1								
1 b Subtotal	•							117,967.	0.	7,237.
c Total from continuation sheets to Part VII, Sectio	n A					I	•	0.	0.	0.
d Total (add lines 1b and 1c)		_					<u> </u>	117,967.	0.	7,237.
2 Total number of individuals (including but not limit	ted to tho	se lis	ted	abo	ve)	who i	rece	eived more than \$	100,000 of reporta	ble compensation
from the organization 1										
		-								Yes No
3 Did the organization list any former officer, direct	or, trustee	e, key	em e	nplo	yee,	or h	ighe	est compensated	employee	
on line 1a ³ If 'Yes,' compléte Schedule J for sucl	n individua	9/			-					3 X
4 For any individual listed on line 1a, is the sum of	reportable	com	nper	nsati	ion a	and o	the	r compensation fr	om	/
the organization and related organizations greate such individual	r than \$15	50,00	0? <i>I</i>	f 'Ye	es, '	comp	lete	e Schedule J for		4 X
										- A
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes	: compens .' <i>complet</i>	atior e Sci	ı tro hedi	m a ule .	ny ι <i>I for</i>	ınrela such	ilea I <i>pe</i>	i organization or ii erson	naividuai	5 X
Section B. Independent Contractors							-			. — l —
1 Complete this table for your five highest compens	ated inde	pend	ent	con	tract	lors ti	hat	received more that	an \$100,000 of	
compensation from the organization Report comp	pensation	for th	ne c	aler	ndar	year	en			
(A) Name and business addr	ess							(B) Description ((C) Compensation
NONE ,								ļ		
	_ 							ļ		
								 		
								 -		
2 Total number of independent contractors (including	a but set	limite	ad +4	a the	000	listad	ah	love) who receive	t more than	- +
2 Total number of independent contractors (including \$100,000 of compensation from the organization	-		ט ונ	<i>.</i> (11(v a c	ii st e u	เลบ	JOVEN WITH TECEIVE	, more triair	
The state of the s			100	0717	21/20					Form 990 (2019)
BAA		TEE.A0	IUSL	0//3	o 1/19					1000 (2019)

		Check if Schedule	e O contains a	respo	onse or note to any	/ line in this Part VII	ik '		· 📙
						(A) Total revenue	(B) ' Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ats ats	1 a	Federated campaigr	ns	1 a					
irat		Membership dues		1 b			DIE TOTAL		
S, C	С	Fundraising events	Ţ	1 c	88,583.				
Sift lar	d	Related organization	าร	1 d					
IS, E		Government grants (contri	· L	1 e					
Contributions, Gifts, Grants and Other Similar Amounts	ſ f	All other contributions, gi similar amounts not inclu		16					
the f		Noncash contributions inc		1 f	2,188,028.				
d d	9	lines 1a-1f		1 g	·	THE CHARLES			经现代的
<u> </u>	h	Total. Add lines 1a-1	1f		<u></u>	2,276,611.		多种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种	经验证
ıne		,		-	Business Code	话是此种健议的特	HERETE SEEDING	WHEN THE SE	和心理公司
š Š	2 a	LEGAL SERVIC	<u>ES</u>		541100	3,738.	3,738.		
ă	b						· · · · · · · · · · · · · · · · · · ·		
Ğ.	С						ļ	·	
Š	d						,		
an.	e			-,}					
Program Service Revenue	1	All other program se		•		2 500	UNIVERSAL IN THE MEDICAL PROCESSOR	ANTONIA POLITICA PARAGO ANTANA	TACAVIRATION THREETERS TOWN
<u> </u>		Total. Add lines 2a-2				3,738.	ALMERICA REPORT		
,	3	Investment income ((including divi its)	dends	, interest, and		·		
	4	Income from investr		empt	bond proceeds 🕨				
	5	Royalties	none or tax ox	Cilip	>		 		
	١	[(i) Re	al	(ii) Personal '		THE REPORT OF	AND THE REAL PROPERTY.	
	6 a	Gross rents	6a 18	475					
	b	Less rental expenses	6b						
	c	Rental income or (loss)	6c 18.	475					
	d	Net rental income or			· · · · · · ·	18,475.	,	, , ,	18,475.
	7 2	Gross amount from	(ı) Secu	rities	(ii) Other	E 1 TANK THE PARTY.	TALL THE PARTY OF		
	,	sales of assets	7a	• •					
	l b	other than inventory Less cost or other basis	74		 				
			7b						
	С	Gain or (loss)	7c		<u> </u>			NAME OF STREET	
	d	Net gain or (loss)			·	,	.1	, , , , , , , , , , , , , , , , , , ,	
ō	8 a	Gross income from fundra	aising events	ł	, '				
Ę		(not including \$	88,583	<u>- </u>	- 5				
ě		of contributions reported	on line Ic)						
์ Other Reven	١.	See Part IV, line 18		8	307332.				
the	ŀ	Less direct expense		· [8]	30/332.	生物26時期 750000	Service Properties in		
0		Net income or (loss)		sing e	vents -	Trees dates administra	THE PROPERTY OF THE PARTY OF THE PARTY.	THE STATE OF	CONTRACTOR CONTRACTOR
	9 a	Gross income from gamin See Part IV, line 19	ig activities	9:	_				
	۱ ,	Less direct expense	95 1	9					
		Net income or (loss)			<u>. </u>	THE TERMORESON OF SHAPE	Salar and American	AND SAN SERVICE SAN	PREFER DO TERMINA
•	l			activi	1	515003-A1005-20		THE TAX STREET	
	∏0a 	Gross sales of inventory, I returns and allowances	iess	10	a ··				
		Less cost of goods		10					
		Net income or (loss)				CONTRACTOR SUPPRISONS	A CONTRACT OF STREET STREET, S	The second secon	1
<u></u>	Ť			<u> </u>	Business Code	NEW YORK WAR	RECORDER	FERRENCE STATE	EASTERN THE STATE OF
Š a	11 a	•			•				
S S	b								
₩ K	С		_ .					1.	, .
Miscellaneous Revenue	b c d All other revenue					ı	· .		
Σ	е	Total. Add lines 11a	-11d		•		LEND METERS	The Property of the American State of the	
	12	Total revenue. See	instructions		, , ,	2,298,824.	3,738.	0.	18,475.

