| Public | Inspection | Copy |
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| OMB | No. | 1545-0047 |
|-----|-----|-----------|

| Return of Organization Exempt From Income Tax |
|---|
|---|

Form **990** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. 2023 Open to Public Inspection

|                         | artment of th<br>nal Revenue | he Treasury<br>e Service |                         |                                       | rm990 for instructions a           |                |             |                    |               |               | pection     |        |
|-------------------------|------------------------------|--------------------------|-------------------------|---------------------------------------|------------------------------------|----------------|-------------|--------------------|---------------|---------------|-------------|--------|
| Α                       |                              |                          | endar year, or tax      | -                                     |                                    | , and e        |             |                    |               |               |             |        |
| В                       | Check if a                   |                          | C Name of organization  |                                       | R ALL, INC                         |                |             | D Employ           | er identi     | fication nun  | nber        |        |
|                         | Address c                    | hange                    | Doing business as       |                                       |                                    | -              |             |                    |               |               |             |        |
|                         | Name cha                     | nde                      |                         |                                       | delivered to street address)       | Room/suite     |             | 48-112894          |               |               |             |        |
|                         |                              | -                        | 113 N MARTINSC          | ON                                    |                                    |                |             | E Telepho          | ne numb       | er            |             |        |
|                         | Initial retur                | rn                       | City or town            |                                       | State                              | ZIP code       |             | 316-683-6          | 426           |               |             |        |
|                         | Final return/                | terminated               |                         | mo Eoroign                            | KS                                 | 67203          |             |                    |               |               |             |        |
|                         | Amended                      | roturn                   | Foreign country na      | nie Foleign                           | province/state/county              | Foreign postal | code        | G Gross re         | ceints \$     |               | 81          | 17,442 |
|                         |                              |                          |                         |                                       |                                    |                |             | 0 0103310          |               |               |             |        |
|                         | Application                  | n pending                | F Name and address      |                                       |                                    |                | H(a) is the | iis a group returi | n for subor   | dinates?      | Yes         | X No   |
|                         |                              |                          |                         | IER 113 N MARTII                      | NSON, WICHITA, KS 6                | 7203           | H(b) Are    | e all subordina    | ates inclu    | ided?         | Yes         | No     |
| I.                      | Tax-exem                     | npt status:              | X 501(c)(3)             | 501(c) (                              | (insert no.) 4947(a)(1)            | ) or 527       | lf "        | No," attach a      | list. See     | instructions  |             |        |
| J                       | Website:                     | WW                       | /W.JFAWEB.ORG           |                                       |                                    |                | H(c) Gro    | oup exemption      | n number      | r             |             |        |
| ĸ                       | Form of o                    | organizatior             |                         | Trust Associa                         | ation Other                        |                | ar of forma |                    |               | State of lega | l domicile: | Ve     |
|                         |                              |                          |                         |                                       |                                    | Liea           |             | 1993               | 3             | State of lega | i domicile. | KS     |
|                         | Part I                       |                          | mmary                   |                                       |                                    | EDU            |             |                    |               |               |             |        |
| ø                       |                              |                          |                         | zation's mission or                   | most significant activitie         | s: EDU         | CATIO       | N AND TR           | AINING        | 5 REGAR       | DING        |        |
| anc                     |                              | BIO-ETI                  | HICAL ISSUES.           |                                       |                                    |                |             |                    |               |               |             |        |
| , n                     |                              |                          |                         |                                       |                                    |                |             |                    |               |               |             |        |
| Activities & Governance |                              | Check t                  |                         | •                                     | continued its operations           | •              |             |                    | 1             | net assets    | S.          |        |
| ڻ<br>مت                 |                              |                          |                         |                                       | oody (Part VI, line 1a) .          |                |             |                    | 3             |               |             | 7      |
| ŝ                       |                              |                          |                         | 0                                     | e governing body (Part             | . ,            |             |                    | 4             |               |             | 6      |
| ìtie                    |                              |                          |                         |                                       | ndar year 2023 (Part V, I          |                |             |                    | 5             |               |             | 16     |
| çi                      |                              |                          |                         |                                       | sary)                              |                |             |                    | 6             |               |             | 157    |
| Ă                       |                              |                          |                         |                                       | 'III, column (C), line 12 .        |                |             |                    | 7a            |               |             | 0      |
|                         | b                            | Net unre                 | elated business tax     | able income from l                    | Form 990-T, Part I, line           | 11             |             |                    | 7b            |               |             |        |
|                         |                              |                          |                         |                                       |                                    |                |             | Prior Year         |               | Cu            | rrent Year  |        |
| ne                      | 8                            |                          |                         |                                       |                                    |                |             | 83                 | 35,564        |               | 80          | )5,198 |
| Revenue                 | 9                            |                          |                         |                                       |                                    |                |             |                    | 0             |               |             |        |
| Š                       | 10                           |                          |                         |                                       | es 3, 4, and 7d)                   |                |             |                    | 50            | ,             |             |        |
|                         | 11                           |                          |                         |                                       | 6d, 8c, 9c, 10c, and 11e           |                |             |                    | 0             |               |             | 0      |
|                         | 12                           |                          |                         |                                       | ial Part VIII, column (A), li      |                |             | 83                 | 35,614        |               | 81          | 17,442 |
|                         |                              |                          |                         | • •                                   | umn (A), lines 1–3)                |                |             |                    | 0             |               |             | 0      |
|                         | 14                           |                          |                         |                                       | mn (A), line 4)                    |                |             |                    | 0             |               |             | 0      |
| es                      | 15                           |                          | •                       | · ·                                   | (Part IX, column (A), line         | ,              |             | 69                 | 98,024        |               | 68          | 39,115 |
| Expenses                | 16a                          |                          | -                       |                                       | n (A), line 11e)                   |                |             |                    | 0             |               |             | 0      |
| ă                       | b                            |                          |                         | s (Part IX, column (                  |                                    | 165,721        |             |                    |               |               |             |        |
| ш                       |                              |                          |                         | olumn (A), lines 11                   |                                    |                |             |                    | 06,097        |               |             | 92,503 |
|                         |                              |                          |                         | • •                                   | Part IX, column (A), line          |                |             |                    | 04,121        |               |             | 31,618 |
| ~ "                     | , 19                         | Revenu                   | e less expenses. S      | ubtract line 18 from                  | n line 12                          |                | Devine      |                    | <u>38,507</u> |               |             | 64,176 |
| Net Assets or           | 20                           | Total a-                 | ooto (Dort V line 4     | 6)                                    |                                    |                | ьeginn      | ing of Curre       |               | En            | nd of Year  | 0.040  |
| Asse<br>Rals            | 20                           |                          |                         |                                       |                                    |                |             | 00                 | <u>36,967</u> |               |             | 0,949  |
| Vet /                   | 21                           |                          |                         |                                       |                                    |                |             | 60                 | 4,626         |               |             | 2,784  |
|                         | 22                           |                          |                         | es. Subtract line 21                  | from line 20                       |                |             | 00                 | 62,341        |               | 59          | 98,165 |
|                         | art II                       |                          | nature Block            | vamined this return inclu             | uding accompanying schedules       | and statements | and to th   | a bast of my       | knowlode      |               |             |        |
|                         |                              |                          |                         |                                       | than officer) is based on all info |                |             |                    |               | Je            |             |        |
|                         | ,                            |                          | -,                      | ····· ··· ··· ··· ··· ··· ··· ··· ··· |                                    |                |             |                    |               | 5/14/202      | 24          |        |
| Si                      |                              | Sign                     | ature of officer        |                                       |                                    |                |             | Date               |               | 5, 1 1/202    | - •         |        |
| He                      | ere                          | Ũ                        | EPHEN WAGNER            |                                       |                                    | PRF            | SIDEN       |                    |               |               |             |        |
|                         |                              |                          | or print name and title |                                       |                                    |                |             | •                  |               |               |             |        |
|                         |                              |                          | t/Type preparer's name  |                                       | Preparer's signature               |                | Date        | e                  |               | PT            | IN          |        |
| Ра                      | id                           |                          |                         |                                       |                                    |                |             |                    | Check         | if            |             |        |
|                         | eparer                       | PE                       | ER COOK                 |                                       | PETER COOK                         |                | 5/1         | 5/2024             | self-emp      |               | 1248839     | )      |
|                         | e Only                       |                          | 's name COOK            | CPA, LLC                              |                                    |                |             | Firm's EIN         | 82-2          | 974667        |             |        |
|                         | <b>,</b>                     |                          | 's address 7309 E       | 21ST ST N. SUIT                       | E 240, WICHITA, KS 67              | 206            |             | Phone no.          | (316          | ) 313-222     | 0           |        |

