Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A F	or th	e 202	2 calendar year, or tax year begin	ning	and er	nding	_				
_			C Name of organization				D Employer id	entifica	tion number		
Вс	heck if ap	oplicable:	PUBLIC JUSTICE FOUNDA	TION							
	Addre		Doing Business As				59	-173	0478		
	Name	change	Number and street (or P.O. box if mail is r	not delivered to street address)	Room/su	ite	E Telephone number				
	Initial	return	1620 L STREET, N.W.,	SUITE 630			(2	(202)797-8600			
	Term	inated	City or town, state or province, country, a			, = ,					
	Amer		WASHINGTON, DC 20036				G Gross receip	G Gross receipts \$ 8,536,678.			
		cation	F Name and address of principal officer:	F. PAUL BLAND			H(a) Is this a gro	up return			
	pendi	ng	1620 L STREET, N.W.,		N. DC 2	20036	subordinates H(b) Are all subord				
	Tax-ex	empt st) ◀ (insert no.) 4947(a)(527	1 ` ′		(see instructions)		
J			WWW.PUBLICJUSTICE.NET) (.,		H(c) Group exem	ntion nu	mber •		
				Association Other	I Ye	ar of forma	tion: 1975 M				
	art I		mmary	A CONTRACTOR OF THE CONTRACTOR	=	ar or romma	1011. 1979 111	Otato c	riogai dominolio. 111		
			describe the organization's mission or	most significant activities: DIIR	LTC TIIS	TTCF F		7\	NONDPORTT		
a)	ļ ·		BERSHIP ORGANIZATION, ED					<u></u>	NONFROFIT		
Š											
ž.			UES AND SUPPORTS PUBLIC								
8			this box if the organization di	·				1 1	0.0		
Activities & Governance		Numb	er of voting members of the governing	body (Part VI, line 1a)				3	89		
es	4		er of independent voting members of the					4	89		
έ	5	lotal	number of individuals employed in cale	ndar year 2022 (Part V, line 2a)				5	43		
ć	6	lotal	number of volunteers (estimate if necess	sary)				6	124		
_			unrelated business revenue from Part VI					7a			
	b	Net ur	nrelated business taxable income from F	orm 990-T, line 34				7b			
	_						Prior Year		Current Year		
ē	8	Contri	ibutions and grants (Part VIII, line 1h)		PY FOR	\neg $lacksquare$	9,251,24		7,168,000.		
Revenue	9	Progra	am service revenue (Part VIII, line 2g)		INSPECTION	ы 📖		ONE	NONE		
Re	10		tment income (Part VIII, column (A), line	s 3, 4, and 7d)			392,18		266,727.		
	11		revenue (Part VIII, column (A), lines 5 ,				-93,92		-171,879.		
	12		revenue - add lines 8 through 11 (must				9,549,49	97.	7,262,848.		
	13		s and similar amounts paid (Part IX, colu				N	ONE	NONE		
	14		its paid to or for members (Part IX, colur			ONE	NONE				
S	15		es, other compensation, employee bene				3,307,29	91.	3,763,956.		
Expenses	16a	Profes	ssional fundraising fees (Part IX, column	(A), line 11e)		N	ONE	168,764.			
ă	b		fundraising expenses (Part IX, column (E								
ш	17	Other	expenses (Part IX, column (A), lines 11a	a-11d, 11f-24e)			3,261,79	94.	3,650,192.		
			expenses. Add lines 13-17 (must equal				6,569,08	35.	7,582,912.		
		Rever	nue less expenses. Subtract line 18 from	line 12			2,980,43	L2.	-320,064.		
Soc						Begir	nning of Current	Year	End of Year		
Net Assets or Fund Balances	20	Total	assets (Part X, line 16)			L	17,587,24	13.	17,710,662.		
AB	21		liabilities (Part X, line 26)				2,483,66	58.	4,484,049.		
훒	22		ssets or fund balances. Subtract line 21				15,103,5	75.	13,226,613.		
Pa	art II	Siç	gnature Block						_		
Un	der pei	nalties c	of perjury, I declare that I have examined thi	s return, including accompanying sch	edules and s	tatements,	and to the best o	f my kr	nowledge and belief, it is		
true	e, corre	ect, and	complete. Declaration of preparer (other than	officer) is based on all information of t	vnich prepare	er nas any k	nowleage.				
							11/	15/2	023		
Sig			Signature of officer				Date				
He	re	VIC	TORIA NI	VP O	F FINAN	CE					
			Type or print name and title								
		Print/	Type preparer's name	Preparer's signature	Date		Check	if P	ΓIN		
Paid							self-employ	' "	00367740		
	parer	Firm's	sname ► SARFINO AND RHOAI	DES. LLP			Firm's EIN		-0961657		
Use	Only		·	, SUITE 501 NORTH BETHESDA, M	D 20852-27	'94	Phone no.		1-770-5500		
Mav	the I		cuss this return with the preparer showr								
			Reduction Act Notice, see the separate						Form 990 (2022)		
	· upu	v: n							1 01111 0 0 0 (4044)		

6

Page 2 Form 990 (2022)

Pa	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	. X
1	Briefly describe the organization's mission:	
	PUBLIC JUSTICE PURSUES HIGH IMPACT LAWSUITS TO COMBAT SOCIAL AND	
	ECONOMIC INJUSTICE, PROTECT THE EARTH'S SUSTAINABILITY, AND CHALLENGE	
	PREDATORY CORPORATE CONDUCT AND GOVERNMENT ABUSES.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	
	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.	
	Describe the organization's program service accomplishments for each of its three largest program services, as meas	ured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$1,387,744. including grants of \$) (Revenue \$)	
-	FOOD PROJECT-THE FOUNDATION'S FOOD PROJECT TAKES A MULTIFACETED	
	APPROACH TO SUPPORT A MORE SUSTAINABLE, HONEST, HUMANE AND SAFE	
	FOOD SYSTEM. IN ITS LAWSUITS, IT REPRESENTS FARMERS, RURAL	
	COMMUNITIES, CONSUMERS AND WORKERS WHO SHARE ITS VISION. IN ITS	
	ADVOCACY, IT SPREADS AWARENESS OF THE SYSTEMIC INEQUITIES THAT	
	HAVE ALLOWED THE CORPORATE TAKEOVER OF THE FOOD SYSTEM AND SHOW	
	POLICYMAKERS AND THE PUBLIC HOW THEY CAN SUPPORT A RETURN TO	
	FARMING FOCUSED ON SUSTAINING COMMUNITIES RATHER THAN EXTRACTING	
	PROFIT.	
1	SEE SCHEDULE O	
4c	(Code:) (Expenses \$555,204. including grants of \$) (Revenue \$)	
	CIVIL RIGHTS PROJECT - THE FOUNDATION TAKES ON A WIDE VARIETY OF	
	MATTERS TO PROTECT CIVIL RIGHTS, INCLUDING WORKERS' RIGHTS AND	
	STUDENTS' RIGHTS. IN PARTICULAR, THE STUDENT CIVIL RIGHTS'	
	PROJECT USES LITIGATION AND ADVOCACY TO COMBAT HARASSMENT AND	
	OTHER FORMS OF DISCRIMINATION SO THAT ALL STUDENTS CAN LEARN AND	
	THRIVE IN SCHOOL. IT BRINGS HIGH-STAKES LAWSUITS AND APPEALS ON	
	BEHALF OF STUDENTS WHO ARE DENIED EDUCATIONAL OPPORTUNITIES BASED	
	ON THEIR SEX, SEXUALITY, RACE, OR OTHER PROTECTED CHARACTERISTICS,	
	AND IT COLLABORATES WITH STUDENT-LED MOVEMENTS.	
	Other program services (Describe on Schedule O.) SEE SCHEDULE O	
	(Expenses \$ 1,465,201. including grants of \$) (Revenue \$)	
	Total program service expenses 4 . 475 . 499 .	

JSA 2E1020 1.000

Form 990 (2022)

Part IV Checklist of Required Schedules

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	X	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			37
10	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		
• •	VII, 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	11a	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	11b		Х
С	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	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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	11f		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII.	12a	X	<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	13		X
	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		X
IJ	fundraising, business, investment, and program service activities outside the United States, or aggregate			1
	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	140		
. •	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		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		-
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	_		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Form 990 (2022)

Part IV Chocklist of Poquired Schodules (continued)

Par	t IV Checklist of Required Schedules (continued)		V	Na
	Dild		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	22	37	
24-	employees? If "Yes," complete Schedule J	23	Х	
24 a				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		v
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception:	240		
·	to defease any tax-exempt bonds?	24c		
Ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
2 5 a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	234		
~	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to 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? If "Yes," complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV			X
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, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		_X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
••	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	20		3.7
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		_X
34		34	v	
35 a	or IV, and Part V, line 1	35a	X	
	of If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	33a	Λ	
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	-		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note : All Form 990 filers are required to complete Schedule O	38	Х	
Part				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	-		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Χ	

JSA 2E1030 2.000

Page 5 Form 990 (2022)

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return. 2a 43			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
		5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а				
		7a	X	
		7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		
	•	7c		X
		7.		37
		7e		X
		7f		X
•		7g 7h		
_	·	/ 11		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
9	sponsoring organization have excess business holdings at any time during the year?			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	140		v
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule</i> O · · · · · · · ls the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	140		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.	1.5		21
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

59-1730478 Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI 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

Sect	ion A. Governing Body and Management	• • •				21				
					Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	89							
	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	1b	89							
2	Did any officer, director, trustee, or key employee have a family relationship or a business rel	lations	ship with							
	any other officer, director, trustee, or key employee?		-	2		Х				
3	Did the organization delegate control over management duties customarily performed by or ur									
	supervision of officers, directors, trustees, or key employees to a management company or other p			3		Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?									
5	Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders?									
7a	Did the organization have members, stockholders, or other persons who had the power to el	ect o	appoint							
	one or more members of the governing body?			7a	X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,									
	stockholders, or persons other than the governing body?									
8	Did the organization contemporaneously document the meetings held or written actions under	ertake	n during							
	the year by the following:									
а	The governing body?			8a	X					
b	Each committee with authority to act on behalf of the governing body?			8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		Х				
Secti	ion B. Policies (This Section B requests information about policies not required by the Inte	ernal	Revenue	Code	.)					
					Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			10a		X				
b	If "Yes," did the organization have written policies and procedures governing the activities of	such	chapters,							
	affiliates, and branches to ensure their operations are consistent with the organization's exempt po	urpose	s?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fi	ling th	e form? .	11a		X				
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests to	that c	ould give							
	rise to conflicts?			12b	X					
С	Did the organization regularly and consistently monitor and enforce compliance with the p	-		400	3.7					
	describe on Schedule O how this was done			12c	X					
13	Did the organization have a written whistleblower policy?			13 14	X					
14	Did the organization have a written document retention and destruction policy?			14						
15	Did the process for determining compensation of the following persons include a review are independent persons, comparability data, and contemporaneous substantiation of the deliberation		-							
а	The organization's CEO, Executive Director, or top management official			15a	Х					
b	Other officers or key employees of the organization			15b		Х				
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.									
16a		r arra	ngement							
	with a taxable entity during the year?			16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization	to eva	aluate its							
	participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?			16b						
Secti	ion C. Disclosure	<u>-</u>	- -			<u> </u>				
17	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable),	990.	and 990-1	Γ (sec	ion 5	01(c)				
	(3)s only) available for public inspection. Indicate how you made these available. Check all that ap X Own website Another's website X Upon request Other (explain on Sc	ply.		(000)		(0)				
19	Describe on Schedule O whether (and if so, how) the organization made its governing document and financial statements available to the public during the tax year.	nents,	conflict o	f inter	est p	olicy,				
20	State the name, address, and telephone number of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who possesses the organization's by the control of the person who person or the control of the person who person or the control of the person of the	oooks	and record	s						

5106228204

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

Check if Schedule O contains a response or note to any line in this Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the 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.