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 r	, ```````			
Do n 6b, 7	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part-VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	126,717.	126,717.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22			4, 2, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4,	1. 4. 6.
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			2	
5	Compensation of current officers, directors, trustees, and key employees	125,204.	71,468.	23,955.	29,781.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	940,866.	896,705.	33,970.	10,191.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	141,666.	128,641.	7,733.	5,292.
10	Payroll taxes	82,488.	74,913.	4,484.	3,091.
11	Fees for services (nonemployees)	027.2001			5/052.
а	Management				
	Legal	7,897.	1,872.	6,025.	
-	Accounting	19,030.	1,072.	19,030.	
	Lobbying	12,030.		12,030.	
	Professional fundraising services See Part IV, line 17		1 - May 1 - 2 - 25 - 31 - 31	The state of the s	
	Investment management fees		1 2 1 2 2 2 2 2 2 2 2	, k	
	Other (if line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	166,637.	120,262.	43,005.	3,370.
12	Advertising and promotion	20,264.	15,480.	3,018.	1,766.
13	Office expenses	70,890.	34,223.	36 <u>,</u> 667.	
14	Information technology				
15	Royalties				
16	Occupancy	97,872.	81,516.	16,356.	
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	146,436.	107,294.	36,620.	2,522.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	7,767.		7,767.	
	Insurance	2,400.		2,400.	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses on line 24e If line 24e amount exceeds 10% of line 25. column (A) amount line 24e			7,	
	of line 25, column (A) amount, list line 24e expenses on Schedule O)	The second second	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 2 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
а	PROGRAM EXPENSES	311,783.	311,783.		
	PRINTING AND PUBLICATIONS	10,921.	_ 3,075.	7,846.	
	DUES AND SUBSCRIPTIONS	6,760.	2,468.	4,292.	
	BOARD EXPENSES	542.	2,300.	542.	
	All other expenses	250.	250.		
	Total functional expenses Add lines 1 through 24e	2,286,390.	1,976,667.	253,710.	56,013.
		2,200,330.	2,3,0,001.		
	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)				

Part X 5 Balance Sheet . Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year Cash - non-interest-bearing 1,182,501 1,215,983. Savings and temporary cash investments. 2 3 3 Pledges and grants receivable, net 531,265 532,322. Accounts receivable, net 4 **以为是一个** Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 T. PEW Loans and other receivables from other disqualified persons (as defined under 沙亚 全种地外的体验的 THE TANK TO FOUND section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net Inventories for sale or use 8 9 Prepaid expenses and deferred charges 8,188 10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 37,431 10 b b Less accumulated depreciation 12,652 18,576 10 c 24,779 11 11 Investments - publicly traded securities Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 8,564 8,564. 1,740,906. 16 1,789,836. Total assets. Add lines 1 through 15 (must equal line 33) 16 17 Accounts payable and accrued expenses 3.305 17 51,121 18 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 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. 13,370 25 2,050. 26 Total liabilities. Add lines 17 through 25 16,675 53,171 Organizations that follow FASB ASC 958, check here X Balances and complete lines 27, 28, 32, and 33. 374,231 27 Net assets without donor restrictions 508,955. 28 .Net assets with donor restrictions 350,000 28 Fund Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 6 29 Capital stock or trust principal, or current funds 29 Assets 30 30 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 31 31 32 Total net assets or fund balances 724,231 32 1,736,665. Net

789,836.

740,906

33

33

Total liabilities and net assets/fund balances

Form	1990 (2019) ASIAN AMERICANS ADVANCING JUSTICE 2	1-2511561		Pa	ge 12		
Pai	t XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI				\Box		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,2	98,8	24.		
2	Total expenses (must equal Part IX, column (A), line 25)	2		86,3			
3	3 Revenue less expenses Subtract line 2 from line 1						
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	12,434. 1,724,231.				
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 riet assets or fund balances (explain on Schedule O)	9			0.		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	1,7	36,6	565.		
Par	t 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 Cash X Accrual Other				,		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O							
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both Separate basis Both consolidated and separate basis	ved on a	1		, , }		
ŧ	Were the organization's financial statements audited by an independent accountant?		2 b	X			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate	3,	1			
	Separate basis Consolidated basis Both consolidated and separate basis			-	• •		
C	: If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight or review, or compilation of its financial statements and selection of an independent accountant?	f the audit,	2 c	X			
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule ${\sf O}$,				
3 a	i As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Audit Act and OMB Circular A-133?	e Single	3 a		Х		
ŧ	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the re or audits, explain why on Schedule O and describe any steps taken to undergo such audits	equired audit	3 b				
BAA	TEEA0112L 01/21/20		Form	990	(2019)		

BAA

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2019

Open to Public Inspection

Employer identification number ASIAN AMERICANS ADVANCING JUSTICE 27-2577567 ATLANTA INC Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 12, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's 4 name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 Х An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g 12 Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (III) Type of organization (described on lines 1-10 above (see instructions)) (IV) Is the (v) Amount of monetary (vi) Amount of other organization listed in your governing document? support (see instructions) support (see instructions) Yes No (A) (B) (C) (D) (E)