No

X Yes

| Form 99 | 90 (2023)  | JUSTICE FOR ALL   | , INC   |  |   | 48-1   | 128944  | Page <b>2</b>                         |
|---------|--|---|---|--|---|--|---|---------------------------------------|
| Par     | t III  | Statement of Program Check if Schedule C  |   |  | ne in this Part III .   |  |   | X                                     |
| 1       |  | lescribe the organization's<br>TION AND TRAINING RE   |   | ICAL ISSUES.   |   |  |   |                                       |
|         |  |   |   |  |   |  |   |                                       |
| 2       | the prio   | organization undertake ar<br>r Form 990 or 990-EZ? .<br>' describe these new servi  |   |  |   |  | Yes   | X No                                  |
| 3       | services   | organization cease condu  |   | -  |   | ram  | Yes   | X No                                  |
| 4       | Describ<br>expense   | describe these changes<br>the organization's progr<br>s. Section 501(c)(3) and<br>expenses, and revenue,  | am service accomplis<br>501(c)(4) organizatio   | ns are required to repo  |   |  | -   |                                       |
| 4a      | PARTIC<br>FIRST-<br>ON 25 (<br>OUT IN<br>OH, OK<br>TIMES<br>COURS<br>MENTC<br>FREE T | ) (Expens<br>441 PEOPLE PARTICIP<br>IPATED IN 22 INTERAC<br>TIME VOLUNTEERS AND<br>COLLEGE CAMPUSES.<br>-PERSON SPEAKING AN<br>, PA, TX, AND VA. IN 20<br>TO PARTICIPANTS IN 22<br>SE, AND 30 PEOPLE COM<br>PRING DURING 5 ONLINI<br>O PEOPLE ALL OVER T<br>ULE O FOR ADDITIONA | ATED IN 20 INTERA<br>TIVE WORKSHOPS<br>33 PEOPLE SERVI<br>2,850 PEOPLE LISTI<br>ID OUTREACH EVE<br>23, JFA OFFERED I<br>23, JFA OFFERED I<br>23, JFA OFFERED I<br>25 STATES AND INDIA<br>MPLETED BETWEEN<br>5 SESSIONS. JFA C<br>HE WORLD THROU | OF LESS THAN FOU<br>ED AS RETURNING V<br>ENED TO ONE OF 18<br>NTS IN 15 STATES: A<br>TS SEVEN-HOUR ON<br>A. 47 PEOPLE COMP<br>N ONE AND FOUR HC<br>CONTINUED TO MAKE | F FOUR HOURS OF<br>R HOURS. 124 PEC<br>OLUNTEERS DUR<br>PRESENTATIONS<br>Z, CA, CO, DC, ID,<br>LINE INTERACTIVE<br>ETED AT LEAST F<br>DURS. 8 PARTICIP<br>ITS TRAINING MA | DPLE PARTICIPA<br>ING JFA'S 51 OU<br>JFA TRAINERS<br>KS, MI, MN, NE, N<br>TRAINING COU<br>IVE HOURS OF T<br>ANTS COMPLETE<br>ATERIALS AVAILA | TED AS<br>TREACH EVI<br>CARRIED<br>NM,<br>RSE 9<br>THE<br>ED ADDITION<br>ABLE FOR | ENTS                                  |
| 4b      | (Code:   | ) (Expens   | ses \$  | including grants of  | \$  | ) (Revenue \$  |   | )                                     |
|         |  |   |   |  |   |  |   | · · · · · · · · · · · · · · · · · · · |
|         |  |   |   |  |   |  |   |                                       |
| 4c      | (Code:   | ) (Expens   | ses \$  | including grants of  | \$  | ) (Revenue \$  |   | )                                     |
|         |  |   |   |  |   |  |   |                                       |
|         |  |   |   |  |   |  |   |                                       |
|         |  |   |   |  |   |  |   | ·                                     |
|         |  |   |   |  |   |  |   |                                       |
|         |  |   |   |  |   |  |   |                                       |
| 4d      |  | rogram services (Describe   |   | <b>C A</b>   |   |  |   |                                       |
| 4e      | (Expens<br>Total pr  | ses \$<br>ogram service expenses  | 0 including grants o  | <u>†  \$                                  </u>   | 0)(Revenue \$   | (  | ))  |                                       |
| TV      | - Jun pr   | - an control oxpended   | 501   | ,  |   |  |   |                                       |

| Form     | 990 (2023) JUSTICE FOR ALL, INC 48  | -1128944   | Р   | age <b>3</b> |
|----------|---|------------|-----|--------------|
| Part     | IV Checklist of Required Schedules  |            | r   | <del></del>  |
|          |   |            | 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   |            | X   |              |
| 3        | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.   | . 3        |     | x            |
| 4        | <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .  | 4          |     | х            |
| 5        | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>   | 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? <i>If</i> "Yes," <i>complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>   | 7          |     | x            |
| 8        | Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>  | 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 debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> . | 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         |     | x            |
| 11       | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.  |            |     |              |
| а        | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>   | 11a        | x   |              |
| b        | Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>  | 11b        |     | x            |
| 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? <i>If "Yes," complete Schedule D, Part VIII.</i>  | 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? <i>If "Yes," complete Schedule D, Part IX</i> .  | 11d        |     | х            |
|          | Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses   | <u>11e</u> | X   |              |
| 12a      | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i><br>Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i>  | <u>11f</u> |     | X            |
| b        | Schedule D, Parts XI and XII  |            |     | X            |
|          | and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional   |            |     | Х            |
| 13       | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.  |            |     | X            |
| 14a<br>b | Did the organization maintain an office, employees, or agents outside of the United States?   | <u>14a</u> |     | Х            |
| 5        | fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> .   | 14b        |     | x            |
| 15       | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> .   |            |     | x            |
| 16       | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> .   |            |     | x            |
| 17       | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services<br>on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions.   |            |     | x            |
| 18       | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on<br>Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .  |            |     | x            |
| 19       | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?<br>If "Yes," complete Schedule G, Part III.  |            |     | x            |
| 20a      |   |            |     | X            |
|          | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  |            |     |              |
| 21       | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or   |            |     |              |
|          | domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>  | 21         |     | Х            |