(A) Name and title	(B) Average hours per week	Position (do not check more than box, unless person is both officer and a director/trus					an	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) FRANK PAUL BLAND	22.00									
EXECUTIVE DIRECTOR	18.00			Х				274,983.	NONE	22,011.
(2) TAMMY SUN	20.00							,		,
VICE PRESIDENT OF LEGAL AFFAIR	20.00					Х		NONE	168,727.	34,473.
(3) ADELE KIMMEL	20.00									
SENIOR ATTORNEY	20.00					Х		NONE	177,286.	25,064.
(4) VICTORIA NI	22.00									
VP OF FINANCE	18.00			Х				144,245.	NONE	52,191.
(5) KELLY SIMON	20.00									
DEVELOPMENT DIRECTOR	20.00					Х		170,058.	NONE	19,339.
(6) STEVE RALLS	10.00									
VP OF EXTERNAL AFFAIRS	30.00					X		171,511.	NONE	13,881.
(7) MARGARET B DAVIS	20.00									
DIR. OF STRATEGIC PARTNERSHIP	20.00					X		145,818.	NONE	27,824.
(8) TARA D. SUTTON	2.00									
BOARD MEMBER	NONE	X						NONE	NONE	NONE
(9) BETH TERRELL	2.00									
PAST PRESIDENT	NONE	X		Χ				NONE	NONE	NONE
(10) MICHAEL L. PITT	2.00									
PAST PRESIDENT	NONE	X		Χ				NONE	NONE	NONE
(11) THOMAS M. SOBOL	2.00									
PRESIDENT-ELECT	NONE	X		Χ				NONE	NONE	NONE
(12) PRESTON C. TISDALE	2.00									
VICE PRESIDENT	NONE	X		Χ				NONE	NONE	NONE
(13) ERIC L. CRAMER	2.00									
IMMEDIATE PAST PRESIDENT	NONE	Х		Х				NONE	NONE	NONE
(14) MARY E. ALEXANDER	2.00									
BOARD MEMBER	NONE	X						NONE	NONE	NONE 990 (2022)

Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	nplo	ye	es,	and F	ligl	hest Compensat	ed Employees (c	ontinued)
(A)	(B)			((C)			(D)	(E)	(F)
Name and title	Average hours per week (list any hours for	box,	unles er and	eck s pe l a d	rson lirect	e than or	an ee)	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
15) BENJAMIN L. BAILEY	2.00									
BOARD MEMBER	NONE	X						NONE	NONE	NONE
(16) LAUREN GUTH BARNES	2.00	-								
BOARD MEMBER	NONE	X						NONE	NONE	NONE
17) LEONARD A. BENNETT	2.00									
BOARD MEMBER	NONE	X						NONE	NONE	NONE
18) ESTHER BEREZOFSKY	2.00									
BOARD MEMBER	NONE	X		Χ				NONE	NONE	NONE
19) RAYMOND P. BOUCHER	2.00									
BOARD MEMBER	NONE	X						NONE	NONE	NONE
20) ALAN BRAYTON	2.00									
PAST PRESIDENT	NONE	X		Х				NONE	NONE	NONE
21) MITCHELL BREIT	2.00									
BOARD MEMBER	NONE	X						NONE	NONE	NONE
22) DANIEL K. BRYSON	2.00									
PRESIDENT	NONE	X		Χ				NONE	NONE	NONE
23) RUSSELL W. BUDD	2.00									
BOARD MEMBER	NONE	Х						NONE	NONE	NONE
(24) JOAN CLAYBROOK	2.00									
BOARD MEMBER	NONE	Х						NONE	NONE	NONE
25) LINDA M. CORREIA	2.00									_
BOARD MEMBER	NONE	Х						NONE	NONE	NONE
1b Sub-total								906,615.	346,013.	194,783.
c Total from continuation sheets to Part VII, S	ection A						\blacktriangleright	NONE	NONE	NONE
d Total (add lines 1b and 1c)							\blacktriangleright	906,615.	346,013.	194,783.
2 Total number of individuals (including but not reportable compensation from the organizatio		hose	liste	d al	bov	e) who	re	ceived more than	\$100,000 of	
										Yes No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched										3
4 For any individual listed on line 1a, is the organization and related organizations gr individual	eater than	\$15	50,00	00?	· It	"Yes	," (complete Schedu		4
5 Did any person listed on line 1a receive or									on or individual	
for services rendered to the organization? If "Y Section B. Independent Contractors										5

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VII Section A. Officers, Directors,		÷y ⊏π	ipic			and F	ııgı			·
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours per	(do i	not c		ition	e than o	ne	Reportable	Reportable compensation from related	Estimated amount of
	week (list any	,				is both		compensation from		other
	hours for			_		or/trust	_	the	organizations	compensation
	related organizations	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest co employee	Former	organization	(W-2/1099-MISC)	from the organization
	below dotted	idua	utio	еŗ	mp	est c	er	(W-2/1099-MISC)		and related
	line)	2 2	nalt		loye	compensated				organizations
		stee	ruste		0	ens				
			ě			ated				
26) JOSEPH COTCHETT	2.00									
PAST PRESIDENT	NONE	Х		Х				NONE	NONE	NONE
27) HARRY DEITZLER	2.00									
PAST PRESIDENT	NONE	Х		Х				NONE	NONE	NONE
28) THOMAS DEMPSEY	2.00									
PAST PRESIDENT	NONE	Х		Х				NONE	NONE	NONE
29) CONAL DOYLE	2.00									
BOARD MEMBER	NONE	X						NONE	NONE	NONE
30) E. MICHELLE DRAKE	2.00									
BOARD MEMBER	NONE	X						NONE	NONE	NONE
31) JEFFREY D. EISENBERG	2.00	-								
BOARD MEMBER	NONE	X						NONE	NONE	NONE
32) INGRID EVANS	2.00								17017	37037
BOARD MEMBER THRU 7/2022	NONE	X						NONE	NONE	NONE
33) STEVEN FINEMAN	2.00	X		3.7				NONE	NONE	NIONIE
PAST PRESIDENT 34) JEFFREY FOOTE	2.00	_ A		Х				NONE	NONE	NONE
PAST PRESIDENT	NONE	X		Х				NONE	NONE	NONE
35) MYRIAM GILLES	2.00	_ ^		Λ				NONE	NONE	NONE
BOARD MEMBER	NONE	X						NONE	NONE	NONE
36) JEFFREY GOLDBERG	2.00	- 21						110111	110111	IVOIVI
PAST PRESIDENT	NONE	X		Х				NONE	NONE	NONE
1h Sub-total	110111							1,01,1	110112	110111
c Total from continuation sheets to Part VII	. Section A		• •							
d Total (add lines 1b and 1c)							•			
2 Total number of individuals (including but n				d a	bove	e) who	o re	ceived more than	\$100,000 of	
reportable compensation from the organiza	tion >									
										Yes No
3 Did the organization list any former of	fficer, directo	or, or	tru	ıste	e,	key e	emp	loyee, or highes	t compensated	
employee on line 1a? If "Yes," complete Sch	edule J for su	ch ina	livid	ual						3
4 For any individual listed on line 1a, is th	e sum of rea	oortab	ole d	com	per	sation	n ai	nd other compens	sation from the	
organization and related organizations	greater than	\$15	50,0	00?	. If	"Yes	3,"	complete Schedu		
individual										4
5 Did any person listed on line 1a receive	or accrue co	mpen	sati	on i	fron	n any	un	related organization	on or individual	

for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

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

5

Part VII Section A. Officers, Directors,		y En	plc	ye	es,	and F	ligl	hest Compensat	ed Employees (d	continued)
(A)	(B)			(0	C)			(D) Reportable compensation from the	(E)	(I	F)
Name and title	Average hours per week (list any hours for	box,	unles	heck ss pe	erson	e than o is both or/trust	an		Reportable compensation from related organizations	amoi otl	nated unt of her nsation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organ and r	n the ization elated zations
37) ROBIN L. GREENWALD	2.00										
BOARD MEMBER	NONE	Х						NONE	NONE		NONE
38) RODNEY G. GREGORY	2.00										
BOARD MEMBER	NONE	Х						NONE	NONE		NONE
39) J. GARY GWILLIAM PAST PRESIDENT	2.00 NONE	X		Х				NONE	NONE		NONE
40) J.D. HAYS, JR.	2.00										
BOARD MEMBER	NONE	X						NONE	NONE		NONE
41) STEPHEN J. HERMAN	2.00										
BOARD MEMBER THRU 7/2022	NONE	Х						NONE	NONE		NONE
42) STEVEN KAZAN	2.00										
BOARD MEMBER	NONE	X						NONE	NONE		NONE
43) ANNE KEARSE	2.00	-									
PAST PRESIDENT	NONE	X		X				NONE	NONE		NONE
44) AMY E. KELLER	2.00	∤									
BOARD MEMBER	NONE	Х						NONE	NONE		NONE
45) RAYNA KESSLER	2.00 NONE	- ,,						NONE	NONTE		NONE
BOARD MEMBER	NONE	X						NONE	NONE		NONE
46) KALPANA KOTAGAL	2.00 NONE	X						NONE	NONE		NIONIE
BOARD MEMBER 47) ANDREW A. LEMMON	2.00	Α.						INOINE	NONE		NONE
BOARD MEMBER	NONE	x						NONE	NONE		NONE
1h Cub total								NONE	INONE		NOINE
c Total from continuation sheets to Part VI					• •						
d Total (add lines 1b and 1c)											
2 Total number of individuals (including but r				d a	bov	e) who	re	ceived more than	\$100.000 of		
reportable compensation from the organiza						<i>,</i>			4 . 00,000 0.		
										Y	es No
3 Did the organization list any former of employee on line 1a? If "Yes," complete Sci										3	
4 For any individual listed on line 1a, is the organization and related organizations individual	ne sum of rep greater than	oortab \$15	ole o 50,0	com 00?	per	satior "Yes	n aı	nd other compens	sation from the	4	
5 Did any person listed on line 1a receive									on or individual	-	

for services rendered to the organization? *If "Yes," complete Schedule J for such person*Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

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

Page 8

Part VII Section A. Office	rs, Directors, Tru	ustees, Ke	y En	nplo	ye	es,	and F	lig	hest Compensat	ed Employees (continue	ed)	
(A)		(B)				C)			(D)	(E)		(F)	
Name and title		Average				ition			Reportable	Reportable	Es	stimated	t
		hours per	,				e than o		compensation	compensation from	am	nount c	of
		week (list any					is both or/trust		from	related		other	
		hours for related							the	organizations (W-2/1099-MISC)		pensat om the	
		organizations	divi	stitu	Officer	у е	ghe	Former	organization (W-2/1099-MISC)	(**-2/1099-10130)	1	anizatio	
		below dotted	dual	tior	<u> </u>	mpl	st c	PF	(** 2/1000 141100)			d relate	
		line)	Individual trustee or director	Institutional trustee		Key employee	dmo				orga	anizatio	ns
			stee	uste			ens						
				ď			Highest compensated employee						
48) THEODORE J. LEOPC	T.D	2.00											
PAST PRESIDENT		NONE	X		X				NONE	NONE	a		NONE
49) SETH R. LESSER		2.00							110112	110112	1		110111
BOARD MEMBER		NONE	X						NONE	NONE	3		NONE
50) SALVADOR LICCARDO	1	2.00							110112	110112	1		110111
PAST PRESIDENT		NONE	X		Х				NONE	NONE	,		NONE
51) JASON L. LICHTMAN	•	2.00	21		25				NONE	NONE	-		IVOIVE
BOARD MEMBER		NONE	X						NONE	NONE	,		NONE
52) MIMI Y. LIU		2.00	Α.						NONE	INOINE	1		INOINE
BOARD MEMBER		NONE	X						NONE	NONE	,		NONE
53) FREDERICK S. LONG	rD	2.00							NONE	NONE	1		INCINE
BOARD MEMBER THRU 7/2		NONE	x						NONE	NONE	,		NONE
54) ROGER L. MANDEL	022	2.00	Α.						NOINE	INOINE	1		INOINE
BOARD MEMBER		NONE	x						NONE	NONE	,		NIONIE
55) HADLEY L. MATARAZ	70	2.00	Λ						NOINE	NONE	1		NONE
BOARD MEMBER		NONE	X						NONE	NONE	7		NTONTE
56) PAUL MILLER		2.00	Λ						NOINE	NONE	1		NONE
BOARD MEMBER		NONE	X						NONE	NIONIE	7		NTONTE
-		2.00	Λ						NOINE	NONE	1		NONE
(<u>57) KRISTEN MILLER</u> BOARD MEMBER		NONE	X						NONE	NONE	7		NTONTE
58) BRAD MOORE		2.00	Α.						NONE	INOINE	1		NONE
BOARD MEMBER		NONE	x						NONIE	NIONIE	7		NTONTE
		NONE	Α.					_	NONE	NONE	1		NONE
1b Sub-total				• •									
c Total from continuation sh				• •		• •							
d Total (add lines 1b and 1c)2 Total number of individuals									acived more than	\$100,000 of	<u> </u>		
reportable compensation from			11056	IISIE	ua	DUV	e) Wiic	י ו כ	ceived more man	\$100,000 01			
Toportable delinperioditeri in	om the organization											Yes	No
2 Did the consciontion list		!!				_						163	NO
3 Did the organization list employee on line 1a? If "Yes											3		
	-										3		
4 For any individual listed o	n line 1a, is the	sum of rep	oortab	ole d	com	per	sation	າ ai	nd other compens	sation from the			
organization and related individual											4		
											4		
5 Did any person listed on I for services rendered to the											5		
Section B. Independent Contra		es, comple	ie sci	ieut	ile J	101	Sucri	per	3011				
1 Complete this table for you		nanestad i	nden	anda	ant .	con	tracto	re +	hat received more	than \$100 000 a			
compensation from the org													
year.		,20.10011	, .			5.10	J. , 5			J. gameand			
-	/A\								(D)		· · · ·		
N:	(A) ame and business add	dress							(B) Description of se	ervices	(C) Compens		