ASIAN AMERICANS ADVANCING JUSTICE

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III I f the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support							
Cale begi	ndar year (or fiscal year nnıng in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	430,894.	1,452,218.	714,850.	2,120,789.	2,276,611.	6,995,362.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.	
4	Total. Add lines 1 through 3	430,894.	1,452,218.	714,850.	2,120,789.	2,276,611.	6,995,362.	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)			·		,	1,087,765.	
6	Public support. Subtract line 5 from line 4	, ,					5,907,597.	
Sec	tion B. Total Support	·					3,30,,337.	
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
7	Amounts from line 4	430,894.	1,452,218.	714,850.	2,120,789.	2,276,611.	6,995,362.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources			11,536.		18,475.	30,011.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) SEE PART VI		546.	154.	24,243.		24,943.	
11	Total support. Add lines 7 through 10	. 1	,		,		7,050,316.	
12	Gross receipts from related activi	ilies, etc. (see ins	tructions)			12	27,647.	
13	First five years. If the Form 990 is organization, check this box and	s for the organiza stop here	tion's first, second	, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ []	
Sec	tion C. Computation of Pu		•				·	
14	Public support percentage for 20			11, column (f))		14	83.79 %	
	Public support percentage from 2	·	•			15	83.39%	
	16a 33-1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
	33-1/3% support test—2018. If the and stop here. The organization	qualifies as a pub	licly supported org	janization			•	
17a	10%-facts-and-circumstances tes or more, and if the organization rathe organization meets the 'facts'	neets the 'facts-a	nd-circumstances'	test, check this b	oox and stop here	. Explain in Part \	/I how	
	10%-facts-and-circumstances testor more, and if the organization rorganization meets the 'facts-and	meets the 'facts a I-circumstances' t	nd-circumstances' est. The organizati	test, check this bon qualifies as a	oox and stop here publicly supporte	. Explain in Part \ d organization	/I how the	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions							

Partill® Support Schedule for Organizations Described in Section 509(a)(2)									
	(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)								
Sec	tion A. Public Support	2.32 0010111				•	/-		
Calen	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')								
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose								
3	Gross receipts from activities that are not an unrelated trade or business under section 513					/	/		
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
5	The value of services or facilities furnished by a governmental unit to the organization without charge				-				
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons.				/				
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year								
С	Add lines 7a and 7b.				<u>/</u>				
8	Public support. (Subtract line 7c from line 6)	J. W.	基础的笔	7.24/	不过	ENER			
	tion B. Total Support	(2) 2015	(b) 2016	(c) 2017	(4) 2019	(a) 2010	(f) Total		
	dar year (or fiscal year beginning in) > Amounts from line 6	(a) 2015	(b) 2016	(6) 201/	(d) 2018	(e) 2019	(i) rotai		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	·							
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on								
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	<i>[</i> .							
	Total support. (Add lines 9, 10c, 11, and 12)								
	First five years. If the Form 990 is organization, check this box and	stop here		d, third, fourth, or	fifth tax year as a	section 501(c)(3)	- []		
	tion C. Computation of Pu			. 12					
	Public support percentage for 20			e 13, column (f))	•	15	90		
	Public support percentage from 2					16	l		
	tion D. Computation of Inv				nn (fl)	. 17	8		
	Investment income percentage for Investment income percentage from				···· (1))	18	%		
	33-1/3% support tests—2019. If the				line 15 is more th	<u></u>	<u> </u>		
	is not more than 33-1/3%, check 33-1/3% support tests—2018. If the line 18 is not more than 33-1/3%,	this box and stop ne organization did	here. The organized not check a box	zation qualifies as on line 14 or line	s a publicly support 19a, and line 16 is	ted organization s more than 33-1/	►		
20	Private foundation. If the organiz						▶		
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Part IVA Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents?

 If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in **Part VI** what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable) Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in **Part VI**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

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P,a	rt IV. Supporting Organizations (continued)			
			Yes	No
_	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the		验	
	governing body of a supported organization?	11a		
	b A family member of a person described in (a) above?	116		
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c	<u> </u>	
Sec	tion B. Type I Supporting Organizations			
,	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint	3,4741	Yes	No
•	or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities if the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year			
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
Sec	tion D. All Type III Supporting Organizations			
	,		Yes	No
1	Did the assessment as executed to each of its assessment assessment and by the local day of the fifth month of the		19	33
1	If the organization provide to each of its supported organizations, by the last day of the fifth month of the ganization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax ar, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the ganization's governing documents in effect on the date of notification, to the extent not previously provided?		1	
			100	244
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2		die.
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions).		
;	The organization satisfied the Activities Test. Complete line 2 below			
,	The organization is the parent of each of its supported organizations. Complete line 3 below			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see in	structio	ons)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the	THE.	100	额图
•	supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
i	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.		外的	AND
4	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a	200	
i	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b		X 4

1	Type III Non-Functionally Integrated 509(a)(3) Supporting Organization Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	t on No	ov 20. 1970 (explain in F	Part VI) See
Sec	(B) Current Year (optional)			
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	The second secon	
a	Average monthly value of securities	1a		
t	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
6	Discount claimed for blockage or other factors (explain in detail in Part VI)	2 24		
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
_ 5	Net value of non-exempt-use assets (subtract line 4 from line 3)	_ 5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount		age of the control of	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	A 10 12 15 1 10 10	
2	Enter 85% of line 1	2	The same of the	•
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
4	Enter greater of line 2 or line 3	4	3, 2, 2	
5	Income tax imposed in prior year	5	4 1 2	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	and the second second	
7	Check here if the current year is the organization's first as a non-functionally inter(see instructions)	grated	Type III supporting orga	nızatıon
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Section D — Distributions	Joining Organization	is (continueu)	Commercial Vacci
			Current Year
1 Amounts paid to supported organizations to accomplish exempt pur	<u> </u>		
2 Amounts paid to perform activity that directly furthers exempt purpo in excess of income from activity		zations,	
3 Administrative expenses paid to accomplish exempt purposes of sup	pported organizations		
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval required)			
6 Other distributions (describe in Part VI) See instructions			
7 Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to which the organ in Part Vi) See instructions	nization is responsive (p	rovide details	
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by line 9 amount			
Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6	-		
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required — explain in Part VI) See instructions	-		
3 Excess distributions carryover, if any, to 2019		1	
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018		1.	
f Total of lines 3a through e			
g Applied to underdistributions of prior years	<u> </u>		
h Applied to 2019 distributable amount	-		
Carryover from 2014 not applied (see instructions)		,	
j Remainder Subtract lines 3g, 3h, and 3i from 3f		· ·	
4 Distributions for 2019 from Section D, line 7 \$,		
a Applied to underdistributions of prior years			,
b Applied to 2019 distributable amount			
c Remainder Subtract lines 4a and 4b from 4		1	-
5 Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6 Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions		-	
7 Excess distributions carryover to 2020. Add lines 3 _j and 4c			
8 Breakdown of line 7			i
a Excess from 2015			
b Excess from 2016		, _	
C Excess from 2017	,		
d Excess from 2018			
e Excess from 2019			