| Part W         Checklist of Required Schedule (continued)         vs.         No.           22         Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, control to Schedule (J. Part I and III.)         22         X           23         Did the organization answer "Ves" to Part IVI, Secton A. Ine 3, 4, or 5, about compensation of the organization answer "Ves" to Part IVI, Secton A. Ine 3, 4, or 5, about compensation of the organization answer "Ves" to Part IVI, Secton A. Ine 3, 4, or 5, about compensation of the organization reports are completes. Schedule J.         23         X           44         Did the organization reveal the secwent bond issue with an outstanding principal amount of more than \$100,000 are of the last day of the year, that was issued anter December 31, 2002? If "Yes," answer lines 244 introught 244 and completes Schedule J.         24e         X           b Did the organization reveal an escowa account other than a refunding secowa are with a during the year 1         24e         24e         24e           25         Section 591(c)(3), 611(c)(3), organizations. Did the organization reports and in a secose benefit transaction with a disqualified person in a prory year. Joint 200 (c)(2) organization any of the organization reports any any mount on Part X, line 6 or 22, for receivables from or payables to any current or former officer, director, truste, key employee, creator of founder, substantial contributor.         25b         X           26         Did the organization reports any any mount on Part X, line 6 or 22, for receivables from or payables to any current or former office  | Form 9 | 90 (2023) JUSTICE FOR ALL, INC 48-11  | 28944    | Р      | age <b>4</b> |
|---|--------|---|----------|--------|--------------|
| 22       Did the organization report more than 55.000 of grans or other assistance to or for domestic individuals on Part IX, Section A, June 3, 4, or 5, should compensation of the organization answer "Yes" to Part VII, Section A, June 3, 4, or 5, should compensation of the organization answer at accompt hourd lisus with an outstanding principal amount of more than 5100.000 are of the laid day of the year, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule J.       24         24       Did the organization invest any proceeds of law sempt bonds beyond a temporary period exception".       246         25       Did the organization mains an encow account other than a refunding escrow at any time during the year.       246         26       Did the organization mains an encow account other than a refunding escrow at any time during the year.       246         26       Section 50(16), 661(-0), 461(-0), 400 to 1(-2), 900 angenizations. Did the organization any dime during the year.       246         26       Section 50(16), 661(-0), 461(-0), 400 to 1(-2), 900 angenizations. Did the organization any dime during the year.       246         26       Section 50(16), 661(-0), 461(-0), 400 to 1(-2), 900 angenization any dime during the year.       246         27       X       246       246         28       Section 50(16), 461(-1), 400 to 1(-2), 900 angenization any dime during the year.       246         28       Section 50(16), 461(-1), 400 to 1(-2), 900 and 100 to 100 anding any time during the year.       246  | Par    | Checklist of Required Schedules (continued)   |          |        |              |
| Part IX, column (A), line 27. If Yes, "complete Schedule I, Parts 1 and III.       22       X         20 Det be organization answer Yes's To Part VIX, Section A, line 3, A, or 5, about componesation of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year. If At was issued affor December 31, 2002? If Yes, "complete Schedule X, If YNo," go to line 256.       24a       Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24b         24 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24d       24d         25 Did the organization mains an encrow account other than a refunding escrow at any time during the year.       24d       24d         25 Section 501(c)(3), 691(c)(4), and 501(c)(20) organizations. Did the organization organg in an excess benefit transaction with a disqualified person during the year.       24d         25 Betton 501(c)(3), 691(c)(4), and 501(c)(20) organizations. Did the organization spore forms 900 or 990 or 990-627: If Yes, "complete Schedule L, Part I.       25e       X         26 Did the organization nearbit any mamunt 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 mainy member of any of these sersons If '''''''''''''''''''''''''''''''''''   |        |   |          | Yes    | No           |
| 23       Did the organization answer "Yes" to Part VII. Section A., line 3.4, or 5. about compensation of the organizations current and former officers, directors, trustees, key employees, and highest compensated employees? // "Yes," complete Schedule J.       24         24       Did the organization news tary exceempt bonds sue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002 // "Yes," answer lines       24         24       Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       246         25       Section 501(c)(3), 901(c)(4), and 501(c)(20) organizations. Did the organization regraps in an excess benefit transaction with a disqualified person in a prory year, and that the transaction the net ported to any of the organization or payable store and the transaction with a disqualified person in a prory year, and that the transaction to Part 31, line 5 or 22, for transactions bits of prorms 590 or 390 or 3 | 22     | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on     |          |        |              |
| organization's current and former officers, directors, trustees, key employees, and highest componented       23       X         24a       Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, it was issued after December 31, 2002? If "Yes," answer lines       24b       X         24b       Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24b       X         25b       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization invest any inme during the year?       24c       X         25b       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization is period exception?       25b       X         25b       Both the organization reparts and "no behalt of tax exempt bonds."       25b       X         25b       Did the organization reparts and "no behalt of tax exempt bonds."       25b       X         25b       Did the organization reparts and "no ben reported on any of the organization reports were any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee.       25b       X         27b       Did the organization report were, substantial contributor, or 33%       27c       X         27b       Was the organization report were substantial contributor, or 33%       27c       X         27b       Was the organiz  |        | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III                                       | 22       |        | Х            |
| employees? If "Yes," complete Schedule I, If Wo," or bins used after December 31, 2002? If "Yes," answer lines       24         340 000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines       24         b Did the organization waits any proceeds of tax-exempt bonds beyond a temporary period exception?       24         c Did the organization maintain an ecrow account dher than a refunding scrow at any time during the year?       246         d Did the organization act as an "on bahal of" issue for bonds outstanding at any time during the year?       246         25 Section 501(c)(a) 501(c)(a), and 501(c)(20) organizations. Did the organization maintain an excess benefit transaction with a disqualified person in a prior year, and that the transaction tax is massed schedule L, Part I.       256         25 Did the organization avec that lit engaged in an excess benefit transaction with a disqualified person of any of these persons? If "Yes," complete Schedule L, Part I.       256         26 Did the organization proved as grant or other assistance to any of the organization sproved these, persons? If "Yes," complete Schedule L, Part I.       26         27 Did the organization provid use, sets and on these persons? If "Yes," complete Schedule L, Part II.       26         28 Was the organization provid as grant or other assistance to any of the organization control of any of these persons? If "Yes," complete Schedule L, Part II.       26         29 Wid the organization control of one of movid individual sactor organization control of any or forme officer, dincotor, trustee, key employee, creator of fou   | 23     | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the              |          |        |              |
| 24a       Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that we issued after December 31, 2002? If "Yes," answer lines 24d through 24d and complete Schedule K. If "No," for the E2a.       24a       X         b       Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24b       X         c       Did the organization maintain an escore socoult of ther than a refunding escore at any time during the year?       24d       X         25a       Section 501(c)(3), 501(c)(4), and 601(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction have not part of any of the organization is period person in a prior year, and that the transaction have not part of any of the organization is 900 or 990-227 if "les," complete Schedule L, Part I.       25b       X         12       Did the organization report on 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       X         24       Was the organization report to bains 28a? If "Yes," complete Schedule L, Part II.       26a       X         25       X       Bid the organization report to a 35% controlled entity (including an employee thereof) of family member of any of these persons? If "Yes," complete Schedule L, Part II.       26a <t< td=""><td></td><td>organization's current and former officers, directors, trustees, key employees, and highest compensated</td><td></td><td></td><td></td></t<>   |        | organization's current and former officers, directors, trustees, key employees, and highest compensated           |          |        |              |
| \$ 100,000 as of the last day of the year, that was issued after December 31, 2002 // "Yes," answer lines       24         b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?.       24a         c Did the organization maintains an escrow account other than a refunding secrow at any time during the year?       24d         d Did the organization maintains an escrow account other than a refunding secrow at any time during the year?       24d         d Did the organization maintain an escrow account other than a refunding secrow at any time during the year?       24d         d Did the organization maintain an escrow account other than a refunding at any time during the year?       24d         d Did the organization maintain an excess benefit transaction that degualified person in a prior year, and that the transaction the organization movies that 1 engaged in an excess benefit transaction with a disqualified person of any of these persons? If "Yes," complete Schedule L, Part I.       25b         d Did the organization provide a grant or other assistance to any orther organization provide a grant or other assistance to any ourment orficer, director, trustee, key employee, creator or folicer, director, trustee, key employee, creator  |        | employees? If "Yes," complete Schedule J.   | 23       |        | Х            |
| 24b through 24d and complete Schedule K. If "No." go to line 25s.       24a       X         24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year       24b         2       24b       X         2       0 bid the organization maintain an escrow account other than a refunding escrow at any time during the year?       24c         2       0 bid the organization at as an "on behalf of" issuer for bonds outstanding at any time during the year?       24d         2       24d       24d         2       2       2         2       2       2         2       2       2         2       2       2   | 24a    | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than               |          |        |              |
| b Did the organization invest any proceeds of fax-exempt bonds beyond a temporary period exception?   |        |   |          |        |              |
| c       Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       24c         d       Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?       24d         259       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disquilified person time the year?       24d         250       Maintain an excess banefit transaction with a disquilified person time any of the organization rooms 990 or 990-E27 If "Yes." complete Schedule L. Part I.       25b         250       Did the organization rooms 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 entily on tamily member of any of these persons? If "Yes." complete Schedule L, Part II.       25c       x         27       X       Was the organization provide a grant or othoulding an employee thereof, a grant selection committee member, or to a 35% controlled entily ontuling an employee thereof, a grant selection committee members or to a 35% controlled entily ontuling an employee thereof, a grant selection any of these persons? If "Yes," complete Schedule L, Part IV.       28       X         28       Was the organization requires than sacto with one of the following parties? (See the Schedule L, Part IV.       28b       X         29       Did the organization founduies and or organization described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.       28b       <  |        | 24b through 24d and complete Schedule K. If "No," go to line 25a  | 24a      |        | Х            |
| to defease any tax-exempt bonds?.       24c         d Did the organization area an 'on behalf of' issuer for bonds outstanding at my time during the year?.       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization spiror Forms 990 or 990-E27 / 1 Ves." complete Schedule L, Part I.       25b       X         12b the organization aver 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.       26b       X         12b the organization aver trustee, key employee, creator or founder, substantial contributor or signify controlled entity (including an employee thereot) or family member of any of these persons? If "Yes," complete Schedule L, Part II.       27       X         12w sto torganization aver to policable filing thereshols, conditions, and exceptions).       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?/If "Yes," complete Schedule L, Part IV.       28a       X         24 A family member of any individual described in line 28a? If Yes, "complete Schedule L, Part IV.       28b       X         25 Did the organization receive more than 325,000 in noncash contributions? If "Yes," complete Schedule N.       30       X         26 Did the organization receiv   | b      | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?                 | 24b      |        |              |
| d       Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? I.       24d         25a       Section 501(c)(3) 501(c)(4), and 501(c)(20) organizations. Did the organization projet in a excess benefit transaction with a disqualified person in a prior year, and that the transaction access benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization project Schedule L, Part I.       25a         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 55%. controlled entity of these persons? If "Yes," complete Schedule L, Part II.       26         27       Did the organization space stransaction with one of the following parties? (See the Schedule L, Part II.       26         28       Was the organization approaches transaction with one of the following parties? (See the Schedule L, Part IV.       26         29       Was the organization approache fram organizations and exceptions).       27       X         29       Did the organization receive contributions of any to base stransaction with one of the following parties? (See the Schedule L, Part IV.       28a       X         20       Mamily member of any individual sand organizations for Schedule L, Part IV.       28a       X         21       Was the organization receive contributions of any intrasic excomplete Schedule L, Part IV.       28a       X </td <td>С</td> <td>Did the organization maintain an escrow account other than a refunding escrow at any time during the year</td> <td></td> <td></td> <td></td>  | С      | Did the organization maintain an escrow account other than a refunding escrow at any time during the year         |          |        |              |
| 25a       Section 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.       25a       x         b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I.       25b       x         25b       Ut the organization export any amount on Part X, line 5 or 22, for receivables from or payables to any ourrent 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       X         27       X0 the organization aparty to a business transaction with one of the following parties? (See the Schedule L, Part IV.       27       X         28       Vas the organization a party to a business transaction with or organization sections.       27       X         28       Vas the organization aparty to a business transaction with or organizer of founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       X         28       Vas the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M.       20       X <tr< td=""><td></td><td></td><td>24c</td><td></td><td></td></tr<>   |        |   | 24c      |        |              |
| transaction with a disqualified person during the year? If "Yes." complete Schedule L, Part I.       25a         b is the organization averate that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes." complete Schedule L, Part I.       25b       X.         2 Did the organization averate that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization averate averation's prior Forms 990 or 990-E2? If "Yes." complete Schedule L, Part II.       26b       X.         2 Did the organization averation averation of the assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity including an employee thereol or family member of any of these persons? If "Yes." complete Schedule L, Part II.       26       X.         2 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV.       27       X.         2 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes." complete Schedule L, Part IV.       28a       X.         2 Did the organization needve contributions of art. historical treasures, or other similar assets, or qualified conservation contributions? If "Yes." complete Schedule N. Part I.       28a       X.         3 Did the organization receive contributions of art. historical treasures, or other sinstan assets, or qualified conservation cont  | d      | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?           | 24d      |        |              |
| b       is the organization aware that it engaged in an excess benefit transaction with a disqualified promo in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990.E22 if "Yes," complete Schedule L, Part I.       28b       x         c       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       X         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 substantial contributor? If "Yes," complete Schedule L, Part IV.       26       X         28       Was the organization provide a grant or other assistance or diverceptions).       a Acurrent or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M.       29       X         30       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule N.       24       X         31       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule N.       29       X         32       Did the organization  | 25a    | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit      |          |        |              |
| prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or<br>990-E27 if Yes," complete Schedule L, Part I.     25b     x       26     Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current<br>or former officer, furster, rustee, key employee, creator or founder, substantial contributor, or 35%<br>controlled entity or family member of any of these persons? If Yes," <i>complete Schedule L, Part II</i> .     26     X       27     Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key<br>employee, creator or founder, substantial contributor or annity member of any of these<br>persons? If Yes," complete Schedule L, Part II     27     X       28     Was the organization provide a grant or other assistance to any current or former officer, director, trustee, key<br>employee, creator or founder, substantial contributor? If<br>"Yes," complete Schedule L, Part IV     28     X       29     A atfinity member of any individual described in line 28a? If Yes," complete Schedule L, Part IV     28     X       20     Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M.     29     X       20     Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule N. Part I.     30     X       31     Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part I.     30     X       32     Did the organization inducidate, terminate, or dispose ase  |        | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I                     | 25a      |        | Х            |
| 990-EZ? If "Yes," complete Schedule L, Part I.       25b       x         126       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       X         127       Did the organization projete Schedule L, Part II.       26       X         128       Was the organization projete Schedule L, Part II.       27       X         128       Was the organization projete Schedule L, Part II.       28       X         129       Did the organization projete Schedule L, Part II.       28       X         28       Was the organization replicable filing thresholds, conditions, and exceptions).       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part I.       28a       X         29       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I.       30       X         30       Did the organization netwer schared end separate from the or   | b      | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a        |          |        |              |
| 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       X         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 II.       27       X         28       Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV.       28a       X         29       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule L, Part IV.       28b       X         30       Did the organization fuels, of disorder and case operations? If "Yes," complete Schedule M.       29       X         30       Did the organization incelve more thans \$25,000 in noncash contributions? If "Yes," complete Schedule N. Part I.       28a       X         30       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part I.       30       X         31       X       State organization incelated to any tax-exempt ortansible entity? If "Yes," complete Schedule R. Part I.   |        | prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or        |          |        |              |
| or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%.       26         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 II.       27         28       Was the organization or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       x         28       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28b       x         29       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule L, Part IV.       28e       x         30       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule N.       29       X         31       Did the organization self, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part I       30       X         32       Did the organization self, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part I       31       X         33       Did the organization nelated to any tax-exempt or taxable entity? If "Yes," complete   |        | 990-EZ? If "Yes," complete Schedule L, Part I   | 25b      |        | Х            |
| controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.       26       X         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 II.       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).       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       X         2       A A Sim y of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule M.       29       X         29       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.       20       X         30       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I.       30       X         31       Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III , N, or IV, and Part V, IIII e 1.       32       X         33       Did the org   | 26     | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current   |          |        |              |
| 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) or family member of any of these persons? If "Yes," complete Schedule L, Part IV.       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).       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?/// "Yes," complete Schedule L, Part IV.       28a       X         b       A family member of any individual described in line 28a? // "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive more than \$25,000 in noncash contributions? // "Yes," complete Schedule L, Part IV.       28a       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets; or qualified conservation contributions? // "Yes," complete Schedule R. Part I.       30       X         31       Did the organization relave to and subsce and cease operations? // "Yes," complete Schedule N, Part I.       31       X         32       Did the organization relaves on thibutions of art master more than 25% of its net assets? // # "Yes,"       33       X         33       Did the organization neel exception taxable entity? // # "Yes," complete Schedule R, Part I.       34       34       34       <   |        | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%           |          |        |              |
| employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV.       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).       A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       X         b       A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive more than \$25,000 in noncash 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 N.       30       X         31       X       30       X       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 I.       31       X         32       Did the organization nealty disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1.       32       X  |        | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II                | 26       |        | Х            |
| 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).       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       X         b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28b       X         29       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M.       29       X         30       Did the organization receive contributions? If "Yes," complete Schedule M.       20       X         31       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.       30       X         32       Did the organization related to any tax-exempt or transfer more than 25% of its net assets? If "Yes,"       33       X         33       Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule N, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Ine 1       34   | 27     | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key |          |        |              |
| persons? If "Yes," complete Schedule L, Part II.       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).       a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.       28a       X         DA family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28b       X         c 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.       28c       X         29       Did the organization receive contributions? If "Yes," complete Schedule N.       29       X         30       Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N.       20       X         31       Did the organization onellate, Or dissolve and cease operations? If "Yes," complete Schedule N. Part I.       30       X         32       Did the organization onellate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I.       31       X         33       Did the organization neales to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II.       33       X         34       Was the organization neales to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II.       34   |        | employee, creator or founder, substantial contributor or employee thereof, a grant selection committee            |          |        |              |
| 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). <ul> <li>A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If</li> <li>"Yes," complete Schedule L, Part IV.</li> <li>A 4 family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.</li> <li>A 53% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If</li> <li>"Yes," complete Schedule L, Part IV.</li> <li>Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M.</li> <li>Did the organization receive wore than \$25,000 in noncash contributions? If "Yes," complete Schedule M.</li> <li>Did the organization receive contributions of art instorical treasures, or other similar assets, or qualified</li> <li>conservation contributions? If "Yes," complete Schedule M.</li> <li>Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I.</li> <li>Did the organization realeted to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I.</li> <li>Uit we organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II.</li> <li>Uit he organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II.</li> <li>Uit he organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, line 2</li> <li>Section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2</li> <li>Section 501(c)(3) organizations. Did the organi</li></ul>  |        | member, or to a 35% controlled entity (including an employee thereof) or family member of any of these            |          |        |              |
| L, Part IV, Instructions for applicable filing thresholds, conditions, and exceptions).       A current or former officer, furstee, key employee, creator or founder, or substantial contributor? If         "Yes," complete Schedule L, Part IV.       28a         b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28b         c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If       28b         29       Did the organization receive more than \$25,000 in noncesh contributions? If "Yes," complete Schedule M.       29         30       Did the organization receive more than \$25,000 in noncesh contributions? If "Yes," complete Schedule M.       29         31       Did the organization receive more than \$25,000 in noncesh contributions? If "Yes," complete Schedule M.       30         32       Did the organization receive achtributions of art, historical treasures, or other similar assets, or qualified       30         30       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31         32       Did the organization receive any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,       33         33       Did the organization neave a controlled entity within the meaning of section 512(b)(13)?       36a         34       Was the organization and that is treated to any tax-exempt toraxable entity? If "Yes," complete Schedule R, Part II,<   |        | persons? If "Yes," complete Schedule L, Part III  | 27       |        | Х            |
| a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?/f   | 28     | Was the organization a party to a business transaction with one of the following parties? (See the Schedule       |          |        |              |
| "Yes," complete Schedule L, Part IV.       28a       X         b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28b       X         c 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.       28c       X         29       Did the organization receive more than \$25,000 in noncash 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 sell, exchange, dispose of, or transfer more than 25% of its net assets? 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 I.       31       X         33       Did the organization won 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-32 If "Yes," complete Schedule R, Part I.       33       X         34       Was the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       35a         b Id the organization and tak as expande 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 V. <td></td> <td>L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).</td> <td></td> <td></td> <td></td>  |        | L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).                           |          |        |              |
| b       A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.       28b       X         c       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.       28c       X         29       Did the organization receive more than \$25,000 in noncash 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 own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-22 nd 301.701-32 If "Yes," complete Schedule R, Part I.       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, II, or IV, and Part V, line 1.       34       X         35a       Did the organization conduct more than 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35a         s b did the organization. Schedule R, Part V, line 2       35a       35a         a b di 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  | а      |   |          |        |              |
| c       A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If       28c       X         29       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M.       29       X         20       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 sell, exchange, dispose of, or transfer more than 25% of its net assets? 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 I.       31       X         33       Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.       33       X         34       Was the organization area controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.       34       X         35a       Did the organization conduct more than 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35a       35a         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.       37       X         37       Did the or  |        |   | 28a      |        |              |
| "Yes," complete Schedule L, Part IV.       28c       X         29       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M.       29       X         30       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M.       29       X         31       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? 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 I.       31       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.       32       X         34       Was the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       35a         bid the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2       37       35b         35       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," comple  |        | • •   | 28b      |        | Х            |
| 29       Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions? If "Yes," complete Schedule M       30       X         31       Did the organization neuroive contributions? If "Yes," complete Schedule M       30       X         31       Did the organization neuroive contributions? 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 I       31       X         33       Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I,       33       X         34       Was the organization nearing of section 512(b)(13)?       34       X       34       X         35a       Did the organization ave a controlled entity within the meaning of section 512(b)(13)?       35a       35a       35a         36       Was the organization. Did the organization make any transfers to an exempt non-charitable related organization.       35b       35b       35b         35a       Did the organization complete Schedule R, Part V, line 2       37       37       X         36       was the organization and the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership f  | С      |   |          |        |              |
| 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 ilquidate, 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 I.       31       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization neceive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       35a         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 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 Q.       Or Part VI, line 1.       37       X         39       Section 501(c)(3) organizations on Schedule Q and provide explanations on Schedule R, Part VI. <t< td=""><td></td><td></td><td></td><td></td><td></td></t<>  |        |   |          |        |              |
| 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 I.       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       35a         b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.       37       X         37       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.   | 29     | -   | 29       |        | Х            |
| 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 sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.       32       X         34       Was the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       35a         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 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       X         91       Did the  | 30     |   |          |        |              |
| 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 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       35a         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2       36       x         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.       37       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       X         9       Part V   |        |   |          |        |              |
| complete Schedule N, Part II.         32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.       34       X         35a       Did the organization neve a controlled entity within the meaning of section 512(b)(13)?       35a       35b       35b       35b       35a </td <td>31</td> <td></td> <td>31</td> <td></td> <td>Х</td>  | 31     |   | 31       |        | Х            |
| 33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       35a         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       35a         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.       36b       36         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       X         Yes No         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .       1a       1a       1         b       Enter   | 32     |   |          |        |              |
| sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,<br>III, or IV, and Part V, line 1.       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       35a         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled<br>entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related<br>organization? If "Yes," complete Schedule R, Part V, line 2.       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization<br>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<br>19? Note: All Form 990 filers are required to complete Schedule O.       38       X         9a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .       1a       1       1         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .       1b       0       1b  |        |   | 32       |        | X            |
| 34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       35a         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       35a         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 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.       36       X         37       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.       37       X         38       X       X         Yest Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response or note to any line in this Part V.       1a       1       1         b       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .       1a       1       1       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and       1a       1       0 </td <td>33</td> <td></td> <td></td> <td></td> <td></td>   | 33     |   |          |        |              |
| III, or IV, and Part V, line 1.       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35a         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 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.       36       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       X         9att V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V.       1a       1         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .       1a       1       1         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .       1a       1       1       1         b       Did the organization comply with backup withholding rules for reportable payments to vendors and       1a       1       1       1  |        |   | 33       |        | X            |
| 35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization 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.       36       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       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V.       Ia       1         1a       1       1       1       1       1         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .       1a       1 <td< td=""><td>34</td><td></td><td></td><td></td><td></td></td<>  | 34     |   |          |        |              |
| b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.       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       X         Part V         Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response or note to any line in this Part V.       1a       1         b       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable.       1a       1       1         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable.       1a       1       1       1         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .       1a       1       1       1       1       1       1   |        |   |          |        | X            |
| entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       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       X         Part V         Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response or note to any line in this Part V       1a       1         b       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       1       1         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable       1a       1       1       1         b       Did the organization comply with backup withholding rules for reportable payments to vendors and       1a       1       1       1  |        |   | 35a      |        |              |
| 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       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.       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       X         Part V         Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response or note to any line in this Part V.         Yes No         1a       1       1         b Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable.         the organization comply with backup withholding rules for reportable payments to vendors and  | b      |   |          |        |              |
| organization? If "Yes," complete Schedule R, Part V, line 2.       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.       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       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V.       Yes       No         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .       1a       1       Yes       No         c       Did the organization comply with backup withholding rules for reportable payments to vendors and       1a       1  |        |   | 35b      |        | <u> </u>     |
| <ul> <li>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? <i>If "Yes," complete Schedule R, Part VI</i></li></ul>  | 36     |   |          |        | v            |
| and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> 37 X<br>38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and<br>19? Note: All Form 990 filers are required to complete Schedule O  | ~-     |   | 36       |        | 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       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       38       X         Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V       Image: Schedule O contains a response or note to any line in this Part V <td< td=""><td>37</td><td></td><td></td><td></td><td>v</td></td<>  | 37     |   |          |        | v            |
| 19? Note: All Form 990 filers are required to complete Schedule O         38 X         Part V         Statements Regarding Other IRS Filings and Tax Compliance<br>Check if Schedule O contains a response or note to any line in this Part V         Check if Schedule O contains a response or note to any line in this Part V         Yes No         1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable         1a Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable         1b 0         1b 0         Check if Schedule O contains a response or note to any line in this Part V         Yes No  |        |   | 37       |        | X            |
| Part V       Statements Regarding Other IRS Filings and Tax Compliance<br>Check if Schedule O contains a response or note to any line in this Part V.       Yes       No         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable       1a       1       <   | 38     | •   |          | ~      |              |
| Check if Schedule O contains a response or note to any line in this Part V  | Der    |   | 38       | X      |              |
| Yes       No         1a       Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  | Par    |   |          |        |              |
| 1a       1a       1         b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable   |        |   | <u> </u> | •<br>• |              |
| b       Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable   | 4-     | Enter the number reported in her 2 of Form 1006 Enter 0 if not emplicable   | 1        | res    | NO           |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and  | -      |   |          |        |              |
|   |        |   | <u> </u> |        |              |
|   | U      |   | 10       | x      |              |