Name and business address

Description of services

Compensation

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

Page 8

Part VII Section A. Officers, Directors, Tr	1	y ⊑n	ıpıc			and I	ııg	· ·	ea Empioyees (d	,
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours per week (list any hours for	box,	unle	heck ss pe	erson	e than o is both or/trust	an	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
59) CHRISTOPHER T. NACE	2.00									
BOARD MEMBER	NONE	X						NONE	NONE	NON:
60) MAJED NACHAWATI	2.00									
BOARD MEMBER	NONE	X						NONE	NONE	NON
61) VICTORIA S. NUGENT BOARD MEMBER	2.00_ NONE	X						NONE	NONE	NON
62) MARY PARKER	2.00	_ ^						NONE	NONE	NON
PAST PRESIDENT	NONE	X		Х				NONE	NONE	NON
63) GALE PEARSON	2.00							110112	110112	
BOARD MEMBER	NONE	Х						NONE	NONE	NON
64) PETER PERLMAN	2.00									
PAST PRESIDENT	NONE	Х		Х				NONE	NONE	NON
65) JOSEPH POWER	2.00									
PAST PRESIDENT	NONE	X		Х				NONE	NONE	NON
66) ANNA P. PRAKASH	2.00									
BOARD MEMBER	NONE	X						NONE	NONE	NON:
67) ELLEN A. PRESBY	2.00	.,						NONE	NONE	37037
BOARD MEMBER 68) SANDRA ROBINSON	2.00	X						NONE	NONE	NON
PAST PRESIDENT	NONE	X		Х				NONE	NONE	NON
69) RONALD RODRIGUEZ	2.00	21		25				IVOIVE	NONE	IVOIV.
BOARD MEMBER	NONE	X						NONE	NONE	NON:
1b Sub-total							•			
c Total from continuation sheets to Part VII, S	=		• •		• •					
d Total (add lines 1b and 1c)			liste	d a	bov	e) who	o re	ceived more than	\$100,000 of	
reportable compensation from the organization						-,				
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched										Yes No
4 For any individual listed on line 1a, is the organization and related organizations grindividual	sum of repeater than	oortab \$15	ole (com 00?	per	satio	n a	nd other compens	sation from the le J for such	4
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue co	mpen	sati	on i	fron	n any	un	related organization	on or individual	5
Section B. Independent Contractors	-5, 55111010					20.011	,-01			1 - 1
Complete this table for your five highest con	npensated i	ndene	ende	ent	con	tracto	rs t	hat received more	than \$100,000 c	of

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

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

Page 8

Part VII Section A. Officers, Director	s, Trustees, Ke	y En	nplo	ye	es,	and I	Hig	hest Compensat	ed Employees (d	continued)
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average			Pos	sition			Reportable	Reportable	Estimated
	hours per	,				e than c		compensation	compensation from	amount of
	week (list any hours for	1				is both tor/trust		from	related	other compensation
	related		T T					the organization	organizations (W-2/1099-MISC)	from the
	organizations	dire	l tit	Officer	Key employee	ghes	Former	(W-2/1099-MISC)	(W 2, 1000 Miles)	organization
	below dotted	ual	tion	,	nplo	st cc yee				and related
	line)	Individual trustee or director	al ta		yee	mp				organizations
		ee	Institutional trustee			Highest compensated employee				
			Ф			ited				
(70) LEE J. ROHN	2.00									
BOARD MEMBER	NONE	X						NONE	NONE	NON
(71) SUSAN SALADOFF	2.00									
PAST PRESIDENT	NONE	X		Х				NONE	NONE	NONE
(72) FREDERICK S. SCHWARTZ	2.00									
BOARD MEMBER	NONE	X						NONE	NONE	NONE
(73) GEORGE SHADOAN	2.00									
PAST PRESIDENT	NONE	X		Х				NONE	NONE	NONE
(74) DONALD H. SLAVIK	2.00	_								
BOARD MEMBER	NONE	X						NONE	NONE	NONI
(75) TODD A. SMITH	2.00_	-								
BOARD MEMBER	NONE	X						NONE	NONE	NONI
(76) GERSON SMOGER	2.00_	-								
BOARD MEMBER	NONE	X						NONE	NONE	NONI
(77) WILLIAM SNEAD	2.00									
PAST PRESIDENT	NONE	X		Х				NONE	NONE	NONE
(78) PAUL STRITMATTER	2.00	1,,		3,7				NONE	NONE	21021
PAST PRESIDENT	NONE	X		Х				NONE	NONE	NONE
(79) DAVID F. SUGERMAN	2.00_	- 7						NONE	NONE	NONI
BOARD MEMBER (80) CHRISTOPHER P. THORMAN	2.00	X						NONE	NONE	NONE
BOARD MEMBER		x						NONE	NONE	NONI
	NONE	A						NONE	NOINE	110111
1b Sub-total c Total from continuation sheets to Part	VII Section A		• •	• •	• •					
d Total (add lines 1b and 1c)	-			• •						
2 Total number of individuals (including bu							o re	ceived more than	\$100,000 of	
reportable compensation from the organ				u u.		o,	0 .0	oorvoa moro man	Ψ100,000 0.	
										Yes No
3 Did the organization list any former	officer, directo	or. or	tru	ıste	e.	kev e	emp	olovee, or highes	t compensated	
employee on line 1a? If "Yes," complete S										3
4 For any individual listed on line 1a, is	the sum of rer	oortah	مام م	nom	ner	neatio	n a	nd other compen	sation from the	
organization and related organization	ine sam of repairs greater than	\$15	50.0	00?	P It	"Yes	s."	complete Schedu	le J for such	
individual	•						-	,		4
5 Did any person listed on line 1a recei										
for services rendered to the organization										5
Section B. Independent Contractors										
 Complete this table for your five highes compensation from the organization. Re 										

year.

(A) Name and business address	(B) Description of services	(C) Compensation

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

Page **8**

Р	art VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	plo	ye	es,	and H	lig	hest Compensat	ed Employees (d	continued)
	(A) Name and title	(B) Average hours per week (list any hours for related	box,	unle:	Pos heck ss pe	erson direct	e than o	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
		organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(8	l) MICHAEL P. THORNTON	2.00									
	DARD MEMBER	NONE	X						NONE	NONE	NONE
	2) RICHARD P. TRAULSEN	2.00									
	DARD MEMBER	NONE	X						NONE	NONE	NONE
	3) WILLIAM TRINE	2.00	37		37				NONE	NONE	NIONIE
	AST PRESIDENT	NONE	X		Х				NONE	NONE	NONE
	4) JANET VARNELL	2.00 NONE	X		Х				NONE	NONE	NONE
_	5) MONA LISA WALLACE	2.00	_ ^		Λ				NOINE	NONE	NONE
	AST PRESIDENT	NONE	X		X				NONE	NONE	NONE
_	5) MELISSA W. WEINER	2.00	21		21				110111	110111	110111
	DARD MEMBER	NONE	X						NONE	NONE	NONE
	7) STEVEN N. WILLIAMS	2.00									
	OARD MEMBER	NONE	Х						NONE	NONE	NONE
(8	B) MICHAEL WITHEY	2.00									
Ρ.	AST PRESIDENT	NONE	Х		Х				NONE	NONE	NONE
(_8_	9)_TINA_WOLFSON	2.00									
В	DARD MEMBER	NONE	X						NONE	NONE	NONE
(_9_	O) HASSAN A. ZAVAREEI	2.00									
S	ECRETARY	NONE	X		Х				NONE	NONE	NONE
	l) VIRGINIA BUCHANAN	2.00									
_B	DARD MEMBER	NONE	X						NONE	NONE	NONE
	o Sub-total c Total from continuation sheets to Part VII, So d Total (add lines 1b and 1c)	-						* * *			
2	Total number of individuals (including but not reportable compensation from the organization		hose	liste	d a	bove	e) who	o re	eceived more than	\$100,000 of	
3	Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu										Yes No
4	For any individual listed on line 1a, is the sorganization and related organizations graindividual	eater than	\$15	0,0	00?	. If	"Yes	5, "	complete Schedu	le J for such	4
5		accrue co	mpen	sati	on i	fron	n any	un	related organization	on or individual	5
S	ection B. Independent Contractors										
4	Complete this table for your five highest com	noncated i	ndone	nde	nt	00n	tracto	rc t	hat received more	than \$100 000 c	.f

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y Em	plo	yee	es,	and I	ligi	hest Compensate	ed Employees (c	ontinue	ed)	
(A) Name and title	(B) Average			(C	c) ition			(D) Reportable	(E) Reportable		(F) stimated	
	hours per week (list any hours for	any box, unless person is both an officer and a director/trustee)						compensation from the	compensation from related organizations	amount of other compensation		
	related organizations below dotted line)	166 0 1 ⊑		Officer Institutional trustee		Former Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations		t
92) ELIZABETH CHAVEZ	2.00											
BOARD MEMBER	NONE	Х						NONE	NONE			NONE
93) FELICIA MEDINA	2.00											
BOARD MEMBER	NONE	Х						NONE	NONE			NONE
94) ADAM ZAPALA	2.00											
BOARD MEMBER	NONE	X						NONE	NONE			NONE
95) CHAUNIQUA YOUNG	2.00											
BOARD MEMBER	NONE	X						NONE	NONE			NONE
96) SABITA SONEJI	2.00											
BOARD MEMBER	NONE	X						NONE	NONE			NONE
97) DIANDRA "FU" DEBROSSE ZIMMERM	2.00											
BOARD MEMBER	NONE	X						NONE	NONE			NONE
98) ERIC FONG	2.00											
BOARD MEMBER	NONE	Х						NONE	NONE			NONE
99) DEBORAH ELMAN	2.00											
BOARD MEMBER	NONE	Х						NONE	NONE			NONE
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)							> > >					
2 Total number of individuals (including but not reportable compensation from the organization	limited to t						o re	ceived more than	\$100,000 of			
											Yes	No
3 Did the organization list any former office	er, directo	r, or	tru	ıste	e,	key e	emp	loyee, or highest	compensated			
	ule J for su											

3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated			
	employee on line 1a? If "Yes," complete Schedule J for such individual	3		Х
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual			

for services rendered to the organization? If "Yes," complete Schedule J for such person **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax

SEE SCHEDULE O Name and business address	(B) Description of services	(C) Compensation

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

orm	990 (2	PUBLIC JUS'	TICE FOUNDAT	ΓΙΟΝ		59-17304	78 Page 9
Par	t VIII	Statement of Revenue					
		Check if Schedule O contains a respo	nse or note to an	y line in this Part V	/111		
		·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts,	1a	Federated campaigns 1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues 1b	1,709,741.				
֓֞֝֓֞֝֓֞֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	С	Fundraising events 1c	263,880.				
fts F	d	Related organizations 1d					
פֿיַּ	е	Government grants (contributions) 1e	499,089.				
Sin	f	All other contributions, gifts, grants,					
e E		and similar amounts not included above . 1f	4,695,290.				
턀	g	Noncash contributions included in					
בַּבַ		lines 1a-1f 1g	\$ 131,909.				
ಶ ೮	h	Total. Add lines 1a-1f		7,168,000.			
			Business Code				
<u>8</u>	2a						
e S	b						
Program Service Revenue	С						
	d						
	е						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		NONE			
	3	Investment income (including dividends,	interest, and				
		other similar amounts)		293,279.			293,279.
	4	Income from investment of tax-exempt bond	d proceeds .	NONE			
	5	Royalties		NONE			
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c NON	E NONE				
	d	Net rental income or (loss)		NONE			
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a 1,060,580					
ine	b	Less: cost or other basis					
		and sales expenses 7b 1,087,132					
Other Rever	С	Gain or (loss)					
ē	d	Net gain or (loss)		-26,552.			-26,552.
Ħ	8a	Gross income from fundraising					
Ū		events (not including \$263,880.					
		of contributions reported on line					
		1c). See Part IV, line 18 8a	NONE				
	b	Less: direct expenses	186,698.	106 600			
	С	Net income or (loss) from fundraising events		-186,698.			
	9a	Gross income from gaming	NONE				
		activities. See Part IV, line 19 9a					
		Less: direct expenses 9b	NONE	NONE			
	C	Net income or (loss) from gaming activities		NONE			
	10a	Gross sales of inventory, less returns and allowances	NONE				
	.						
	b	Less: cost of goods sold		NONE			
		mesme e. (1000) from calco of inventory.	Business Code	NONE			
ous •	44-	MISCELLANEOUS	900099	14,819.			14,819
nue	11a			_1,017.			1 1,023
Miscellaneous Revenue	b						
ŠŠ	C d	All other revenue					
Σ		Total. Add lines 11a-11d		14,819.			
	42	Total revenue Con instructions		E 060 640			001 545