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Schedule A (Form 990 or 990-EZ) 2019

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Rart VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information. (See instructions.)

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE		2019		2018		2017		2016	 2015
OTHER INCOME	TOTAL	\$ _ 0.	\$ \$	24,243. 24,243.	\$ \$	154. 154.	\$_ \$_	546. 546.	\$ 0.

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545 0047

Schedule C (Form 990 or 990-EZ) 2019

2019

Open to Public Inspection ...

Department of the Treasury Internal Revenue Service

► 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

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

•		1(c)(4), (5), or (6) o	rganizations Complete Part III			
_	of organizati		ICANS ADVANCING JUSTICE		Employer identifica	ation number
		ATLANTA IN			27-257756	7
Par	t I-A C	omplete if the or	ganization is exempt under section	501(c) or is a sect		
1			organization's direct and indirect political can of 'political campaign activities')	ampaign activities in F	Part IV	
2	Political	campaign activity ex	penditures (see instructions)		► \$	
3	Voluntee	r hours for political	campaign activities (see instructions)			
Par	A-1-16		rganization is exempt under secti			
1	Enter the	amount of any exc	ise tax incurred by the organization under s	ection 4955	▶\$	0.
2	Enter the	e amount of any exc	ise tax incurred by organization managers i	under section 4955	►\$	0.
3	If the org	anization incurred a	section 4955 tax, did it file Form 4720 for t	his year?		Yes No
4 a	Was a co	orrection made?				Yes No
		describe in Part IV				
Par			rganization is exempt under secti).
1	Enter the	amount directly ex	pended by the filing organization for section	527 exempt function	activities >\$	
2		amount of the filing apt function activitie	g organization's funds contributed to other os	organizations for secti	on ►\$	
3	Total exe	empt function expen	ditures Add lines 1 and 2 Enter here and o	on Form 1120-POL,	▶\$	
4	Did the fi	ling organization file	Form 1120-POL for this year?			Yes No
5	organiza	tion made payments of political contribution	and employer identification number (EIN) of For each organization listed, enter the anons received that were promptly and directly action committee (PAC). If additional spaces	nount paid from the fill v delivered to a separ	ing organization's funds ate political organization	Also enter the
	(4	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)						

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

Schedule C (Form 990 or 990 EZ) 201 Part II-A - Complete if	9 ASIAN AMERIC	ANS ADVANCING J	USTICE	27-257	
section 501	ine organization is (h)).	exempt under Section	on soricits) and me	a romi 5700 (electi	on under
	`	s to an affiliated group (and list in Part IV each	affiliated group member	's name,
		hare of excess lobbying		•	,
		d box A and 'limited cor	•		
	Limits on Lobbyin			(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendite			 		
b Total lobbying expendition	•	•			
c Total lobbying expenditi	_	• •	,9,		
d Other exempt purpose		,			
e Total exempt purpose e	•	Ic and Id)		<u> </u>	
f Lobbying nontaxable an	•	•	le ın		
If the amount on line 1e, coli	uma (a) or (b) is	ne lobbying nontaxable	amount is	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The second of
Not over \$500,000		% of the amount on line 1e	anioun(13	1	
Over \$500,000 but not over \$1		00,000 plus 15% of the excess	over \$500,000	(a),	
Over \$1,000,000 but not over \$		75,000 plus 10% of the excess			
Over \$1,500,000 but not over \$		25,000 plus 5% of the excess of		West - Page 1 Con - Con 1	
		,000,000 prus 5% of the excess t	JVEI \$1,300,000		
Over \$17,000,000 q Grassroots nontaxable				والأراد المحادات و	
•	·				
h Subtract line 1g from lin	•				
i Subtract line 1f from lin	e ic ii zero or iess, ei	iter -0-		L	
j If there is an amount ot section 4911 tax for this	her than zero on eithe year?	line 1h or line 1i, did th	e organization file Form	a 4720 reporting	Yes No
(So	me organizations that	Year Averaging Period I made a section 501(h) e w. See the separate inst	lection do not have to c	omplete all of the five ough 2f.)	
	Lobbyir	g Expenditures During	4-Year Averaging Perio	d	
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2 a 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) 2019

Part/II:B3 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		3)	(b)	
		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?	X			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	<u> </u>	X		
c Media advertisements?		X		
d Mailings to members, legislators, or the public?		X		
e Publications, or published or broadcast statements?		X		
f Grants to other organizations for lobbying purposes?		Х		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		Х		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		
i Other activities?	X		250.	
j Total Add lines 1c through 1i	W 5 49	Tion in	· 250.	
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	Sales and the sales	
b If 'Yes,' enter the amount of any tax incurred under section 4912	7 4 4 2 4 4	E		
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?			C. M. W. C.	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50	l(c)(5), or		
section 501(c)(6)		• •		

	·		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3 .		