| Form 99  | 20 (2023) JUSTICE FOR ALL, INC 48-112  | 8944       | Р      | age <b>5</b> |  |  |  |  |
|----------|--|------------|--------|--------------|--|--|--|--|
| Part     | 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 16                                |            |        |              |  |  |  |  |
| b        | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?                     | 2b         | Х      |              |  |  |  |  |
| 3a       | Did the organization have unrelated business gross income of \$1,000 or more during the year?                                      |            |        |              |  |  |  |  |
|          | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O                        |            |        |              |  |  |  |  |
| 4a       | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,            |            |        |              |  |  |  |  |
|          | a financial account in a foreign country (such as a bank account, securities account, or other financial account)?                 | 4a         |        | 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            |  |  |  |  |
| b        | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?                   | 5b         |        | Х            |  |  |  |  |
|          | If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  | 5c         |        | Х            |  |  |  |  |
| 6a       | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the                             |            |        |              |  |  |  |  |
|          | organization solicit any contributions that were not tax deductible as charitable contributions?                                   | 6a         | Х      |              |  |  |  |  |
| b        | If "Yes," did the organization include with every solicitation an express statement that such contributions or                     |            |        |              |  |  |  |  |
| _        | gifts were not tax deductible?   | 6b         | Х      |              |  |  |  |  |
| 7        | Organizations that may receive deductible contributions under section 170(c).  |            |        |              |  |  |  |  |
| а        | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods                        | 7-         | v      |              |  |  |  |  |
| <b>b</b> | and services provided to the payor?  | 7a         | X<br>X |              |  |  |  |  |
|          | If "Yes," did the organization notify the donor of the value of the goods or services provided?                                    | 7b         | ^      |              |  |  |  |  |
| С        | required to file Form 8282?  | 7c         |        | х            |  |  |  |  |
| d        | If "Yes," indicate the number of Forms 8282 filed during the year  | 10         |        | ^            |  |  |  |  |
| e        | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?                    | 7e         |        | Х            |  |  |  |  |
| f        | Did the organization receive any failed, directly of indirectly, to pay premiums on a personal benefit contract?                   | 76<br>7f   |        | X            |  |  |  |  |
| g        | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?   | 7g         |        | ~            |  |  |  |  |
| 9<br>h   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 79<br>7h   |        |              |  |  |  |  |
| 8        | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the                               |            |        |              |  |  |  |  |
| Ū        | sponsoring organization have excess business holdings at any time during the year?   | 8          |        | х            |  |  |  |  |
| 9        | Sponsoring organizations maintaining donor advised funds.  | -          |        |              |  |  |  |  |
| а        | Did the sponsoring organization make any taxable distributions under section 4966?   | 9a         |        | Х            |  |  |  |  |
| b        | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?                                  | 9b         |        | Х            |  |  |  |  |
| 10       | Section 501(c)(7) organizations. Enter:  |            |        |              |  |  |  |  |
| а        | Initiation fees and capital contributions included on Part VIII, line 12   |            |        |              |  |  |  |  |
| b        | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b                                    |            |        |              |  |  |  |  |
| 11       | Section 501(c)(12) organizations. Enter:   |            |        |              |  |  |  |  |
| а        | 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        |        |              |  |  |  |  |
|          | If "Yes," enter the amount of tax-exempt interest received or accrued during the year  |            |        |              |  |  |  |  |
| 13       | 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        |        |              |  |  |  |  |
| <b>b</b> | <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.                           |            |        |              |  |  |  |  |
| b        | Enter the amount of reserves the organization is required to maintain by the states in which                                       |            |        |              |  |  |  |  |
| ~        | the organization is licensed to issue qualified health plans       13b         Enter the amount of reserves on hand       13c      |            |        |              |  |  |  |  |
| C<br>145 | Did the organization receive any payments for indoor tanning services during the tax year?   | 14a        |        | Х            |  |  |  |  |
| 14a<br>b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.                         | 14a<br>14b |        | ~            |  |  |  |  |
| 15       | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or                      | 140        |        |              |  |  |  |  |
|          | excess parachute payment(s) during the year?   | 15         |        | х            |  |  |  |  |
|          |  | 13         |        | ~            |  |  |  |  |
| 40       | If "Yes," see the instructions and file Form 4720, Schedule N.   | 40         |        | v            |  |  |  |  |
| 16       | Is the organization an educational institution subject to the section 4968 excise tax on net investment income?                    | 16         |        | Х            |  |  |  |  |
| 4-       | 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                     | 4-         |        | v            |  |  |  |  |
|          | that would result in the imposition of an excise tax under section 4951, 4952, or 4953?  | 17         |        | Х            |  |  |  |  |
|          | If "Yes " complete Form 6069   |            |        |              |  |  |  |  |