59-1730478

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 resp	onse or note to any lin	e in this Part IX		
	not include amounts reported on lines 6b, 7b, 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	NONE			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	NONE			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	NONE			
4	Benefits paid to or for members	NONE			
5	Compensation of current officers, directors,				
	trustees, and key employees	493,432.	249,409.	166,060.	77,963
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	NONE			
7	Other salaries and wages	2,623,860.	1,326,079.	883,262.	414,519
8	Pension plan accruals and contributions (include	45,755.	23,144.	15,376.	7,235
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	319,745.	161,736.	107,451.	50,558
10	Payroll taxes	281,164.	142,221.	94,486.	44,457
	Fees for services (nonemployees):				
	Management	NONE	1 005 000		
	Legal	1,285,808.	1,285,808.	F0 202	55,050
	Accounting	191,471.	83,876.	52,323.	55,272
	Lobbying	135,003.	135,003.		160 764
	Professional fundraising services. See Part IV, line 17.	168,764.		47 270	168,764
	Investment management fees	47,278.		47,278.	
g	Other. (If line 11g amount exceeds 10% of line 25, column	461 774	100 020	210 522	E1 202
40	(A), amount, list line 11g expenses on Schedule O.)	461,774. NONE	199,939.	210,532.	51,303
	Advertising and promotion	17,621.	9,165.	5,805.	2,651
	Office expenses	59,112.	29,988.	19,830.	9,294
	Information technology	NONE	29,900.	19,030.	9,294
	Royalties	523,528.	257,976.	185,718.	79,834
	Occupancy	112,177.	94,301.	14,540.	3,336
	Payments of travel or entertainment expenses	112,177.	71,501.	11,510.	3,330
10	for any federal, state, or local public officials	NONE			
19	Conferences, conventions, and meetings	NONE			
	Interest	1,550.		1,550.	
21		NONE		,	
22		73,304.	37,031.	24,698.	11,575
	Insurance	63,422.	32,039.	21,368.	10,015
	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, list line 24e expenses on Schedule O.)				
а	OFFICE SYSTEMS	105,598.	59,475.	32,680.	13,443
b	PRINTING AND MAILSHOP	46,420.	5,194.	36,201.	5,025
c	COMMUNICATIONS	108,051.	93,087.	12,156.	2,808
d	STAFF DEVELOPMENT	58,643.	34,602.	17,889.	6,152
е	All other expenses	359,432.	215,426.	55,518.	88,488
	Total functional expenses. Add lines 1 through 24e	7,582,912.	4,475,499.	2,004,721.	1,102,692.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this	Part X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	2,867,994.	1	2,232,996.
	2	Savings and temporary cash investments	193,674.	2	193,684.
	3	Pledges and grants receivable, net	1,838,167.	3	505,000.
	4	Accounts receivable, net	. NONE	4	NONE
	5	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	. NONE	5	NONE
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).	. NONE	6	NONE
ts	7	Notes and loans receivable, net	. NONE	7	NONE
Assets	8	Inventories for sale or use	. NONE	8	NONE
ğ	9	Prepaid expenses and deferred charges SEE SCHEDULE .O		9	164,588.
	10 a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D	3.		
	b	Less: accumulated depreciation		10c	327,124.
	11	Investments - publicly traded securities . SEE SCHEDULE O		11	11,796,976.
	12	Investments - other securities. See Part IV, line 11			NONE
	13	Investments - program-related. See Part IV, line 11			NONE
	14	Intangible assets			NONE
	15	Other assets. See Part IV, line 11		15	2,490,294.
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	17,710,662.
	17	Accounts payable and accrued expenses		17	418,245.
	18	Grants payable			NONE
	19	Deferred revenue	•	19	NONE
	20	Tax-exempt bond liabilities			NONE
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			NONE
s	22	Loans and other payables to any current or former officer, director,			110111
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
į		controlled entity or family member of any of these persons		22	NONE
Ë	23	Secured mortgages and notes payable to unrelated third parties			NONE
	24	Unsecured notes and loans payable to unrelated third parties			NONE
	25	Other liabilities (including federal income tax, payables to related third			110111
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	4,065,804.
	26	Total liabilities. Add lines 17 through 25		26	4,484,049.
-ses		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	2,103,000.	20	1, 101, 015.
au	27	Net assets without donor restrictions	11 051 001	27	9,873,344.
Bal	28	Net assets with donor restrictions.		28	3,353,269.
Б	20	Organizations that do not follow FASB ASC 958, check here	3,252,464.	20	3,353,269.
Net Assets or Fund Balances		and complete lines 29 through 33.			
S	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
AS	31	Retained earnings, endowment, accumulated income, or other funds		31	
et	32	Total net assets or fund balances		32	13,226,613.
<u>z</u>	33	Total liabilities and net assets/fund balances	17,587,243.	33	17,710,662.
					Form 990 (2022)

Part	XI Reconciliation of Net Assets					$\overline{}$
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1				848
2	Total expenses (must equal Part IX, column (A), line 25)	2		7,5	82,	912
3	Revenue less expenses. Subtract line 2 from line 1	3		-3	20,	<u>064</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1	5,1	03,	<u> 575</u>
5	Net unrealized gains (losses) on investments	5		1,5	56,	<u>898</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
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	3,2	26,	<u>613</u>
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			ſ		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," ex	plain	on			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were con	piled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted or	ıa			
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	rsight	of			
	the audit, review, or compilation of its financial statements and selection of an independent accounta	nt?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, e.	(plain	on			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in t	he			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	ergo t	the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such as			3b		

SCHEDULE A (Form 990)

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 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number PUBLIC JUSTICE FOUNDATION 59-1730478 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I 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).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(y). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 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.) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 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 331/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 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 12 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. d 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 II, Type III, Typ functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (v) Amount of monetary (iv) Is the organization (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see instructions) above (see instructions)) document? instructions) Yes No (A) (B) (C)

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

Schedule A (Form 990) 2022

(D)

(E)

Total

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. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	6,327,869.	6,002,559.	6,885,273.	9,251,242.	7,168,000.	35,634,943.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
3	The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
4	Total. Add lines 1 through 3	6,327,869.	6,002,559.	6,885,273.	9,251,242.	7,168,000.	35,634,943.
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						
6	shown on line 11, column (f)						3,180,632.
6	Public support. Subtract line 5 from line 4 tion B. Total Support						32,454,311.
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
_	, , , , , ,	6,327,869.	6,002,559.	6,885,273.	9,251,242.	7,168,000.	35,634,943.
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	66,817.	208,553.	129,369.	226,437.	293,279.	924,455.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						NONE
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	28,993.	50,745.	42,757.	10,553.	14,819.	147,867.
11	Total support. Add lines 7 through 10						36,707,265.
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	
13	First 5 years. If the Form 990 is for organization, check this box and stop here.	<u> </u>					
	tion C. Computation of Public Supp						
14	Public support percentage for 2022 (lin		-			14	88.41 %
15	Public support percentage from 2021					15	89.74 %
16a	331/3% support test - 2022. If the org						
L	box and stop here. The organization qu						
D	331/3% support test - 2021. If the org this box and stop here. The organization						
172	10%-facts-and-circumstances test - 2	•		•			
114	10% or more, and if the organization						
	Part VI how the organization meets					-	-
	organization			•	•		
b	10%-facts-and-circumstances test - 2						
-	15 is 10% or more, and if the organiz	-					
	in Part VI how the organization meets						•
	organization			•	•	• •	
18	Private foundation. If the organizatio						
-	instructions						

Part III 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			,,	<u> </u>	,	
	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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						
3	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
6	Amounts included on lines 1, 2, and 3						
/a	received from disqualified persons						
h	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 8	Add lines 7a and 7b						
0	line 6.)						
Sec	tion B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	(4) 20 . 0	(2) 20:0	(0, 2020	(4) 2021	(0) 2022	(.,
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from similar sources						
h	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
•	Add lines 10a and 10b						
	Net income from unrelated business						
11							
	activities not included on 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						
40	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
4.4	and 12.)	4ha ' ''	ania fit	 	- fifth '		F04/-\/0\
14	First 5 years. If the Form 990 is for	_					
	organization, check this box and stop here.						
<u>Sec</u>	tion C. Computation of Public Supp Public support percentage for 2022 (line 8,			ımn (f))		15	%
16							
$\overline{}$	Public support percentage from 2021 Sche tion D. Computation of Investment					16	70
	Investment income percentage for 2022 (lin			13 column (f))		17	%
17 18	Investment income percentage for 2022 (III					18	
	331/3% support tests - 2022. If the org						
154	17 is not more than 331/3%, check this	-					
L	331/3% support tests - 2021. If the orga						
D	line 18 is not more than 331/3%, check				•		
20	Private foundation. If the organization of		-	•		• • • • • • • • • • • • • • • • • • • •	
				,,	,		

JSA 2E1221 1.000

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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).
- **8** Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 on 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 on 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.**
- 10 a 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 line 10b below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, t determine whether the organization had excess business holdings.)

		Yes	No
ng <i>by</i>			
	1		
us			
ed			
	2		
er	3a		
nd			
he			
	3b		
B)			
	3с		
If	4a		
gn	ти		
on			
	4b		
on			
ed			
B)	4c		
s, "	40		
s, IN			
n;			
on			
	5a		
dy	5b		
	5c		
to			
ed			
or			
	6		
or ity			
,	7		
ne			
	8		
re ns			
115	9a		
ch			
	9b		
fit			
	9с		
on ed			
- -	10a		
to			
odul	10b		n) 2022
	^ ^ (E'	rm 000	. 2022

Part	Supporting Organizations (continued)			- 5 -
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,	44.		
Secti	provide detail in Part VI. on B. Type I Supporting Organizations	11c		
3001.	on billypo i cupporting organizations		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	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 officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
Sooti	on C. Type II Supporting Organizations	2		
ec ii	on C. Type ii Supporting Organizations		Vas	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	140
'	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		
Secti	on D. All Type III Supporting Organizations			
	Did the constitution was ide to each of its commented array to the least day of the fifth wearth of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
2	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
3	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		
Secti	on 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 ins	structi	ons).	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	e instr		r
2	Activities Test. Answer lines 2a and 2b below.		Yes	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in 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		
J.	•			
b	Did the activities described on line 2a, above, 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. <i>Answer lines 3a and 3b below.</i>			
а	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? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3h		i .

Page 6 Schedule A (Form 990) 2022

Pa	art V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nizations	S	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organic			
Se	ection A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
_4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
_7		7		
_8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Se	ection 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):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
_	Total (add lines 1a, 1b, and 1c)	1d		
е	e Discount claimed for blockage or other factors (explain in detail in Part VI):			
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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Se	ection C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional (see instructions).	ly integra	ted Type III supporting	g organization

Schedule A (Form 990) 2022

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Part V

Schedule A (Form 990) 2022 Page 7

Sect	Section D - Distributions						
1	Amounts paid to supported organizations to accomplish ex	Amounts paid to supported organizations to accomplish exempt purposes					
2	Amounts paid to perform activity that directly furthers exem	npt purposes of support	ed				
	organizations, in excess of income from activity			2			
3	Administrative expenses paid to accomplish exempt purpo-	ses of supported organi	zations	3			
4	Amounts paid to acquire exempt-use assets			4			
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)						
6	Other distributions (describe in Part VI). See instructions.			6			
7	Total annual distributions. Add lines 1 through 6.			7			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive				
	(provide details in Part VI). See instructions.			8			
9	Distributable amount for 2022 from Section C, line 6			9			
10	Line 8 amount divided by line 9 amount			10			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	s	(iii) Distributable Amount for 2022		
1	Distributable amount for 2022 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2022						
	(reasonable cause required - explain in Part VI). See						
	instructions.						
3	Excess distributions carryover, if any, to 2022						
a	From 2017						
b	From 2018						
С	From 2019						
d	From 2020						
е	From 2021						
f	Total of lines 3a through 3e						
g	Applied to underdistributions of prior years						
h	Applied to 2022 distributable amount						
i	Carryover from 2017 not applied (see instructions)						
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.						
4	Distributions for 2022 from						
	Section D, line 7: \$						
а	Applied to underdistributions of prior years						
b	Applied to 2022 distributable amount						
С	Remainder. Subtract lines 4a and 4b from line 4.						

Schedule A (Form 990) 2022

31

5

Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

Excess distributions carryover to 2023. Add lines 3j

Part VI. See instructions.

Breakdown of line 7: Excess from 2018 Excess from 2019 Excess from 2020 Excess from 2021 Excess from 2022

and 4c.

Schedule B (Form 990)

Department of the Treasury

Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Employer identification number Name of the organization PUBLIC JUSTICE FOUNDATION 59-1730478 Organization type (check one): Filers of: Section: X Form 990 or 990-EZ 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line

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

Schedule B (Form 990) (2022)

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization
PUBLIC JUSTICE FOUNDATION

Employer identification number 59-1730478

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	N/A	\$1,709,741.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	N/A	\$263,880.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	N/A	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(-)	(-I)
No.	Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		Total contributions \$1,100,000.	Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
No.	Name, address, and ZIP + 4	Total contributions	Person X Payroll Noncash (Complete Part II for
No4	Name, address, and ZIP + 4 N/A (b)	\$1,100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	Name, address, and ZIP + 4 N/A (b) Name, address, and ZIP + 4	\$1,100,000. (c) Total contributions	Person X Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person X Payroll Noncash (Complete Part II for

Name of organization

PUBLIC JUSTICE FOUNDATION

Employer identification number

59-1730478

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	GREENBAUM FOUNDATION STOCK DONATIONS	_	
			12/07/2022
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	DANIEL BRYSON STOCK DONATIONS	_	
		\$25,079.	10/24/2022
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3	VICTORIA NUGENT STOCK DONATIONS	_	
			12/29/2022
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\ \$	

PUBLIC JUSTICE FOUNDATION 59-1730478 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Employer identification number