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	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
á	a Current year	2 a	
Ł	Carryover from last year	2 b	
(: Total	2 c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	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 D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545 0047 2019

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

ASTAN AMERICANS ADVANCING HISTICE

	TLANTA INC	JUSTICE	27-2577567
		or Advised Funds or Other Similar Fu	
1-41-1	Complete if the organization ans	wered 'Yes' on Form 990, Part IV, line	e 6.
		(a) Donor advised funds	(b) Funds and other accounts
1 Total i	number at end of year		
2 Aggrega	te value of contributions to (during year)		
3 Aggrega	te value of grants from (during year)		
4 Aggre	gate value at end of year		
5 Did the are the	e organization inform all donors and dono e organization's property, subject to the o	or advisors in writing that the assets held in dor organization's exclusive legal control?	nor advised funds Yes No
for cha	e organization inform all grantees, donor aritable purposes and not for the benefit missible private benefit?	s, and donor advisors in writing that grant funds of the donor or donor advisor, or for any other p	s can be used only purpose conferring Yes No
	Conservation Easements.	world Weel on Form 000 Dort IV line	. 7
		wered 'Yes' on Form 990, Part IV, line	<u>e /</u>
	se(s) of conservation easements held by	- · · · · · · · · · · · · · · · · · · ·	and the body could be seen as the see
J(eservation of land for public use (for exa	· · ·	on of a historically important land area
<u> </u>	otection of natural habitat	Preservati	on of a certified historic structure
	eservation of open space	- (-)	ha farra af a caracteristica a caracteristica de la constantica del constantica de la constantica de la constantica de la constantica del constantica de la
	ete lines 2a through 2d if the organization by of the tax year	n held a qualified conservation contribution in the	ne form of a conservation easement on the
	,, c. a.e. a, ca.		Held at the End of the Tax Year
a Total r	number of conservation easements.		2 a
b Total a	acreage restricted by conservation easen	nents	2 b
	er of conservation easements on a certifi		2 c
d Numbe	er of conservation easements included in	(c) acquired after 7/25/06, and not on a historic	c
structu	ire listed in the National Register	(c) acquired after 7723700, and not on a historic	~
3 Number tax year		ransferred, released, extinguished, or terminate	ed by the organization during the
4 Numbe	er of states where property subject to cor	servation easement is located >	_
5 Does t	he organization have a written policy reg	arding the periodic monitoring, inspection, hand	dling of violations,
	nforcement of the conservation easement		∐Yes ∐ No
6 Staffa ►	and volunteer hours devoted to monitoring	g, inspecting, handling of violations, and enforc	ing conservation easements during the year
7 Amour ►\$	nt of expenses incurred in monitoring, ins	pecting, handling of violations, and enforcing c	onservation easements during the year
8 Does 6	each conservation easement reported on oction 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of sec	tion 170(h)(4)(B)(i) Yes No
ınclude	e, if applicable, the text of the footnote to	orts conservation easements in its revenue and the organization's financial statements that de-	expense statement and balance sheet, and scribes the organization's accounting for
Part III		ons of Art, Historical Treasures, or Oth	
		wered 'Yes' on Form 990, Part IV, line	
historia	organization elected, as permitted under cal treasures, or other similar assets held fill the text of the footnote to its financial	FASB ASC 958, not to report in its revenue stall I for public exhibition, education, or research in statements that describes these items	tement and balance sheet works of art, furtherance of public service, provide in
historic	organization elected, as permitted under cal treasures, or other similar assets held ng amounts relating to these items	FASB ASC 958, to report in its revenue stateming for public exhibition, education, or research in	ent and balance sheet works of art, furtherance of public service, provide the
(i) Re	venue included on Form 990, Part VIII, li	ne 1	► \$
(ii) As	sets included in Form 990, Part X		> \$
2 If the c		, historical treasures, or other similar assets for SC 958 relating to these items	r financial gain, provide the following
	ue included on Form 990, Part VIII, line 1	•	► \$
b Assets	included in Form 990, Part X		► \$

Partilla Organizations Maintain				her Similar Assets		raye 2
3 Using the organization's acquisiting					<u>` </u>	 on
items (check all that apply) a Public exhibition		d 🗍 Loan o	or exchange program			
b Scholarly research		e Other	3.1.3			
c Preservation for future gener	ations	• 🗆				
4 Provide a description of the organ	nization's collections	and explain how	they further the organi	zation's exempt purpose	e in	
5 During the year, did the organiza to be sold to raise funds rather th	tion solicit or receive	e donations of art, I as part of the or	historical treasures, or ganization's collection?	r other similar assets	Yes	No
Rart IV Escrow and Custodial A	Arrangements. Co amount on Forr	mplete if the or n 990, Part X,	ganization answere line 21.	d 'Yes' on Form 990	, Part IV,	
1 a Is the organization an agent, trus on Form 990, Part X?				er assets not included	☐ Yes [No
b if 'Yes,' explain the arrangement	in Part XIII and con	nplete the followin	g table		[].03	_]
, , ,			•		Amount	
c Beginning balance				1 c		
d Additions during the year				1 d	-	~
e Distributions during the year				1 e	 '	
f Ending balance				1 f		
2 a Did the organization include an a	mount on Form 990,	Part X, line 21, f	or escrow or custodial	account liability?	Yes	No
b If 'Yes,' explain the arrangement	in Part XIII Check I	nere if the explana	ation has been provided	d on Part XIII		7
PartiVA Endowment Funds. Co	mplete if the ord	janization ansv	wered 'Yes' on For	m 990, Part IV, line	10.	
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four year	s back
1 a Beginning of year balance					<u> </u>	
b Contributions					ļ	
c Net investment earnings, gains, and losses						
d Grants or scholarships						
 Other expenditures for facilities and programs 						
f Administrative expenses						
g End of year balance					T	
2 Provide the estimated percentage	e of the current year	end balance (line	g, column (a)) held a	ns		
a Board designated or quasi-endow	vment ►	8				
b Permanent endowment ►	%					
c Term endowment ►	%					
The percentages on lines 2a, 2b,	and 2c should equa	1100%				
3 a Are there endowment funds not in	n the possession of	the organization t	hat are held and admin	istered for the		· · · · ·
organization by					Yes	No
(i) Unrelated organizations					3a(ı)	<u> </u>
(ii) Related organizations			0.1.1.1.53		3a(ii)	
b If 'Yes' on line 3a(ii), are the relative	-				3b	<u> </u>
4 Describe in Part XIII the intended		ation's endowmer	nt funds			
PartiVII Land, Buildings, and Complete if the organi		'Yes' on Form	n 990, Part IV, line	11a. See Form 990), Part X, lın	e 10.
Description of property		st or other basis nvestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book va	alue
1 a Land						
b Buildings					<u></u>	
c Leasehold improvements			25,671.	6,036.	19	, 635.
d Equipment			11,071.	6,444.		,627.
e Other			689.	172.		517.
Total. Add lines 1a through 1e (Column	n (d) must equal For	m 990, Part X, co		>	24	,779.
ВАА				Sched	lule D (Form 99	