| Form 9   | 90 (2023) JUSTICE FOR ALL, INC 48-112   | 8944  | P        | age <b>6</b> |
|----------|---|-------|----------|--------------|
| Par      |   |       |          | iono         |
|          | response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. S<br>Check if Schedule O contains a response or note to any line in this Part VI.   |       |          | X            |
| Sect     | ion A. Governing Body and Management  |       |          |              |
|          | ······································  |       | Yes      | No           |
| 1a       | Enter the number of voting members of the governing body at the end of the tax year <b>1a</b> 7   |       |          |              |
|          | 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  |       |          |              |
| b        | committee, explain on Schedule O.Image: Committee independent in the number of voting members included on line 1a, above, who are independent in the second sec |       |          |              |
| 2        | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with  |       |          |              |
| -        | any other officer, director, trustee, or key employee?  | 2     |          | Х            |
| 3        | Did the organization delegate control over management duties customarily performed by or under the direct   |       |          |              |
|          | supervision of officers, directors, trustees, or key employees to a management company or other person?   | 3     |          | Х            |
| 4        | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  | 4     |          | Х            |
| 5        | Did the organization become aware during the year of a significant diversion of the organization's assets?  | 5     |          | Х            |
| 6        | Did the organization have members or stockholders?  | 6     | Х        |              |
| 7a       | Did the organization have members, stockholders, or other persons who had the power to elect or appoint   | -     | v        |              |
| h        | one or more members of the governing body?  | 7a    | Х        |              |
| b        | stockholders, or persons other than the governing body?   | 7b    | х        |              |
| 8        | Did the organization contemporaneously document the meetings held or written actions undertaken during  | 10    |          |              |
| •        | the year by the following:  |       |          |              |
| а        | The governing body?   | 8a    | Х        |              |
| b        | Each committee with authority to act on behalf of the governing body?   | 8b    | Х        |              |
| 9        | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached   |       |          |              |
| Cast     | at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.   | 9     | \<br>\   | Х            |
| Sect     | ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C  | ,oue. | )<br>Yes | No           |
| 10a      | Did the organization have local chapters, branches, or affiliates?  | 10a   | 100      | X            |
| b        | If "Yes," did the organization have written policies and procedures governing the activities of such chapters,  |       |          |              |
|          | affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?   | 10b   |          |              |
| 11a      | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .   | 11a   | Х        |              |
| b        | Describe 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? <i>If "No," go to line 13</i>  | 12a   |          | Х            |
| b        | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?   | 12b   |          |              |
| C        | Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes,"</i> describe on Schedule O how this was done.  | 12c   |          |              |
| 13       | Did the organization have a written whistleblower policy?   | 13    |          | Х            |
| 14       | Did the organization have a written document retention and destruction policy?  | 14    |          | Х            |
| 15       | Did the process for determining compensation of the following persons include a review and approval by  |       |          |              |
|          | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?   |       |          |              |
| а        | The organization's CEO, Executive Director, or top management official.   | 15a   | Х        |              |
| b        | Other officers or key employees of the organization   | 15b   |          | Х            |
| 16a      | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.<br>Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement  |       |          |              |
| 104      | with a taxable entity during the year?  | 16a   |          | Х            |
| b        | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its  | Tou   |          |              |
|          | participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard   |       |          |              |
|          | the organization's exempt status with respect to such arrangements?   | 16b   |          |              |
| -        | ion C. Disclosure   |       |          |              |
| 17<br>49 | List the states with which a copy of this Form 990 is required to be filed AR, CA, KS, NE, OH, TX, VA   | 04/   |          |              |
| 18       | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 5 (2)s only) available for public inspection. Indicate how you made these available. Check all that apply   | 01(c) |          |              |
|          | (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.           Own website         Another's website         X         Upon request         Other (explain on Schedule O)   |       |          |              |
| 19       | Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest pol   | icy,  |          |              |
|          | and financial statements available to the public during the tax year.   |       |          |              |
| 20       | State the name, address, and telephone number of the person who possesses the organization's books and records  |       |          |              |
|          | ANGIE DEWERFF 316-683-6426  |       |          |              |
|          | 113 N MARTINSON, WICHITA, KS 67203  |       |          |              |