Name of organization

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. **Open to Public** Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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 30 I(c)(3) organizations	that have NOT filed Forth 5700 (ele	ction under section son(i	i)). Complete i ait ii-b. Do no	it complete i alt II-A.
if the Tax)	e organization answered "Yes," (See separate instructions), the	on Form 990, Part IV, line 5 (Pro	ky Tax) (See separate i	instructions) or Form 990-	EZ, Part V, line 35c (Proxy
•	Section 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Nam	e of organization			Employer ide	ntification number
PUF	BLIC JUSTICE FOUNDAT	ION		59-1	730478
Pa	rt I-A Complete if the c	organization is exempt unde	er section 501(c) or	is a section 527 orga	nization.
1	Provide a description of the	he organization's direct and in	direct political camp	paign activities in Part	IV. See instructions for
	definition of "political campa	aign activities."			
2	Political campaign activity e	xpenditures. See instructions		\$	
3	Volunteer hours for political	campaign activities. See instruct	ions		
	TEB Complete if the c	organization is exempt under	r section 501(c)(3).		
1	Enter the amount of any exc	cise tax incurred by the organizat	tion under section 495	55\$	
2	Enter the amount of any exc	cise tax incurred by organization	managers under sect	tion 4955 \$	
3	If the organization incurred a	a section 4955 tax, did it file Fori	m 4720 for this year?		Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV.				
Pai	rt I-C Complete if the c	organization is exempt unde	er section 501(c), e	xcept section 501(c)(3	3).
1	Enter the amount directly e	xpended by the filing organization	on for section 527 ex	xempt function	
	activities			\$	
2		ng organization's funds contribute			
		es			
3		enditures. Add lines 1 and 2. E			
	line 17b			\$	
4		e Form 1120-POL for this year?			
5		and employer identification nunces. For each organization listed, o			
		ributions received that were pro			
		nd or a political action committee			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) / tadi cos	(0) 2	filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate
					political organization. If none, enter -0
					ii none, enter o .
(1)					
(2)					
(3)					
(4)			\dashv		
(E)					
(5)			\dashv		
(e)					
(6)			\dashv		

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

Schedule C (Form 990) 2022

Sch	nedule C (Form 990) 2022	PUBLIC JUSTICE	FOUNDATION		59-	-1730478	Page 2		
Pa	art II-A Complete if the org section 501(h)).	anization is exer	npt under sectio	n 501(c)(3) and	filed Form 5768 (elec	ction under			
Α		ation belongs to an			ach affiliated group mem	ber's name, ad	dress		
В	Check if the filing organiz	ly.							
		on Lobbying Expen	ditures		(a) Filing organization's totals	(b) Affiliate group total			
18	a Total lobbying expenditures to ir	nfluence public opin	ion (grassroots lobb	oying)					
ŀ	b Total lobbying expenditures to ir	nfluence a legislativo	e body (direct lobby	ing)	135,003.				
(Total lobbying expenditures (add	d lines 1a and 1b) .			135,003.				
(d Other exempt purpose expendit	ures			7,447,909.				
•	e Total exempt purpose expenditu	ires (add lines 1c ar	nd 1d)		7,582,912.				
f	Lobbying nontaxable amount. columns.	Enter the amount	from the following	table in both	529,146.				
	If the amount on line 1e, column (a)	or (b) is: The lobbyir	ng nontaxable amount	is:					
	Not over \$500,000	20% of the	amount on line 1e.						
	Over \$500,000 but not over \$1,000	,000 \$100,000 p	us 15% of the excess	over \$500,000.	over \$500,000.				
	Over \$1,000,000 but not over \$1,50	00,000 \$175,000 p	us 10% of the excess	over \$1,000,000.					
	Over \$1,500,000 but not over \$17,0	000,000 \$225,000 p	us 5% of the excess	over \$1,500,000.					
	Over \$17,000,000	\$1,000,000							
	g Grassroots nontaxable amount	•		_	132,287.				
	h Subtract line 1g from line 1a. If a								
	Subtract line 1f from line 1c. If z								
j	i If there is an amount other that						_		
	reporting section 4911 tax for th					Yes	No		
			aging Period Unde						
	(Some organizations that		` '	-		ins below.			
		See the separa	te instructions for	lines 2a through	2f.)				
		Lobbying Expe	nditures During 4-Y	ear Averaging Pe	riod				
	Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total	l		
22	Lobbying nontaxable amount								

Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total			
2a	Lobbying nontaxable amount	454,871.	458,048.	478,454.	529,146.	1,920,519.			
b	Lobbying ceiling amount (150% of line 2a, column (e))					2,880,779.			
С	Total lobbying expenditures	39,124.	29,242.	65,030.	135,003.	268,399.			
d	Grassroots nontaxable amount	113,718.	114,512.	119,614.	132,287.	480,131.			
е	Grassroots ceiling amount (150% of line 2d, column (e))					720,197.			
f	Grassroots lobbying expenditures	_							

Schedule C (Form 990) 2022

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

	(**************************************					
For	or each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed		a)	(b)		
	cription of the lobbying activity.	Yes	No	An	nount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local					
	legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of:					
а	Volunteers?			-		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.			-		
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
i	Total. Add lines 1c through 1i					
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 \ldots					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	() (-)				
Pa	Telli-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or s	section		
	301(c)(v).				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 fro					
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 501		-			
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No"	OR (b) Pa	rt III-A, lin	e 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 amou	ınts (of			
	political expenses for which the section 527(f) tax was paid).			20		
а	Current year			2a 2b		
b	Carryover from last year			2c		
с 3	Total			3		
ა 4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion					
-	excess does the organization agree to carryover to the reasonable estimate of nondeductible le					
	and political expenditures next year?	300y		4		
5	Taxable amount of lobbying and political expenditures. See instructions			5		
	T IV Supplemental Information					
	ride the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate	d grou	up list	t); Part II-A	, lines 1	and
2 (S	ee instructions); and Part Il-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.

OMB No. 1545-0047 Open to Public

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service Name of the organization Employer identification number PUBLIC JUSTICE FOUNDATION 59-1730478 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) . 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes Nο Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. 2a 2b 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after July 25, 2006, and not on 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located _ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (ii) Assets included in Form 990, Part X.....\$_ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

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

Schedule D (Form 990) 2022

following amounts required to be reported under FASB ASC 958 relating to these items:

Sche		LIC JUST									730478		age 2
Pa	rt Organizations Maintaini	ng Collect	ions of	Art, Histo	rical Tre	asure	s, or	Other	Similar A	Assets (c	ontinue	d)	
3	Using the organization's acquisition	n, accessio	on, and c	ther recor	ds, check	c any o	f the	follow	ing that n	nake sign	ificant u	se o	f its
	collection items (check all that appl	ly):											
а	Public exhibition			d	Loan	or excha	ange	progran	n				
b	Public exhibition d Loan or exchange program Scholarly research e Other												
C	Preservation for future gener	rations											
4	Provide a description of the organ		allections	and evola	ain how t	hev fu	rther	the ord	anization'	s evemnt	nurnos	in e	Part
-	XIII.	iizatioi13 ct	JIICOLIOIIG	and expit	alli ilow t	ilicy iui	uici	the org	jariization	3 CACIIIPI	puipos	, ,,,	ı art
5	During the year, did the organization	n colicit or	roccivo	lonations o	fort bict	orical tr	000111	roc or a	thar cimil	or			
5										_	Yes] N.
Do	assets to be sold to raise funds rath			airieu as pa	it of the t	organiza	alion	s collec	tion?		res		No
Pa	rt IV Escrow and Custodial A			o" on For	~ 000 F) ort I\/	lina	0 0	norted o	n amaun	t on Fo	••••	
	Complete if the organiza	llion answe	ered re	S On Fon	m 990, F	an iv,	ime	9, 01 16	eported a	n amour	וו טוו רטו	Ш	
	990, Part X, line 21.												
1a	Is the organization an agent, trust				-					_			1
	included on Form 990, Part X?									L	Yes		No
b	If "Yes," explain the arrangement in	n Part XIII a	and comp	olete the fol	lowing tab	ole:							
										Amount			
С	Beginning balance						1c						
d	Additions during the year						1d						
е	Distributions during the year						1e						
f	Ending balance						1f						
2a	Did the organization include an am						or cu	stodial	account lia	ability?	Yes		No
b	If "Yes," explain the arrangement in											_	1
	rt V Endowment Funds.						- 1					-	
	Complete if the organiza	ition answ	ered "Ye	es" on For	m 990. F	Part IV.	line	10.					
		(a) Currer		(b) Prio		(c) Tw			(d) Three y	ears back	(e) Four	ears b	nack
			6,623.	(2) : ::0	NONE	(-)	,		(4)	ouro puon	(0) . 0)		
1a	Beginning of year balance	2,005	0,023.	0.04									
b	Contributions			2,00	00,000.								
С	Net investment earnings, gains,												
	and losses	-65	6,623.	(65,628.								
d	Grants or scholarships												
е	Other expenditures for facilities												
	and programs												
f	Administrative expenses				5.								
g	End of year balance	2,000	,000.	2,06	55,623.								
2	Provide the estimated percentage	of the curre	ent vear	end balance	e (line 1a.	column	(a))	held as:					
а	Board designated or quasi-endowm				· 0,		(//						
b	Permanent endowment 100.000	00 %											
С	Term endowment NONE %												
	The percentages on lines 2a, 2b, a	ind 2c shou	ld equal 1	100%.									
3a	Are there endowment funds not in				tion that	are hel	d and	d admin	istered for	the			
	organization by:										Y	es	No
	(i) Unrelated organizations										3a(i)		Х
	(ii) Related organizations										3a(ii)		X
L	If "Yes" on line 3a(ii), are the relate										3b		Λ
	* * *	•									30		
4	Describe in Part XIII the intended u		organiza	tion's endo	wment fur	nas.							
Pa	rt VI Land, Buildings, and Equ Complete if the organiza	ation answ	ered "Ye	es" on For	m 990. I	Part IV	. line	11a. S	See Form	990. Pa	rt X. line	10.	
	Description of property		(a) Cost or		(b) Cost of	or other ba			umulated) Book valu		-
			(invest			ther)			eciation				
1a	Land	_											
b	Buildings												
С	Leasehold improvements				6	66,20)2.	38	30,948.		285	5,25	54.
d	Equipment				2	261,50	00.	2	19,630.		4.	L,8	70.
е	Other					38,53			38,536.				ONE
Tota	I. Add lines 1a through 1e. (Column		qual Forn	n 990, Part							32	7,12	

327,124. Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 PUBLIC JUSTICE Part VII Investments - Other Securities.		39	-1730478 Page
Complete if the organization answered	l "Yes" on Form 990	Part IV line 11b See Form 990 I	Part X line 12
(a) Description of security or category	(b) Book value	(c) Method of valuatio	-
(including name of security)	(0, 2000 1000	Cost or end-of-year market	
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered	Tyes" on Form 990), Part IV, line 11c. See Form 990, I	Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuatio	
		Cost or end-of-year market	tvalue
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered	H "Yes" on Form 990) Part IV line 11d See Form 990 I	Part X line 15
· · · · · · · · · · · · · · · · · · ·	scription	7,1 art 17, iiile 11a. Gee 1 61111 336, 1	(b) Book value
	scription		. ,
(1)SECURITY DEPOSITS			50,918.
(2)OPERATING LEASE - RIGHT OF USE			2,439,376.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) I	line 15.)		2,490,294.
Part X Other Liabilities.			
Complete if the organization answered	d "Yes" on Form 990), Part IV, line 11e or 11f. See Form	990, Part X,
line 25.			
1. (a) Descrip	otion of liability		(b) Book value
(1) Federal income taxes	•		
(2)DEFERRED LEASE OBLIGATION			NONE
(3)LOAN PAYABLE - CURRENT			NONE
(4)LOAN PAYABLE - NON-CURRENT			NONE
			1,099,321.
(5)DUE TO PUBLIC JUSTICE PC			
(6)OPERATING LEASE LIABILITY - CURRENT			381,302.
(7)OPERATING LEASE LIABILITY - NON-CUR			2,585,181.
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)			4,065,804.

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

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	2,302,0
1	Total revenue, gains, and other support per audited financial statements	1	5,658,672.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	-1,556,898.
3	Subtract line 2e from line 1	3	7,215,570.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		· ·
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 47,278.		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	47,278.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	7,262,848.
Part			.,,
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		7 525 624
1	Total expenses and losses per audited financial statements	1	7,535,634.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	7,535,634.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 47,278.		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	47,278.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	7,582,912.
	XIII Supplemental Information.		
2; Part	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; F XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	art V, nation.	line 4; Part X, line
SEE	SUPPLEMENTAL PAGE		

Part XIII Supplemental Information (continued)

FORM 990, SCHEDULE D, PART V, LINE 4

THE ENDOWMENT FUND WAS ESTABLISHED TO FUND AND SUPPORT ANTI SECRECY WORK OF THE FOUNDATION.