Part VII	Investments – Other Securities.	5 000	N/A	
	Complete if the organization answered		Y	
	ription of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of	year market value
•	al derivatives			
	held equity interests			
(3) Other				
$\frac{(A)}{(B)}$				
(C)				
(D)				
(E)				
(F) — — —				
$\frac{\langle \cdot \rangle}{\langle G \rangle} = \cdot$				
(H)				
(l)				
	nn (b) must equal Form 990, Part X, column (B) line 12)			1
	Investments - Program Related.		N/A	
	Complete if the organization answered			
	(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)		<u> </u>		
(9)				
(10)				
	nn (b) must equal Form 990, Part X, column (B) line 13)			··
Part IX	Other Assets.	N/A	104 1 111 0 5 000 5	
	Complete if the organization answered 'Y		art IV, line 11d. See Form 990, Pai	t X, line 15. (b) Book value
(1)	(a) Des	scription		(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)		_,		
<u>(7)</u> (8)				
(9)				
(10)				
	umn (b) must equal Form 990, Part X, column (B,) line 15)		
Part X	Other Liabilities.			···
	'Complete if the organization answered 'Yes' on F		11e or 11f. See Form 990, Part X, line 25	
1.		ption of liability		(b) Book value
	ral income taxes			2.050
(3) TEN	ANT SECURITY DEPOSIT			2,050.
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)	(h)			2.050
	n (b) must equal Form 990, Part X, column (B) line 25) uncertain tax positions In Part XIII, provide the text of the foo	tnote to the ergonization's fire		2,050.
Liability 101	oncortain tax positions in rait Ain, provide the text of the 100	more to the organization's IIIk		שווונא נטו טוונפונמווו די אים אים אים אים אים די

Schedule D (Form 990) 2019 ASIAN AMERICANS ADVANCING JUSTICE	21-251156	/ Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Ret	urn.	
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	2,298,824.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	0 7	
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities 2 b	;;	
c Recoveries of prior year grants.		
d Other (Describe in Part XIII)	<u> </u>	
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	2,298,824.
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) 4b	<u> </u>	
c Add lines 4a and 4b	4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	2,298,824.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per R	eturn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
Total expenses and losses per audited financial statements	1	2,286,390.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	, so 19	
a Donated services and use of facilities 2 a	N I	
b Prior year adjustments 2 b		
c Other losses 2 c	一 . 。	
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	2,286,390.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1	, ,	
a Investment expenses not included on Form 990, Part VIII, line 7b	1' , ' 1	
b Other (Describe in Part XIII)		
c Add lines 4a and 4b.	4 c	

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 - FASB ASC 740 FOOTNOTE

Part XIII Supplemental Information.

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

AAAJ - ATLANTA QUALIFIES AS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND, ACCORDINGLY, IS ONLY SUBJECT TO FEDERAL OR STATE INCOME TAXES ON SPECIFIC TYPES OF INCOME FROM ACTIVITIES THAT ARE UNRELATED TO ITS EXEMPT PURPOSE. AAAJ - ATLANTA HAD NO INCOME FROM UNRELATED ACTIVITIES AND HAS NO INCOME TAXES DUE AS OF DECEMBER 31, 2019 AND 2018.

AAAJ - ATLANTA'S APPLICATION OF ASC 740 REGARDING UNCERTAIN TAX POSITIONS HAD NO

EFFECT ON ITS FINANCIAL POSITION AS MANAGEMENT BELIEVES AAAJ - ATLANTA HAS NO

Schedule D (Form 990) 2019

286,390

Part:XIII. Supplemental Information (continued)

PART X - FASB ASC 740 FOOTNOTE (CONTINUED)

MATERIAL UNRECOGNIZED INCOME TAX BENEFITS, INCLUDING ANY POTENTIAL RISK OF LOSS OF

ITS NOT-FOR-PROFIT TAX STATUS. AAAJ - ATLANTA WOULD ACCOUNT FOR ANY POTENTIAL

INTEREST OR PENALTIES RELATED TO POSSIBLE FUTURE LIABILITIES FOR UNRECOGNIZED INCOME

TAX BENEFITS AS INCOME TAX EXPENSE. AAAJ - ATLANTA IS NO LONGER SUBJECT TO

EXAMINATION BY FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR PERIODS BEFORE 2015.