|                              | · ••••••••••••••••••••••••••••••••••••  |           |               |
|------------------------------|---|-----------|---------------|
| Form 990 (2023)              | JUSTICE FOR ALL, INC 48-1   | 128944    | Page <b>7</b> |
| Part VII                     | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated   |           |               |
|                              | Employees, and Independent Contractors  |           |               |
|                              | Check if Schedule O contains a response or note to any line in this Part VII  |           |               |
| Section A.                   | Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees   |           |               |
| 1a Complete                  | this table for all persons required to be listed. Report compensation for the calendar year ending with or within   | ı the     |               |
| organization's               | s tax year.   |           |               |
|                              | of the organization's <b>current</b> officers, directors, trustees (whether individuals or organizations), regardless of a<br>tion. Enter -0- in columns (D), (E), and (F) if no compensation was paid. | amount    |               |
|                              | of the organization's <b>current</b> key employees, if any. See the instructions for definition of "key employee."  |           |               |
|                              | e organization's five <b>current</b> highest compensated employees (other than an officer, director, trustee, or key el   | mployee)  |               |
| 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 fror               | n the organization and any related organizations.   |           |               |
|                              | of the organization's former officers, key employees, and highest compensated employees who received more   | e than    |               |
| \$100,000 of r               | eportable compensation from the organization and any related organizations.   |           |               |
| <ul> <li>List all</li> </ul> | of the organization's former directors or trustees that received, in the capacity as a former director or trustee   | e 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)<br>Name and title         | <b>(B)</b><br>Average  |                                   | (C)<br>Position<br>(do not check more than one<br>box, unless person is both an |         |              |                                 |  | <b>(D)</b><br>Reportable                            | (E)<br>Reportable                    | (F)<br>Estimated amount                   |
|-------------------------------|--|-----------------------------------|---|---------|--------------|---------------------------------|--|---|--------------------------------------|---|
|                               | hours<br>per week<br>(list any                                 |                                   | officer and a director/trustee)   |         |              |                                 | compensation<br>from the<br>organization (W-2/ | compensation<br>from related<br>organizations (W-2/ | of other<br>compensation<br>from the |   |
|                               | hours for<br>related<br>organizations<br>below<br>dotted line) | Individual trustee<br>or director | Institutional trustee   | Officer | Key employee | Highest compensated<br>employee | Former   | 1099-NEC)   | 1099-NISC/<br>1099-NEC)              | organization and<br>related organizations |
| (1) STEPHEN WAGNER            | 40.00  |                                   |   |         |              |                                 |  |   |                                      |   |
| PRESIDENT, DIRECTOR, CHAIRMAN | 0.00   | Х                                 |   | Х       |              |                                 |  | 104,000   |                                      |   |
| (2) STEPHEN FISHER            | 1.00   |                                   |   |         |              |                                 |  |   |                                      |   |
| TREASURER, DIRECTOR           | 0.00   | Х                                 |   | Х       |              |                                 |  |   |                                      |   |
| (3) REVA REDMOND              | 1.00   |                                   |   |         |              |                                 |  |   |                                      |   |
| DIRECTOR                      | 0.00   | Х                                 |   |         |              |                                 |  |   |                                      |   |
| (4) ANDREA LUBITZ             | 1.00   |                                   |   |         |              |                                 |  |   |                                      |   |
| DIRECTOR                      | 0.00   | Х                                 |   |         |              |                                 |  |   |                                      |   |
| (5) CHERYL MORGAN             | 1.00   |                                   |   |         |              |                                 |  |   |                                      |   |
| SECRETARY, DIRECTOR           | 0.00   | Х                                 |   | Х       |              |                                 |  |   |                                      |   |
| (6) ENRICO CONTOLINI          | 1.00   |                                   |   |         |              |                                 |  |   |                                      |   |
| DIRECTOR                      | 0.00   | Х                                 |   |         |              |                                 |  |   |                                      |   |
| (7) ALAN SHLEMON              | 1.00   |                                   |   |         |              |                                 |  |   |                                      |   |
| DIRECTOR                      | 0.00   | Х                                 |   |         |              |                                 |  |   |                                      |   |
| (8)                           |  |                                   |   |         |              |                                 |  |   |                                      |   |
| (9)                           |  |                                   |   |         |              |                                 |  |   |                                      |   |
| (10)                          |  |                                   |   |         |              |                                 |  |   |                                      |   |
| (11)                          |  |                                   |   |         |              |                                 |  |   |                                      |   |
| (12)                          |  |                                   |   |         |              |                                 |  |   |                                      |   |
| (13)                          |  |                                   |   |         |              |                                 |  |   |                                      |   |
| (14)                          |  |                                   |   |         |              |                                 |  |   |                                      |   |
|                               |  | •                                 | -   | •       | •            |                                 |  | ·   | ·                                    |   |