SCHEDULE G (Form 990)

Department of the Treasury

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. Internal Revenue Service

OMB No. 1545-0047 Inspection

Employer identification number 59-1730478 PUBLIC JUSTICE FOUNDATION Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 Mail solicitations Solicitation of non-government grants а Χ Internet and email solicitations f Solicitation of government grants Phone solicitations Special fundraising events C g In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? X Yes b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) custody or control of (or retained by) (ii) Activity or entity (fundraiser) from activity fundraiser listed in organization contributions? col. (i) Yes SEE SUPPLEMENT INFORMATION No 2 3 6 8 9 10 Total 6,742. 168,764 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

PUBLIC JUSTICE FOUNDATION 59-1730478 Page **2** Part II 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

		gross rescipto greater than \$6,000	J.			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			ANNUAL GALA	PRES PARTY	NONE	(add col. (a) through col. (c))
Ф			(event type)	(event type)	(total number)	COI. (C)
Revenue	1	Gross receipts	248,380.	15,500.		263,880.
Seve	•	Oloss receipts	240,300.	15,500.		203,000.
Ľ	2	Less: Contributions	248,380.	15,500.		263,880.
	3	Gross income (line 1 minus	·			
		line 2)				
	_					
	4	Cash prizes				
	5	Noncash prizes				
	J	Noncash prizes				
Direct Expenses	6	Rent/facility costs	17,729.	2,582.		20,311.
en		,				
Ä	7	Food and beverages	109,315.	20,504.		129,819.
덫						
ÖİE	8	Entertainment				
	_	Other disease are a				
	9	Other direct expenses	35,602.	966.		36,568.
	10	Direct expense summary. Add lin	nes 4 through 9 in colu	ımn (d)		186,698.
	11	Net income summary. Subtract I	ine 10 from line 3. col	lumn (d)		-186.698.
Pa	rt II	Gaming. Complete if the organization	anization answered "	Yes" on Form 990, I	Part IV, line 19, or	reported more than
		\$15,000 on Form 990-EZ, lin				
ne			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(4) =9	bingo/progressive bingo		col. (a) through col. (c))
Ze,	4	Cross rovenus				
_		Gross revenue				
SS	2	Cash prizes				
nse						
Direct Expenses	3	Noncash prizes				
Ę						
<u>sec</u>	4	Rent/facility costs				
⊡	_	Oil and Broad and a second				
	_ 5	Other direct expenses	Van ov	Voc. 0/	Vac 0/	
	6	Volunteer labor	Yes %	Yes%	Yes%	
	Ū	Volunteer labor				
	7	Direct expense summary. Add lir	nes 2 through 5 in col	umn (d)		
	8	Net gaming income summary. S	ubtract line 7 from line	e 1, column (d)		
_						
9		Enter the state(s) in which the organication licensed to con-	anization conducts ga	ming activities:		
a k		f "No " avalain.			98 ?	Yes No
	, 1	ι τιο, ελριαιιτ				
	-					
10 a	ı آ	Were any of the organization's gaming	g licenses revoked, sus	pended, or terminated du	uring the tax year?	Yes No
k)	f "Yes," explain:				

Schedule G (Form 990) 2022

Sched	ule G (Form 990 or 990-EZ) 2022 PUBLIC JUSTICE FOUNDATION	59-173	30478	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 entit			_
	formed to administer charitable gaming?	Í	Yes	No
13	Indicate the percentage of gaming activity conducted in:		_	
а	The organization's facility	13a		%
b		13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events book			
	records:			
	Name ▶			
	Address ►			
	/\ddisos			
15 a	Does the organization have a contract with a third party from whom the organization receives of	naming		
	revenue?		Yes	No
h	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$	and the		
	amount of gaming revenue retained by the third party ► \$			
c	If "Yes," enter name and address of the third party:			
·	in res, enter name and address of the tillia party.			
	Name ►			
	Name ►			
	Address >			
	Address ►			
16	Gaming manager information:			
. •				
	Name ►			
	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 pro	ceeds to		
	retain the state gaming license?		Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organized to the company of the c			
_	or spent in the organization's own exempt activities during the tax year > \$			
Par		(iii) and (v), and	
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition			
	(see instructions).			

Schedule G (Form 990 or 990-EZ) 2022

FORM 990, SCHEDULE G, LINE 2B - HIGHEST PAID INDIVIDUALS/ENTITIES

NAME:

K2D STRATEGIES, LLC

ADDRESS:

4075 WILSON BLVD., 8TH FLOOR ARLINGTON, VA 22203

CUSTODY OR CONTROL OF CONTRIBUTION? NO

GROSS RECEIPTS FROM ACTIVITY :

6,742.

AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER: 168,764.

SCHEDULE J (Form 990)

Compensation InformationFor certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number PUBLIC JUSTICE FOUNDATION 59-1730478

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	41		
•	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a		_X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		_X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only costion 504/5\/2\ 504/5\/4\ and 504/5\/20\ arranizations must complete lines 5.0			
-	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
_	compensation contingent on the revenues of:	F-		37
a	The organization?	5a 5b		X
b	If "Yes" on line 5a or 5b, describe in Part III.	30		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
J	compensation contingent on the net earnings of:			
а	The organization?	6a		X
a b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			23
-				
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
J	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
-	Regulations section 53.4958-6(c)?	9		
	<u> </u>			

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

Schedule J (Form 990) 2022

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 a	and/or 1099-MISC and/or	1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
FRANK PAUL BLAND	(i)	274,983.			7,923.	14,088.	296,994.	
1 EXECUTIVE DIRECTOR	(ii)							
VICTORIA NI	(i)	144,245.			26,977.	25,214.	196,436.	
2 VP OF FINANCE	(ii)							
STEVE RALLS	(i)	171,511.			5,280.	8,601.	185,392.	
3 VP OF EXTERNAL AFFAIRS	(ii)							
ADELE KIMMEL	(i)							
4 SENIOR ATTORNEY	(ii)	177,286.			5,505.	19,559.	202,350.	
KELLY SIMON	(i)	170,058.			5,220.	14,119.	189,397.	
5 DEVELOPMENT DIRECTOR	(ii)							
TAMMY SUN	(i)							
6 VICE PRESIDENT OF LEGAL AFFAIR	(ii)	168,727.			5,280.	29,193.	203,200.	
MARGARET B DAVIS	(i)	145,818.			27,000.	824.	173,642.	
7 DIR. OF STRATEGIC PARTNERSHIP	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
_11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
_14	(ii)							
	(i)							
_15	(ii)							
	(i)							
16	(ii)							

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No. 1545-0047

2022

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number

PUBLIC JUSTICE FOUNDATION

Part I Types of Property

59-1730478

b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32b If "Yes," describe in Part II.			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			
3 At - Fractional interests	1	Art - Works of art							
4 Books and publications, 5 Clothing and household goods	2	Art - Historical treasures							
5 Clothing and household goods	3	Art - Fractional interests							
goods	4	Books and publications							
6 Cars and other vehicles. 7 Boats and planes	5	Clothing and household							
8									
8 Intellectual property	6	Cars and other vehicles							
9 Securities - Publicly traded	7	Boats and planes							
10 Securities - Closely held stock	8	Intellectual property							
11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures. 14 Qualified conservation contribution - Other 15 Real estate - Residential 16 Real estate - Commercial 17 Real estate - Commercial 19 Food inventory 19 Food inventory 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other ►() 26 Other ►() 27 Other ►() 28 Other ►() 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 Types A part of the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 Types N 10 During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 20 If "Yes," describe the arrangement in Part II. 21 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 22 If "Yes," describe in Part II.	9	Securities - Publicly traded	X	3	131,909.	FMV			
or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures 14 Qualified conservation contribution - Other 15 Real estate - Residential 16 Real estate - Commercial 17 Real estate - Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 21 Historical artifacts 22 Scientific specimens 23 Scientific specimens 24 Archeological artifacts 25 Other ►(27 Other ►(28 Other ►(29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 State of the times of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 State of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 State of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 State of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 State of Forms 8283 received by the organization during the tax year for contributions for which the organization receive by contribution any property reported in Part I, lines 1 through the form of Forms 8283, Part V, Donee Acknowledgement 29 State of Forms 8283 received by the organization to solicit, process, or sell noncash contributions? 30a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 31 Jess North organization forms or sell of the initial contributions to solicit, process, or sell noncash contributions? 31 Jess North organization forms organization forms organization for related organizations to solicit, process, o	10	Securities - Closely held stock							
12 Securities - Miscellaneous	11								
13 Qualified conservation contribution - Historic structures									
contribution - Historic structures	12	Securities - Miscellaneous							
14 Qualified conservation contribution - Other	13	contribution - Historic							
contribution - Other									
15 Real estate - Residential	14								
16 Real estate - Commercial	4.5								
17 Real estate - Other									
18 Collectibles	-								
19 Food inventory									
Drugs and medical supplies									
Taxidermy. Historical artifacts. Scientific specimens. Archeological artifacts. Other ▶() Other ▶() Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement. Press Name of Port at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? Bif "Yes," describe the arrangement in Part II. Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? Bif "Yes," describe in Part II.	-								
Historical artifacts									
23 Scientific specimens									
Archeological artifacts									
25 Other ►(-								
26 Other ►(
Other ►(
28 Other ► () 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement		Other ►(
Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement									
which the organization completed Form 8283, Part V, Donee Acknowledgement Yes N During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? If "Yes," describe in Part II.			by the ora	anization during the tax ve	ear for contributions for				
Yes N 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a Dif "Yes," describe in Part II.						29			
28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 2 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a 2 32a b If "Yes," describe in Part II.				,				Yes	No
28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 2 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a 2 32a b If "Yes," describe in Part II.	30a	During the year, did the organizat	ion receive	by contribution any proper	rty reported in Part I, line:	s 1 through			
to be used for exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 22 32 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32						_			
b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a Dif "Yes," describe in Part II.			-			-	30a		Х
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	b								
contributions?		_		tance policy that require	es the review of any i	nonstandard			
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		=					31		Х
contributions?	32a								
b If "Yes," describe in Part II.		<u> </u>	•	•	· •		32a		Х
	b								
in the organization didn't report an amount in column (e) for a type of property for million column (a) to officiated,	33		amount in c	column (c) for a type of pro	perty for which column (a)	is checked,			
describe in Part II.		•				<u> </u>			

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

Schedule M (Form 990) 2022

SCHEDULE 0 (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.

OMB No. 1545-0047 Open to Public Inspection

59-1730478

Department of the Treasury Internal Revenue Service Name of the organization

PUBLIC JUSTICE FOUNDATION

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer identification number

FORM 990, PART VI, SECTION A, LINE 6

PUBLIC JUSTICE FOUNDATION HAS MEMBERS AT VARIOUS LEVELS TO SUPPORT THE WORK OF THE FOUNDATION.

FORM 990, PART VI, SECTION A, LINE 7A

MEMBERS CAN ELECT DIRECTORS FOR VACANT OR EXPIRED SEATS ON THE BOARD. THESE ELECTIONS ARE HELD AT THE ANNUAL MEETING.

FORM 990, PART VI, SECTION B, LINE 11

THE FORM 990 IS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT. THE EXECUTIVE COMMITTEE REVIEWES AND APPROVES A DRAFT OF THE FORM 990 PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C

CONFLICTS MUST BE DISCLOSED ON AN ONGOING BASIS. TF A CONFLICT OF INTEREST ARISES, DIRECTORS ARE RECUSED FROM DECISION-MAKING AND PARTICIPATION IN DELIBERATION. THIS IS A PROFESSIONAL ETHICAL RESPONSIBILITY THAT OUR DIRECTORS TAKE VERY SERIOUSLY.

FORM 990, PART VI, SECTION B, LINE 15A

BASED ON PERFORMANCE, FINANCES, AND THE COST OF LIVING, THE PERFORMANCE REVIEW COMMITTEE (PRC) RECOMMENDS TO THE EXECUTIVE COMMITTEE THE ANNUAL COMPENSATION OF THE EXECUTIVE DIRECTOR. THE EXECUTIVE COMMITTEE APPROVES THE COMPENSATION OF THE EXECUTIVE DIRECTOR. THE PRC CONSIDERS WRITTEN PERFORMANCE EVALUATIONS, COMPARABLE DATA, AND OTHER ORGANIZATIONS' 990S IN MAKING ITS RECOMMENDATION. THE LAST SUCH PROCESS WAS COMPLETED ON 2/4/2019.

FORM 990, PART VI, SECTION C, LINE 19

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL

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.

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection
Employer identification number

PUBLIC JUSTICE FOUNDATION 59-1730478

STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART III, LINE 2

PUBLIC JUSTICE FOUNDATION NEWLY STARTED A COMMUNICATIONS PROJECT IN 2022.

FORM 990, PART III - PROGRAM SERVICE

LINE 4B, PROGRAM SERVICE

ACCESS TO JUSTICE-THE ACCESS TO JUSTICE PROJECT USES LITIGATION, ADVOCACY, AND ORGANIZING TO HELP PEOPLE HARMED BY CORPORATE OR GOVERNMENTAL ABUSES BY FIGHTING AGAINST PROCEDURAL AND STRUCTURAL BARRIERS THAT PREVENT THEM FROM SEEKING SYSTEMIC CHANGE AND VINDICATING THEIR RIGHTS IN TRANSPARENT AND PUBLICLY ACCOUNTABLE FORUMS. IT LEADS THE NATION IN VICTORIES FOR WORKERS AND CONSUMERS AGAINST EFFORTS TO FORCE THEIR CLAIMS INTO ARBITRATION, PRESERVES PUBLIC ACCESS TO COURT RECORDS AND DISCOVERY MATERIALS, COMBATS NARROW APPLICATIONS OF ARTICLE III STANDING THAT KEEP INDIVIDUALS AND ORGANIZATIONS FROM PURSUING JUSTICE IN FEDERAL COURT, AND FIGHTS TO PRESERVE THE CLASS-ACTION DEVICE AS IT IS OFTEN THE ONLY ROUTE TO FORCE STRUCTURAL CHANGE.

Name of the organization	Employer identification number				
PUBLIC JUSTICE FOUNDATION		59-1730	0478		
FORM 990, PART III, LINE 4D - OTHER PROGRAM	I SERVICES				
	=======				
DESCRIPTION	GRANTS	EXPENSES	REVENUE		
DEBTORS' PRISON PROJECT		448,977.			
ENVIRONMENTAL ENFORCEMENT PROJECT		36,920.			
COMMUNICATIONS		614,261.			
OTHER PROGRAMS		365,043.			
		1 465 001			
TOTALS		1,465,201.			