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

. Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

► Attach to Form 990 or Form 990-EZ

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

OMB No 1545 0047

2019

Open to Public Transpection 2

Name	ATLANTA INC	ANS ADVANC	ING JU	STICE		27-257756	
		lete if the organ	nization an	swered 'Ye	es' on Form 990. Part I		1
	Fundraising Activities. Comp Form 990-EZ filers are not red						
1	Indicate whether the organization r	aised funds thr	ough any	of the follo		· · ·	
ā	Mail solicitations			е		•	
t	Internet and email solicitations			f	Solicitation of gove	rnment grants	
C	Phone solicitations			g	Special fundraising	events	
c	In-person solicitations						
2 a	Did the organization have a written employees listed in Form 990, Part	or oral agreem VII) or entity in	nent with a n connecti	any individi on with pro	ual (including officers, c ofessional fundraising s	lirectors, trustees, or ke ervices?	Yes X No
t	olf 'Yes,' list the 10 highest paid ind compensated at least \$5,000 by the	ividuals or entit e organization	ies (fundra	aisers) pur	suant to agreements ur	nder which the fundraise	er is to be
(i)	Name and address of individual or entity (fundraiser)	(ii) Activity	(III) Did have custo of conti	fundraiser dy or control ributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1 							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total		<u> </u>	1	-			0.
3	List all states in which the organiza or licensing	tion is registere	d or licen	sed to solu	cit contributions or has	been notified it is exem	
		-	- -				

Schedule G (Form 990 or 990-EZ) 2019 ASIAN AMERICANS ADVANCING JUSTICE 27~2577567 Part II2 Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ. lines 1 and 6b List events with gross receipts greater than \$5,000. (d) Total events (a) Event #1 (b) Event #2 (c) Other events (add column (a) through column (c)) COMMUNITY CHAM NONE (event type) (total number) REVENUE (event type) 1 Gross receipts 123,330 123,330. 2 Less Contributions 86,338 86,338. 3 Gross income (line 1 minus line 2) 36,992 36,992. 4 Cash prizes 5 Noncash prizes DIRECT 6 Rent/facility costs 23,720 23,720. 7 Food and beverages 11,000 11,000. EXPENSES 8 Entertainment Other direct expenses 2,272 2,272. 10 Direct expense summary Add lines 4 through 9 in column (d) 36,992. Net income summary Subtract line 10 from line 3, column (d) Part-III Gaming. Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (b) Pull tabs/instant bingo/progressive bingo (c) Other gaming REVENUE (a) Bingo (add column (a) through column (c)) Gross revenue 2 Cash prizes 3 Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes Volunteer labor No No No 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities a is the organization licensed to conduct gaming activities in each of these states? No b If 'No,' explain 10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes

b If 'Yes,' explain

Sche	edule G (Form 990 or 990-EZ) 2019 ASIAN AMERICANS ADVANCING JUSTICE 2	7-2577567	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity for administer charitable gaming?	med to	No
13	Indicate the percentage of gaming activity conducted in		
	The organization's facility	13 a	%
b	An outside facility	13 b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and	records	
	Name •		
	Address ►	-	
15 a	Does the organization have a contract with a third party from whom the organization receives gaming revenue	? \ \ \ \ \ \ \ \ \ \ \ \ Yes	∏No
	olf 'Yes,' enter the amount of gaming revenue received by the organization 🕨 💲 and the		
	of gaming revenue retained by the third party > \$		
c	If 'Yes,' enter name and address of the third party		
	Name •		
	Address ►		, ! !
	Address		
16	Gaming manager information		
	Name •		
	Gaming manager compensation ► \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain		
h	state gaming license? Enter the amount of distributions required under state law to be distributed to other exempt organizations or s	Yes	∐ No
_	organization's own exempt activities during the tax year 🕨 \$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Par		olumns (III) and ny additional	(v),
BAA	TEEA3703L 08/19/19 Schedul	e G (Form 990 or 99	90-EZ) 2019

SCHEDNLE I		.	ants and Oth	Grants and Other Assistance to Organizations,	to Organization	ns,		OMB No 1545 0047
(Form 990)		Gov Compl	Governments, ar Complete if the organizati	Governments, and Individuals in the United States Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22.	n the United St orm 990, Part IV, line 2	t ates 1 or 22.	1	2019
Department of the Treasury Internal Revenue Service			► Go to www.ı	 Attach to Form 990. Go to www.irs gov/Form990 for the latest information 	0. Iatest information			Open to Public Inspection
Name of the organization AS	ASIAN AMERICANS ATLANTA INC	ADVANCING	JUSTICE				Eniployer identification number	ation number
Part General Inf	General Information on Grants and Assistance	nts and Assist	ance					,
1 Does the organizate the selection criteria	Does the organization maintain records to substantiate the amount of the	to substantiate the	amount of the gran	le grants or assistance, the grantees' eligibility for the grants or assistance, and	antees' eligibility for the	e grants or assistance,	and	
2 Describe in Part IV	the organization's pro	ocedures for monit	er oring the use of gra	the selection checks used to award the grants of assistance. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	itates	SEE P	PART IV	V sar V
Part II. Grants and Other Assistance to Domestic Organization Form 990, Part IV, line 21, for any recipient that rece	Other Assistance Part IV, line 21, fo	to Domestic Or or any recipien	rganizations and t that received	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	nents. Complete if Part II can be dup	Complete if the organization answered 'Yes' can be duplicated if additional space is nee	inswered 'Yes' on al space is neede	n ed.
1 (a) Name and address of organization or government	ss of organization iment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Furpose of grant or assistance
(1) CAIR GEORGIA P.O. BOX 942134 ATLANTA, GA 30341	41	26-1237679 501 (C) (3)	501 (C) (3)	10,000	0			SEE PART IV
(2) GALEO LATINO COMMUNITY DEVELO	MUNITY DEVELO	(0) 100	(6) (7) (6)	900				מב מטט
(3) SOUTHEAST ASIAN COALITION	COALITION	27/2021-02	(6) (7) 100	0,123.	0			1451
CHARLOTTE, NC 28213	ST STE 22	46-0786773 501 (C) (3)	501 (C) (3)	6,298.	.0			SEE PART IV
(4) WOMEN WATCH AFRIKA P.O BOX 208	IKA							
AVONDALE ESTATE, GA 30002	GA 30002	58-2581246 501 (C)	501 (C) (3)	10,000	0.			SEE PART IV
(5) DIGNIDAD IMMIGRANTE EN ATHENS - P.O BOX 7131 ATHENS, GA 30604	ANTE EN ATHENS	47-3521408 501(C)(3)	501 (C) (3)	10,000.	.0		!	SEE PART IV
(6) GEORGIA SHIFT BOX 14701 AUGUSTA. GA 30919	1	46-5280771	501 (C) (3)	. 000 . 7	0			SEE PART IV
(7) LATINO COMMUNITY FUND INC 50 HURT PLAZA SE STE 1434 ATLANTA, GA 30303	ESTE 1434	82-0911954 501 (C) (3)	501 (C) (3)	7,000.	.0			SEE PART IV
SHIRE	<u></u>	95-3850159501(C) (3)	501 (C) (3)	17.237	C			SEE PART IV
2 Enter total number	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government or	ganizations listed in	the line 1 table			A	
3 Enter total number	Enter total number of other organizations listed in the line 1 table	s listed in the line	1 table				A	
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990	duction Act Notice, se	e the Instructions	for Form 990.		TEEA3901L 07/10/19	07/10/19	Schedu	Schedule I (Form 990) (2019)