|       | 90 (2023) JUSTICE FOR ALL, INC  |   |  |                       |         |              |                              |        |   |   | 1289         |                  | Page <b>8</b>                                |
|-------|---|---|--|-----------------------|---------|--------------|------------------------------|--------|---|---|--------------|------------------|--|
| Pa    | rt VII Section A. Officers, Directors, Tru  | istees, Key Em  | ploye  | es,                   |         |              | ghes                         | t Co   | ompensated En   | ployees (con  | <u>tinue</u> | ed)              |  |
|       | <b>(A)</b><br>Name and title  | <b>(B)</b><br>Average<br>hours  | (C)<br>Position<br>(do not check more than o<br>box, unless person is both<br>officer and a director/trust |                       |         |              |                              |        | (D)<br>Reportable<br>compensation                         | <b>(E)</b><br>Reportable<br>compensation                    |              | Estimate<br>of o | F)<br>d amount<br>other                      |
|       |   | per week<br>(list any<br>hours for<br>related<br>organizations<br>below<br>dotted line) | Individual trustee<br>or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from the<br>organization (W-2/<br>1099-MISC/<br>1099-NEC) | from related<br>organizations (W<br>1099-MISC/<br>1099-NEC) |              | from<br>organiza | nsation<br>n the<br>ation and<br>ganizations |
| (15)  |   |   |  |                       |         |              |                              |        |   |   |              |                  |  |
|       |   |   |  |                       |         |              |                              |        |   |   |              |                  |  |
| (17)  |   |   |  |                       |         |              |                              |        |   |   |              |                  |  |
|       |   |   |  |                       |         |              |                              |        |   |   | _            |                  |  |
|       |   |   |  |                       |         |              |                              |        |   |   |              |                  |  |
| (19)  |   |   |  |                       |         |              |                              |        |   |   |              |                  |  |
| (20)  |   |   |  |                       |         |              |                              |        |   |   |              |                  |  |
| (21)  |   |   |  |                       |         |              |                              |        |   |   |              |                  |  |
| (22)  |   |   |  |                       |         |              |                              |        |   |   |              |                  |  |
| (23)  |   |   |  |                       |         |              |                              |        |   |   |              |                  |  |
| (24)  |   |   |  |                       |         |              |                              |        |   |   |              |                  |  |
| (25)  |   |   |  |                       |         |              |                              |        |   |   |              |                  |  |
| 1b    | Subtotal  |   |  |                       |         |              |                              |        | 104,000   |   | 0            |                  | 0  |
| С     | Total from continuation sheets to Part VII, Se  | ection A  |  |                       |         |              |                              |        | 0   |   | 0            |                  | 0  |
| <br>2 | Total (add lines 1b and 1c)   | <u></u>   |  |                       | · ·     | vho          | <br>raaai                    | vod    | 104,000   | ) 000 of  | 0            |                  | 0  |
| 2     | reportable compensation from the organization   |   | sieu a   | iDOv                  | e) v    | VIIO         | recei                        | veu    | more man \$100  | 1,000 01  |              |                  | 1  |
|       |   |   |  |                       |         |              |                              |        |   |   | _            | Y                | es No  |
| 3     | Did the organization list any <b>former</b> officer, dire employee on line 1a? <i>If</i> "Yes," <i>complete Sched</i> |   |  |                       |         |              | 0                            |        | ompensated  |   |              | 3                | X  |
| 4     | For any individual listed on line 1a, is the sum of   |   |  |                       |         |              |                              |        |   |   |              | -                |  |
|       | the organization and related organizations grea   |   |  |                       |         |              |                              |        |   |   |              | 4                | X  |
| 5     | Did any person listed on line 1a receive or accr<br>for services rendered to the organization? If "Ye                 |   |  |                       |         |              |                              |        |   |   |              | F                |  |
| Sect  | ion B. Independent Contractors  | es, complete st   | meau   | ile J                 | 101     | Suc          | n per                        | 501    | 1   |   | ;            | 5                | X  |
| 1     | Complete this table for your five highest compe compensation from the organization. Report co                         |   |  |                       |         |              |                              |        |   |   | 's tax       | (year            |  |
|       | (A)<br>Name and business add  | ·   |  |                       |         |              |                              |        | (B)<br>Description of ser                                 |   |              | (C)<br>npensat   |  |
|       |   |   |  |                       |         |              |                              |        |   |   |              |                  | 0  |
|       |   |   |  |                       |         |              |                              |        |   |   |              |                  | 0  |
|       |   |   |  |                       |         |              |                              |        |   |   |              |                  | 0<br>0                                       |
|       |   |   |  |                       |         |              |                              |        |   |   |              |                  | 0  |

| 2 | Total number of independent contractors (including but not limited to those listed above) who receiv | ed |
|---|--|----|
|   | more than \$100,000 of compensation from the organization 0  |    |

| Form 9  | 990 (202   | JUSTICE FOR ALL,                                    | INC             |               |                     |                             |  | 48-11289                             | 944 Page   | e <b>9</b> |
|---|--|---|-----------------|---------------|---------------------|-----------------------------|--|--------------------------------------|--|------------|
| Par   | t VIII   | Statement of Reven                                  | ue              |               |                     |                             |  |                                      |  |            |
|   |  | Check if Schedule O co                              | ntains a respoi | nse or        | note to any line in | n this Part VIII            |  |                                      |  | <u> </u>   |
|   |  |   |                 |               |                     | <b>(A)</b><br>Total revenue | (B)<br>Related or exempt<br>function revenue | (C)<br>Unrelated<br>business revenue | (D)<br>Revenue excluc<br>from tax unde<br>sections 512–5 | er         |
| s a   | 1a   | Federated campaigns                                 |                 | 1a            | 0                   |                             |  |                                      |  |            |
| Contributions, Gifts, Grants<br>and Other Similar Amounts | b  | Membership dues                                     |                 | 1b            | 0                   |                             |  |                                      |  |            |
| ษัยี  | С  | Fundraising events                                  |                 | 1c            | 0                   |                             |  |                                      |  |            |
| Gifts, -<br>ilar Am                                       | d  | Related organizations                               |                 | 1d            | 0                   |                             |  |                                      |  |            |
| s, G<br>nila  | е  | Government grants (contrib                          |                 | 1e            | 0                   |                             |  |                                      |  |            |
| Sir   | f  | All other contributions, gifts                      |                 |               |                     |                             |  |                                      |  |            |
| buti  |  | similar amounts not include                         |                 | 1f            | 805,198             |                             |  |                                      |  |            |
| Contributions,<br>and Other Sim                           | g  | Noncash contributions inclu                         |                 |               |                     |                             |  |                                      |  |            |
|   | h  | lines 1a-1f   |                 | 1g            |                     | 005 400                     |  |                                      |  |            |
|   | n  | Total. Add lines 1a-1f                              |                 |               | Business Code       | 805,198                     |  |                                      |  |            |
| é   | 2a   |   |                 |               | Dusiness code       | 0                           |  |                                      |  | _          |
| ω <u>ζ</u>  | b  |   |                 |               |                     | 0                           |  |                                      | 1  |            |
| Program Service<br>Revenue                                | c  |   |                 |               |                     | 0                           |  |                                      |  |            |
| E S   | d  |   |                 |               |                     | 0                           |  |                                      | 1  |            |
| 2<br>2<br>2<br>2<br>2<br>2<br>2                           | е  |   |                 |               |                     | 0                           |  |                                      |  |            |
| Pro   | f  | All other program service re                        |                 |               |                     | 0                           |  |                                      |  |            |
|   | g  | Total. Add lines 2a–2f                              |                 |               |                     | 0                           |  |                                      |  |            |
|   | 3  | Investment income (includi                          | -               |               |                     |                             |  |                                      |  |            |
|   | other similar amounts)   |   |                 |               | 12,244              | 12,244                      |  |                                      |  |            |
|   | <ul> <li>4 Income from investment of tax-</li> <li>5 Royalties</li></ul> |   |                 | nd pro        | ceeds               | 0                           |  |                                      | +  |            |
|   | 5  | Royalties   | (i) Re          | <br>al        | (ii) Personal       | 0                           |  |                                      |  |            |
|   | 6a   | Gross rents   | 6a              |               |                     |                             |  |                                      |  |            |
|   | b  | Less: rental expenses .                             | 6b              |               |                     |                             |  |                                      |  |            |
|   | c  | Rental income or (loss)                             | 6c              | 0             | 0                   | •                           |  |                                      |  |            |
|   | d  | Net rental income or (loss)                         |                 |               |                     | 0                           |  |                                      |  |            |
|   | 7a   | Gross amount from                                   | (i) Secu        |               | (ii) Other          |                             |  |                                      |  |            |
|   |  | sales of assets                                     |                 |               |                     |                             |  |                                      |  |            |
| _   |  | other than inventory                                | 7a              | 0             | 0                   | -                           |  |                                      |  |            |
| nue   | b  | Less: cost or other basis                           |                 |               |                     |                             |  |                                      |  |            |
| vel   |  | and sales expenses                                  | 7b              | 0             | 0                   | -                           |  |                                      |  |            |
| Re  | C  | Gain or (loss)                                      |                 | 0             | 0                   | 0                           |  |                                      |  |            |
| Other Reve  | d<br>8a  | Net gain or (loss) Gross income from fundrais       |                 | · ·           | <br>I               | 0                           |  |                                      |  |            |
| đ   | Ua   | events (not including \$                            | 0               |               |                     |                             |  |                                      |  |            |
|   |  | of contributions reported or                        | n line 1c).     |               |                     |                             |  |                                      |  |            |
|   |  | See Part IV, line 18                                |                 | 8a            | 0                   |                             |  |                                      |  |            |
|   | b  | Less: direct expenses                               |                 | 8b            | 0                   |                             |  |                                      |  |            |
|   | С  | Net income or (loss) from fu                        | •               | n <u>ts .</u> |                     | 0                           |  |                                      |  |            |
|   | 9a   | Gross income from gaming                            |                 |               |                     |                             |  |                                      |  |            |
|   | _  | See Part IV, line 19                                |                 | 9a            | 0                   |                             |  |                                      |  |            |
|   | b  | Less: direct expenses                               |                 | 9b            | 0                   |                             |  |                                      |  |            |
|   | C  | Net income or (loss) from g                         |                 | s <u>.</u>    | <u></u>             | 0                           |  |                                      |  |            |
|   | 10a  | Gross sales of inventory, le returns and allowances |                 | 10a           | 0                   |                             |  |                                      |  |            |
|   | b  | Less: cost of goods sold .                          |                 | 10a           |                     |                             |  |                                      |  |            |
|   | C C  | Net income or (loss) from s                         |                 | <u> </u>      | 0                   | 0                           |  |                                      |  | _          |
| S   | Ŭ  |   |                 |               | Business Code       | ŭ                           |  |                                      |  |            |
| Miscellaneous<br>Revenue                                  | 11a  |   |                 |               |                     | 0                           |  |                                      |  |            |
| ane<br>∍nu  | b  |   |                 |               |                     | 0                           |  |                                      |  |            |
| cellaneo<br>Revenue                                       | С  |   |                 |               | ļ                   | 0                           |  |                                      | <u> </u>   |            |
| lisc<br>R   | d  | All other revenue                                   |                 |               |                     | 0                           |  |                                      | L  |            |
| 2   | e  | Total. Add lines 11a–11d .                          |                 |               |                     | 0                           |  |                                      |  | _          |
|   | 12   | Total revenue. See instruct                         | tions           |               |                     | 817,442                     | 12,244                                       | 0                                    |  | 0          |