FORM 990, PART VI, LINE 17 - STATES

AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OK, OR, PA, RI, SC, TN, UT, VA, WV, WI,

FORM 990, PART VII-COMPENSATION OF THE 5 HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS DESCRIPTION OF SERVICES COMPENSATION

K2D STRATEGIES LLC

4075 WILSON BLVD SUITE 800

ARLINGTON, VA 22203 MARKETING CONSULTANT 168,764.

MARCUM LLP

1 RESEARCH CT., SUITE 400

ROCKVILLE, MD 20850 ACCOUNTING SERVICES 142,668.

Name of the organization Employer identification number 59-1730478 PUBLIC JUSTICE FOUNDATION FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGS ______ BEGINNING ENDING DESCRIPTION BOOK VALUE BOOK VALUE -----PREPAID EXPENSES 77,840. 164,588. TOTALS

77,840.

=========

164,588.

=========

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

	BEGINNING	ENDING	COST
DESCRIPTION	BOOK VALUE	BOOK VALUE	OR FMV
MONEY FUNDS	100,522.	92,416.	FMV
COMMON STOCKS	32,395.	142,101.	FMV
MUTUAL FUNDS	6,737,684.	5,581,814.	FMV
EXCHANGE-TRADED FUNDS	5,284,839.	5,980,645.	FMV
TOTALS			
	12,155,440.	11,796,976.	
	=========	=========	

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization

PUBLIC JUSTICE FOUNDATION

59-1730478

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

	(a) Name, address, and EIN (if applicable) of disregarded entity		F	(b) Primary activity	Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	Direct co enti	ntrolling		
(1)											
(2)											
(3)											
(4)											
(5)											
(6)											
Part II	Identification of Related Tax-Exempt Organizations. one or more related tax-exempt organizations during the	Complete if th	e org	ganization answ	rered "Yes" on Fo	orm 990, Part IV,	line 34, because	it had			
	(a) Name, address, and EIN of related organization	(b)				(c) Legal domicile (sta		(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	cont	g) 512(b)(13) rolled ity?
(1)								Yes	No		
(2)											
(3)											
(4)											
(5)		-									
(6)											
(7)											
									1		

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

Schedule R (Form 990) 2022

Schedule R (Form 990) 2022 PUBLIC JUSTICE FOUNDATION 59-1730478 Page **2**

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of- year assets	(h Dispropi alloca	ortionate	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
		oouy)		,			Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
· ·	1											
(7)												

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

				, ,				
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes No
(1) PUBLIC JUSTICE, P.C. 52-1240142								
1620 L STREET, N.W, SUITE 630 WASHINGTON, DC 20036	LAW FIRM - PU	DC	N/A	C CORP				
(2)	_							
(3)	-							
(4)	_							
(5)								
(6)								
(7)								

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

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	_		Yes	NO
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	L	1a		X
	Gift, grant, or capital contribution to related organization(s)		1b		X
	Gift, grant, or capital contribution from related organization(s)		1c		X
	Loans or loan guarantees to or for related organization(s)		1d		X
	Loans or loan guarantees by related organization(s)		1e		X
f	Dividends from related organization(s)		1f		
g			1g		X
	Purchase of assets from related organization(s).		1h		X
i	Exchange of assets with related organization(s)		1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)		1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)		1k		X
ı	Performance of services or membership or fundraising solicitations for related organization(s)	🏻	11		X
m	Performance of services or membership or fundraising solicitations by related organization(s)	🏻	1m		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	🏻	1n	Х	
	Sharing of paid employees with related organization(s)		10	Х	
р	Reimbursement paid to related organization(s) for expenses		1p		X
q	Reimbursement paid by related organization(s) for expenses	📙	1q	Х	
r	Other transfer of cash or property to related organization(s)		1r		X
S	Other transfer of cash or property from related organization(s)		1s		X
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction	n thres	holds	s.	
	(a) (b) (c) Name of related organization Transaction Amount involved N	Nethod o	(d)		
	type (a - s)	amoun			ig
(1)	PUBLIC JUSTICE, P.C. N 494,910. SH	ARED	EXE	PENS	SES_
(2)	PUBLIC JUSTICE, P.C. Q 362,716. AC	TUAL	EXE	PENS	SES

 (1) PUBLIC JUSTICE, P.C.
 N
 494,910.
 SHARED EXPENSES

 (2) PUBLIC JUSTICE, P.C.
 Q
 362,716.
 ACTUAL EXPENSES

 (3)
 (4)

(5)

Schedule R (Form 990) 2022

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

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

(a) Name, address, and E	IN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	Are all sec 501(partners tion c)(3) ations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) ortionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	ner?	(k) Percentage ownership
				sections 512 - 514)	Yes	No			Yes	No		Yes	No	
<u>(1)</u>														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)		-												
(10)		-												
(11)														
(12)														
(13)														
(14)														
(15)														
(16)														

Part VII Supplemental Information

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

California Exempt Organization Annual Information Return

FORM

199

Calendar Yea	r 2022 or fiscal year beginning (mm/dd/yyyy) , and ending (mm/d	ld/yyyy)					
Corporation/0	Organization name	Californ	nia corp	oration number			
PUBL	IC JUSTICE FOUNDATION	222	2759	9			
	ormation. See instructions.	FEIN					
		59-	-173	0478			
Street addres	s (suite or room)			PMB no.			
1620	L STREET, N.W., SUITE 630						
City			State	Zip code			
WASH	INGTON		DC	20036			
Foreign count				Foreign postal code			
A First retu	n	anv char	naes to it	ts guidelines			
	I return	•	•	37 1			
	ion 4947(a)(1) trust						
	rmation return? engaged in political activiti						
•	Dissolved Surrendered (Withdrawn) Merged/Reorganized K Is the organization exemp			77			
Enter da	e: (mm/dd/yyyy) • If "Yes," enter the gross re						
	counting method: (1) Cash (2) X Accrual (3) Other L Is the organization a limit						
	M Did the organization file F		•	, — —			
F Federal r	eturn filed? (1) • 990T (2) • 990PF (3) • Sch H (990) taxable income? • • •						
	Other 990 series N Is the organization under a						
	group filing? See instructions	,					
	ganization in a group exemption						
	what is the parent's name? Date filed with IRS						
Part I Co	mplete Part I unless not required to file this form. See General Information B and C.						
	1 Gross sales or receipts from other sources. From Side 2, Part II, line 8	• 1		1,181,980.00			
	2 Gross dues and assessments from members and affiliates	2		0.0			
	3 Gross contributions, gifts, grants, and similar amounts received STMT. 1	• 3		7,168,000.00			
Receipts	4 Total gross receipts for filing requirement test. Add line 1 through line 3.						
and	This line must be completed. If the result is less than \$50,000, see General Information B	• 4		8,349,980.00			
Revenues	5 Cost of goods sold	0					
	6 Cost or other basis, and sales expenses of assets sold ● 6 1,087,132.0	0					
	7 Total costs. Add line 5 and line 6	. 7	7 1,087,132.0				
	8 Total gross income. Subtract line 7 from line 4	• 8		7,262,848.00			
Expenses	9 Total expenses and disbursements. From Side 2, Part II, line 18	• 9		7,582,910.00			
Lybelises	10 Excess of receipts over expenses and disbursements. Subtract line 9 from line 8			-320,062.00			
	11 Total payments	• 11		00			
	12 Use tax. See General Information K	• 12		00			
	13 Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	● 13		00			
Filing Fee	14 Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	• 14		00			
	15 Penalties and interest. See General Information J	. 15		00			
	16 Balance due. Add line 12 and line 15. Then subtract line 11 from the result	9 16		00			
Cian	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statem						
Sign Here	true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of the preparer (other than taxpayer) is based on all information of the preparer (other than taxpayer) is based on all information of the preparer (other than taxpayer) is based on all information of the preparer (other than taxpayer) is based on all information of the preparer (other than taxpayer) is based on all information of the preparer (other than taxpayer) is based on all information of the preparer (other than taxpayer) is based on all information of the preparer (other than taxpayer).	er nas ar		eage. elephone			
	of officer VICTORIA NI VP OF FINANCE 11/15/	/2023 5106228204					
	Date Check if self-		• P	TIN			
	Preparer's signature employed	▶ 🔲	ΙP	00367740			
Paid			• Firm's FEIN				
Preparer's	Firm's name (or yours, if self-employed) ► SARFINO AND RHOADES, LLP		5	2-0961657			
Use Only	and address 11921 ROCKVILLE PIKE, SUITE 501		● Telephone				
	NORTH BETHESDA, MD 20852-2794		3	01-770-5500			
	May the FTB discuss this return with the preparer shown above? See instructions		•	X Yes No			
	• •						

64

		e than \$50,000 and private complete Part II or furnish s					
1 Gross sales or r	receipts from all busines	s activities. See instructions			•	1	NONE 00
	•						0.0
2 Dividends							00
Receipts						4	00
					•	5	00
		ets (See Instructions)					1,060,580.00
							121,400.00
		r sources. Add line 1 throug					,
	·					8	1,181,980.00
		r amounts paid. Attach sche				9	0.0
	-						NONE 0 0
		d trustees. Attach schedule					493,430.00
						12	2,623,860.00
	-					13	1,550.00
•					•		281,164.00
							523,528.00
		tions)				-	73,304.00
		tach schedule					3,586,074.00
		ld line 9 through line 17. Er				18	7,582,910.00
Schedule L Balance She		Beginning of		· · · · · · · · · · · · · · · · · · ·	,		axable year
Assets		(a)		(b)		(c)	(d)
1 Cash				61,668.		` ´	• 2,426,680.
2 Net accounts receivable .				NONE			• NONE
3 Net notes receivable			1.8	38,167.			• 505,000.
4 Inventories	i			NONE			• NONE
5 Federal and state governm							•
6 Investments in other bonds	ĭ						•
7 Investments in stock		STMT 11	12.1	55,440.			• 11,796,976.
8 Mortgage loans							•
9 Other investments. Attach							•
10 a Depreciable assets		1,075,918.			1.0	066,238	
b Less accumulated depre		672,708.	4	03,210.		739,114.	
11 Land		,		,			•
12 Other assets. Attach sched		STMT 12	1	28,758.			• 2,654,882.
13 Total assets				87,243.			17,710,662.
Liabilities and net worth				,			
14 Accounts payable			4	46,987.			• 418,245.
15 Contributions, gifts, or gra				NONE			• NONE
16 Bonds and notes payable				NONE			• NONE
17 Mortgages payable				NONE			• NONE
18 Other liabilities. Attach sch		STMT 13	2.0	36,681.			4,065,804.
19 Capital stock or principal for		2111 20		30,002.			•
20 Paid-in or capital surplus.							•
 Paid in of dapital surplus. Retained earnings or incor 			15.1	03,575.			13,226,613.
22 Total liabilities and net wo				87,243.			17,710,662.
Schedule M-1 Reconciliat	ion of income per bool	ks with income per return			han \$50 000	n	
Net income per books	<u>'</u>			. ,,	. ,		STMT 14
2 Federal income tax			, 504.	7 Income reco			\bullet -1,556,898.
∠ rederal income tax		· · · · •		not incinaea	iii this return.	Allach schedule	• <u>-</u> ⊥,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Do not complete this schedule if the amount on schedule L, line 13, column (d), is less than \$50,000									
1	Net income per books	•	-1,876,962.	7	Income recorded on books this year	STMT	14		
2	Federal income tax	•			not included in this return. Attach schedule	−1,	<u>,556,898.</u>		
3	Excess of capital losses over capital gains	•		8	Deductions in this return not charged				
4	Income not recorded on books this year.				against book income this year.				
	Attach schedule	•			Attach schedule	•			
5	Expenses recorded on books this year not			9	Total. Add line 7 and line 8	-1,	<u>.556,898.</u>		
	deducted in this return. Attach schedule	•		10	Net income per return.				
6	Total. Add line 1 through line 5		-1,876,962.		Subtract line 9 from line 6	_	-320,064.		

027

CONTRIBUTIONS, GIFTS, GRANTS, AND SIMILAR AMOUNT RECEIVED

MEMBERSHIP DUES < 2%	1,709,741.
FUNDRAISING EVENTS < 2 %	263,880.
NONCASH CONTRIBUTIONS < 2%	131,909.
PPP FORGIVENESS	499,089.
GREATER KC COMMUNITY FDTN	1,100,000.
THE ARNOLD FOUNDATION	350,000.
CHICAGO COMMUNITY FOUNDATION	200,000.
ALL OTHERS < 2%	2,913,381.

TOTAL CONTRIBUTIONS, GIFTS, GRANTS, & SIMILAR AMOUNT RECEIVED7,168,000.

=========

DXDT	TT -	\bigcirc THFR	INCOME
FAILT	TT -	OTILLIA	TINCOME

MISCELLANEOUS
INVESTMENT INCOME
293,279.
FUND RAISING EVENT INCOME
TOTAL OTHER INCOME
121,400.