Schedule I (Form 990) (2019) ASIAN AMERICANS ADVANCING JUSTICE

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book. FMV appraisal, other)	(f) Description of noncash assistance
2					-
8					•
4	٠				
5					
9					
7					
Part IV - Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information	ide the informatio	in required in Part	I, line 2; Part III, o	olumn (b); and any oth	ner additional information

PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

ALLOCATION OF FUNDS IS SPECIFIC TO THE GRANT AGREEMENT. WHEN FUNDS ARE RECEIVED FOR A THE EXPENSE BASED ON EACH SPECIFIC GRANT. EACH REQUEST FOR PAYMENT MUST BE ALLOCATED SPECIFIC PURPOSE IT IS SET ASIDE FOR THAT PURPOSE. THE ACCOUNTING DEPARTMENT TRACKS TO A SPECIFIC GRANT AND APPROVED BY THE CEO BEFORE PAYMENT IS MADE. THE EXPENSE IS GRANT FUNDS ARE USED FOR THE PURPOSE THAT THEY DESIGNATED FOR BY THE GRANTOR. THE TRACKED BY A SPECIFIC CLASS. Schedule I (Form 990) (2019)

Continuation Sheet for Schedule I (Form 990)

2019

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Schedule I Cont (Form 990) 2019 (h) Purpose of grant or assistanceŏ SEE PART IV Continuation Fage 1 Employer identification number 27-2577567 Part. II. Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.) (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance (d) Amount of cash grant 7,500 TEEA4001L 07/10/19 (c) IRC section (if applicable) 51-0634937 | 501 (C) (3) (b) EIN ASIAN AMERICANS ADVANCING JUSTICE NAPALESE ASSOCIATION OF GEORG (a) Name and address of organization or government __3201_ASBURY_SQ____ ATLANTA, GA 30346 Name of the organization 1111111 11111

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

2019

OMB No 1545 0047

Open to Public a

Department of the Treasury Internal Revenue Service Name of the organization

ASIAN AMERICANS ADVANCING JUSTICE ATLANTA INC

Employer identification number 27-2577567

FORM 990, PART I, LINE 1 - ORGANIZATION MISSION OR SIGNIFICANT ACTIVITIES

ASIAN AMERIĆANS ADVANCING JUSTICE - ATLANTA'S MISSION IS TO PROTECT AND PROMOTE THE CIVIL AND HUMAN RIGHTS OF ASIAN AMERICANS, NATIVE HAWAIIANS, AND PACIFIC ISLANDERS IN GEORGIA AND THE SOUTHEAST THROUGH POLICY ADVOCACY, LEGAL SERVICES, ORGANIZING & CIVIC ENGAGEMENT, AND IMPACT LITIGATION.

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

ASIAN AMERICANS ADVANCING JUSTICE - ATLANTA'S MISSION IS TO PROTECT AND PROMOTE THE CIVIL AND HUMAN RIGHTS OF ASIAN AMERICANS, NATIVE HAWAIIANS, AND PACIFIC ISLANDERS IN GEORGIA AND THE SOUTHEAST THROUGH POLICY ADVOCACY, LEGAL SERVICES, ORGANIZING & CIVIC ENGAGEMENT, AND IMPACT LITIGATION.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE 990 IS REVIEWED BY OUR ACCOUNTANT, EXECUTIVE DIRECTOR, OPERATIONS DIRECTOR, BOARD PRESIDENT, AND TREASURER BEFORE SUBMITTING.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

WE HAVE A DOCUMENT THAT EVERYONE SIGNS WHEN HIRED THAT REQUIRES THE EMPLOYEE TO

DISCLOSE ANY ACTIVITY THAT MAY BE IN CONFLICT WITH THE ORGANIZATION IMMEDIATELY WITH

EXAMPLES OF WHAT THAT CAN INCLUDE.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES
THE COMPENSATION IS REVIEWED BY THE BOARD FOR THE EXECUTIVE DIRECTOR AND THE ED
REVIEWS IT FOR THE OTHER DIRECTORS WITH ADVISING FROM THE BOARD. EVERYTHING IS
DOCUMENTED AND IS COMPARED AGAINST THE MARKET FOR SIMILAR POSITIONS AND WORK
FUNCTIONS.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE ORGANIZATION'S ACCOUNTANT PROVIDES A COPY OF FORM 990 SPECIFICALLY FOR PUBLIC INSPECTION. THIS COPY IS AVAILABLE UPON REQUEST.