NAME TITLE COMPENSATION

TARA D. SUTTON BOARD MEMBER

BETH TERRELL PAST PRESIDENT

MICHAEL L. PITT PAST PRESIDENT

THOMAS M. SOBOL PRESIDENT-ELECT

PRESTON C. TISDALE VICE PRESIDENT

ERIC L. CRAMER IMMEDIATE PAST PRESIDENT

MARY E. ALEXANDER BOARD MEMBER

BENJAMIN L. BAILEY BOARD MEMBER

LAUREN GUTH BARNES BOARD MEMBER

LEONARD A. BENNETT BOARD MEMBER

ESTHER BEREZOFSKY BOARD MEMBER

RAYMOND P. BOUCHER BOARD MEMBER

ALAN BRAYTON PAST PRESIDENT

MITCHELL BREIT BOARD MEMBER

DANIEL K. BRYSON PRESIDENT

RUSSELL W. BUDD BOARD MEMBER

4025DT C021 V22-7.7F 64010 68 STATEMENT 3

JOAN CLAYBROOK BOARD MEMBER

LINDA M. CORREIA BOARD MEMBER

JOSEPH COTCHETT PAST PRESIDENT

HARRY DEITZLER PAST PRESIDENT

THOMAS DEMPSEY PAST PRESIDENT

CONAL DOYLE BOARD MEMBER

E. MICHELLE DRAKE BOARD MEMBER

JEFFREY D. EISENBERG BOARD MEMBER

INGRID EVANS BOARD MEMBER THRU 7/2022

STEVEN FINEMAN PAST PRESIDENT

JEFFREY FOOTE PAST PRESIDENT

MYRIAM GILLES BOARD MEMBER

JEFFREY GOLDBERG PAST PRESIDENT

ROBIN L. GREENWALD BOARD MEMBER

RODNEY G. GREGORY BOARD MEMBER

J. GARY GWILLIAM PAST PRESIDENT

4025DT C021 V22-7.7F 64010 69 STATEMENT 4

J.D. HAYS, JR. BOARD MEMBER

STEPHEN J. HERMAN BOARD MEMBER THRU 7/2022

STEVEN KAZAN BOARD MEMBER

ANNE KEARSE PAST PRESIDENT

AMY E. KELLER BOARD MEMBER

RAYNA KESSLER BOARD MEMBER

KALPANA KOTAGAL BOARD MEMBER

ANDREW A. LEMMON BOARD MEMBER

THEODORE J. LEOPOLD PAST PRESIDENT

SETH R. LESSER BOARD MEMBER

SALVADOR LICCARDO PAST PRESIDENT

JASON L. LICHTMAN BOARD MEMBER

MIMI Y. LIU BOARD MEMBER

FREDERICK S. LONGER BOARD MEMBER THRU 7/2022

ROGER L. MANDEL BOARD MEMBER

HADLEY L. MATARAZZO BOARD MEMBER

4025DT C021 V22-7.7F 64010 70 STATEMENT 5

PAUL MILLER BOARD MEMBER

KRISTEN MILLER BOARD MEMBER

BRAD MOORE BOARD MEMBER

CHRISTOPHER T. NACE BOARD MEMBER

MAJED NACHAWATI BOARD MEMBER

VICTORIA S. NUGENT BOARD MEMBER

MARY PARKER PAST PRESIDENT

GALE PEARSON BOARD MEMBER

PETER PERLMAN PAST PRESIDENT

JOSEPH POWER PAST PRESIDENT

ANNA P. PRAKASH BOARD MEMBER

ELLEN A. PRESBY BOARD MEMBER

SANDRA ROBINSON PAST PRESIDENT

RONALD RODRIGUEZ BOARD MEMBER

LEE J. ROHN BOARD MEMBER

SUSAN SALADOFF PAST PRESIDENT

4025DT C021 V22-7.7F 64010 71 STATEMENT 6

FREDERICK S. SCHWARTZ BOARD MEMBER

GEORGE SHADOAN PAST PRESIDENT

DONALD H. SLAVIK BOARD MEMBER

TODD A. SMITH BOARD MEMBER

GERSON SMOGER BOARD MEMBER

WILLIAM SNEAD PAST PRESIDENT

PAUL STRITMATTER PAST PRESIDENT

DAVID F. SUGERMAN BOARD MEMBER

CHRISTOPHER P. THORMAN BOARD MEMBER

MICHAEL P. THORNTON BOARD MEMBER

RICHARD P. TRAULSEN BOARD MEMBER

WILLIAM TRINE PAST PRESIDENT

JANET VARNELL TREASURER

MONA LISA WALLACE PAST PRESIDENT

MELISSA W. WEINER BOARD MEMBER

STEVEN N. WILLIAMS BOARD MEMBER

4025DT C021 V22-7.7F 64010 72 STATEMENT 7

MICHAEL WITHEY PAST PRESIDENT

TINA WOLFSON BOARD MEMBER

HASSAN A. ZAVAREEI SECRETARY

FRANK PAUL BLAND EXECUTIVE DIRECTOR 296,994.

VICTORIA NI VP OF FINANCE 196,436.

VIRGINIA BUCHANAN BOARD MEMBER

ELIZABETH CHAVEZ BOARD MEMBER

FELICIA MEDINA BOARD MEMBER

ADAM ZAPALA BOARD MEMBER

CHAUNIQUA YOUNG BOARD MEMBER

SABITA SONEJI BOARD MEMBER

DIANDRA "FU" DEBROSSE ZIMMERMANN BOARD MEMBER

ERIC FONG BOARD MEMBER

DEBORAH ELMAN BOARD MEMBER

4025DT C021 V22-7.7F 64010 73 STATEMENT 8

TOTAL COMPENSATION OF OFFICERS, DIRECTORS, AND TRUSTEES

493,430.

========

PART II - OTHER EXPENSES

OFFICE SYSTEMS	105,598.
PRINTING AND MAILSHOP	46,420.
COMMUNICATIONS	108,051.
STAFF DEVELOPMENT	58,643.
PUBLICATIONS AND MEMBERSHIPS	59,801.
AWARDS	64,242.
TAXES AND LICENSES	8,844.
MISCELLANEOUS	339.
BAD DEBT	19,000.
EVENT EXPENSE	207,206.
PENSION EXPENSE	45,755.
EMPLOYEE BENEFITS	319,745.
LEGAL EXPENSES	1,285,808.
ACCOUNTING EXPENSE	191,471.
LOBBYING	135,003.
PROFESSIONAL EXPENSE	168,764.
INVESTMENT MGMT FEES	47,278.
OTHER FEES FOR SVCS	461,774.
OFFICE EXPENSES	17,621.
INFO. TECHNOLOGY	59,112.
TRAVEL EXPENSES	112,177.
INSURANCE	63,422.
TOTAL OTHER EXPENSE	3,586,074.
	==========

SCHEDULE L - INVESTMENTS IN STOCK

DESCRIPTION	BEG. OF YEAR	END OF YEAR
MONEY FUNDS	100,522.	92,416.
COMMON STOCKS	32,395.	142,101.
MUTUAL FUNDS	6,737,684.	5,581,814.
EXCHANGE-TRADED FUNDS	5,284,839.	5,980,645.
TOTAL INVESTMENTS IN STOCK	12,155,440.	11,796,976.

SCHEDULE L - OTHER ASSETS

50,918.	2,490,294.
NONE	2,439,376.
50,510.	•
50 918	50,918.
bho. Of think	DIND OI IDIM
BEG OF YEAR	END OF YEAR

SCHEDULE L - OTHER LIABILITIES

CORPORATE NAME: PUBLIC JUSTICE FOUNDATION EIN OF BUSINESS: 59-1730478

DESCRIPTION	BEGINNING OF YEAR	END OF YEAR
DEFERRED LEASE OBLIGATION LOAN PAYABLE - CURRENT LOAN PAYABLE - NON-CURRENT DEFERRED REVENUE DUE TO PUBLIC JUSTICE PC OPERATING LEASE LIABILITY - CURRENT OPERATING LEASE LIABILITY - NON-CURRENT	798,287. 171,851. 327,238. 2,700. 736,605. NONE	NONE NONE NONE NONE 1,099,321. 381,302. 2,585,181.
TOTAL CORPORATION OTHER LIABILITIES	2,036,681. ========	4,065,804.
TOTAL OTHER LIABILITY	2,036,681.	4,065,804.

4025DT C021 V22-7.7F 64010 78 SCHEDULE M-1 - INCOME RECORDED ON BOOKS THIS YEAR NOT INCLUDED

NET UNREALIZED GAIN ON INVESTMENTS

-1,556,898.

TOTAL INCOME RECORDED ON BOOKS THIS YEAR NOT INCLUDED

-1,556,898.

========

STATEMENT 14

Date Accep	oted							DO	NOT	MA	IL THI	S FO	RM TO THE	FTB
2022	_	aliforni xempt				norizat	tion f	for					8453-	
Exempt Organ	ization name									Id	entifying	numbe	er er	
PUBLIC	JUSTI	CE FOUNI	OATION							[<u> 59-1</u>	730	478	
Part I EI	ectronic Re	eturn Informa	ation (whole	dollars only)										
											. 1		8,349,9	980.
3 Total exp	enses and di	sbursements (F	orm 199, line	9)							. 3 _		7,582,9	<u>)10.</u>
Part II Se	ettle Your A	ccount Elec	tronically fo	r Taxable Yo	ear 2022									
4 Elec	tronic funds	withdrawal	4a Amo	ount			4b Wit	hdrawa	I date	(mm/	dd/yyyy	/)		
Part III B	Banking Info	ormation (Ha	ve you verific	ed the exem	pt organiz	zation's ban	king info	rmation	ı?)					
5 Routing r	number													
6 Account i	number					7 Type of	f account:	: [Chec	king		Saving	js	
Part IV De	eclaration o	of Officer												
l authorize th		ganization's ad	count to be s	ettled as desi	gnated in	Part II. If I ch	eck Part	II, box 4	I, I au	thorize	e an ele	ectroni	c funds withdra	wal fo
organization the exempt exempt orga exempt orga provider. If t	's 2022 Calificorganization unization's feanization returned he processin reason(s) fo	ornia electronicis filing a bala eliability, the curn and accome of the exement the delay.	c return. To th nce due returr exempt organi npanying sche	e best of my n, I understan ization will re edules and sta on's return or	knowledge d that if th main liable atements t refund is	and belief, the Franchise of the feet of transmitted delayed, I au	Tax Board Tax Board liability aled to the athorize the	ot organ d (FTB) nd all a FTB by he FTB	ization does r pplica r the to dis	n's ret not red ble in ERO, close	urn is to ceive fu terest a transmi to the I	rue, co ill and and pe itter, c	orrect, and comp timely payment nalties. I author or intermediate	plete. I t of the rize the service
Here	VICTO Signature of o	ORIA NI			1/15/ Date	<u> 2023</u>		OF	FII	<u>IAN(</u>	CE			
	Oignature or t	Jiliooi		•	Julio		THE							
Part V D	eclaration	of Electronic	Return Ori	ginator (ERC) and Pai	d Preparer.	See inst	ruction	s.					
knowledge. Ihowever, that transmitting followed all years from the to the FTB uand accomp	(If I am only at form FTB 8 this return to other require the due date of the control of the cont	an intermediat 453-EO accura the FTB; I have ments describe of the return or If I am also the	e service provately reflects the provided the din FTB Public four years from paid preparements, and to	ider, I undersine data on the e organization. 1345, 2022 on the date ther, under pen	tand that I return.) I he officer with Handbook e exempt calties of pe	am not responding the acopy of a for Authorizorganization rerjury, I decla	onsible for the organ all forms the ced e-file for the fare that I	or revievenization and information and informa	ving the office or mating the office of the	ne exe er's sig ion tha ill keep er is la ed the	mpt org nature at I will p form later, and above	ganiza on for file wi FTB 8 ⁴ d I will exemp	tion's return. I of m FTB 8453-EO ith the FTB, and 453-EO on file f make a copy a ot organization's	declare before l have for fou vailable return
	EDO					Date						E	RO's PTIN	
ERO	ERO's- signature	, P								- 11				
Must	Firm's na	me (or yours			ı			1.			Firm's	FEIN		
Sign	if self-em) ———									1 -	ZIDI-	
	and addr	ess											IP code	
•					-				-					best o
D-11	Paid				ı	Date		l Chec	k		⊢Paid pr	enarer's	s PTIN	
Paid Preparer	preparer's signature							if self	<u>-</u>			•		
Must		•						empi	<u> </u>	s FEIN	FUU	307	7 7 0	
Sign	Firm's nam	, ,	SARFING	O AND R	HOADE	S, LLP	Ab Withdrawal date (mm/dd/yyyy)							
	if self-empl and addres	• •		ROCKVIL			ITE 5	01		Identifying number 59-1730478 1 82 73 7 date (mm/dd/yyyy) Checking Savings I authorize an electronic function I provided to my electronic son the corresponding lineation's return is true, correct places not receive full and time policable interest and penaltic the ERO, transmitter, or interest of the ERO or interest and penaltic the ERO, transmitter, or interest and penaltic the ERO, transmitter, or interest and like the ERO or interest and I will make the above exempt organization's fiticer's signature on form FT mation that I will file with the I will keep form FTB 8453-E hever is later, and I will make mined the above exempt organization that I will keep form FTB 8453-E hever is later, and I will make mined the above exempt organization's firm's FEIN Check				
			NORTH I	BETHESD	A			MD			20	852	-2794	