| Part       |   |                              |  |   |                                       |
|------------|---|------------------------------|--|---|---------------------------------------|
| Sectior    | n 501(c)(3) and 501(c)(4) organizations must complete all c                                 |                              |  |   |                                       |
|            | Check if Schedule O contains a response or note t   | -                            | rt IX......                                |   |                                       |
|            | ot include amounts reported on lines 6b, 7b,<br>b, and 10b of Part VIII.                    | <b>(A)</b><br>Total expenses | ( <b>B)</b><br>Program service<br>expenses | (C)<br>Management and<br>general expenses | <b>(D)</b><br>Fundraising<br>expenses |
|            | Grants and other assistance to domestic organizations                                       | _                            |  |   |                                       |
|            | and domestic governments. See Part IV, line 21  | 0                            |  |   |                                       |
|            | Grants and other assistance to domestic   |                              |  |   |                                       |
|            | ndividuals. See Part IV, line 22  | 0                            |  |   |                                       |
|            | Grants and other assistance to foreign  |                              |  |   |                                       |
|            | organizations, foreign governments, and foreign<br>ndividuals. See Part IV, lines 15 and 16 | 0                            |  |   |                                       |
|            | Benefits paid to or for members   | 0                            |  |   |                                       |
|            | Compensation of current officers, directors,  | 0                            |  |   |                                       |
|            | rustees, and key employees  | 104,000                      | 52,000                                     | 26,000                                    | 26,00                                 |
|            | Compensation not included above to disqualified   | 104,000                      | 02,000                                     | 20,000                                    | 20,00                                 |
|            | persons (as defined under section 4958(f)(1)) and   |                              |  |   |                                       |
| -          | persons described in section 4958(c)(3)(B)  | 521,646                      | 354,455                                    | 71,880                                    | 95,3                                  |
|            | Other salaries and wages  | 0                            |  | ,000                                      |                                       |
|            | Pension plan accruals and contributions (include  |                              |  |   |                                       |
|            | section 401(k) and 403(b) employer contributions).  | 0                            |  |   |                                       |
|            | Other employee benefits   | 15,248                       | 15,248                                     |   |                                       |
|            | Payroll taxes   | 48,221                       | 31,327                                     | 7,544                                     | 9,3                                   |
|            | Fees for services (nonemployees):   |                              |  |   | · · ·                                 |
|            | Management  | 0                            |  |   |                                       |
| b l        | _egal   | 0                            |  |   |                                       |
| c /        | Accounting  | 550                          |  | 550                                       |                                       |
| d l        | _obbying  | 0                            |  |   |                                       |
| еŀ         | Professional fundraising services. See Part IV, line 17                                     | 0                            |  |   |                                       |
|            | nvestment management fees   | 0                            |  |   |                                       |
| <b>g</b> ( | Other. (If line 11g amount exceeds 10% of line 25, column                                   |                              |  |   |                                       |
|            | A), amount, list line 11g expenses on Schedule O.)  | 0                            |  | 0   |                                       |
|            | Advertising and promotion   | 11,736                       |  |   | 11,73                                 |
|            | Office expenses   | 0                            |  |   |                                       |
|            | nformation technology   | 20,756                       | 10,378                                     | 5,189                                     | 5,18                                  |
|            | Royalties   | 0                            | 45.000                                     | 0.000                                     |                                       |
|            |   | 19,990                       | 15,992                                     | 3,998                                     |                                       |
|            | Payments of travel or entertainment expenses  | 0                            |  |   |                                       |
|            | or any federal, state, or local public officials  | 0                            |  |   |                                       |
|            | Conferences, conventions, and meetings  | 0                            |  |   |                                       |
|            | nterest   | 0                            |  |   |                                       |
|            | Payments to affiliates  | 0                            |  |   |                                       |
|            | Depreciation, depletion, and amortization   | 7,433                        | 5,946                                      | 1,115                                     | 37                                    |
|            |   | 0                            | 0,040                                      | 1,110                                     | 01                                    |
|            | Other expenses. Itemize expenses not covered  |                              |  |   |                                       |
|            | above. (List miscellaneous expenses on line 24e. If   |                              |  |   |                                       |
|            | ine 24e amount exceeds 10% of line 25, column   |                              |  |   |                                       |
|            | A), amount, list line 24e expenses on Schedule O.)  |                              |  |   |                                       |
|            | REGIONAL TRAINING   | 67,848                       | 67,848                                     |   |                                       |
| -          | SUPPLIES  | 8,411                        | 5,655                                      | 2,176                                     | 58                                    |
| сI         | POSTAGE AND SHIPPING  | 23,198                       | 13,919                                     |   | 9,2                                   |
|            | PRINTING AND PUBLICATIONS   | 18,770                       | 11,262                                     |   | 7,50                                  |
|            | All other expenses VARIOUS EXPENSES   | 13,811                       | 3,780                                      | 9,635                                     | 39                                    |
|            | Total functional expenses. Add lines 1 through 24e  | 881,618                      | 587,810                                    | 128,087                                   | 165,72                                |
|            | Joint costs. Complete this line only if the   |                              | T  |   |                                       |
|            | organization reported in column (B) joint costs   |                              |  |   |                                       |
|            | rom a combined educational campaign and   |                              |  |   |                                       |
|            | undraising solicitation. Check here if  |                              |  |   |                                       |
| f          | ollowing SOP 98-2 (ASC 958-720)   |                              |  |   | Form <b>990</b> (20)                  |

| • • • • • •                 | 990 (20 | JUSTICE FOR ALL, INC   |                 |                                 |     | 48-1128944 Page <b>11</b> |
|-----------------------------|---------|--|-----------------|---------------------------------|-----|---------------------------|
| Pa                          | rt X    |  |                 |                                 |     |                           |
|                             |         | Check if Schedule O contains a response or note to any line i        | n this Part X . |                                 |     |                           |
|                             |         |  |                 | <b>(A)</b><br>Beginning of year |     | <b>(B)</b><br>End of year |
|                             | 1       | Cash—non-interest-bearing  |                 | 245,283                         | 1   | 179,573                   |
|                             | 2       | Savings and temporary cash investments                               |                 | 66.347                          | 2   | 66,446                    |
|                             | 3       | Pledges and grants receivable, net                                   |                 | 0                               | 3   | C                         |
|                             | 4       | Accounts receivable, net   | 4               | C                               |     |                           |
|                             | 5       | Loans and other receivables from any current or former officer, d    |                 |                                 |     |                           |
|                             |         | trustee, key employee, creator or founder, substantial contributor   |                 |                                 |     |                           |
|                             |         | controlled entity or family member of any of these persons           |                 | 0                               | 5   |                           |
|                             | 6       | Loans and other receivables from other disqualified persons (as de   |                 |                                 |     |                           |
|                             |         | under section 4958(f)(1)), and persons described in section 4958(d   |                 | 0                               | 6   |                           |
| ets                         | 7       | Notes and loans receivable, net                                      |                 | 0                               | 7   | C                         |
| ssets                       | 8       | Inventories for sale or use  |                 | 0                               | 8   |                           |
| Ä                           | 9       | Prepaid expenses and deferred charges                                |                 | 0                               | 9   |                           |
|                             | 10a     | Land, buildings, and equipment: cost or                              |                 | -                               | -   |                           |
|                             |         | other basis. Complete Part VI of Schedule D <b>10a</b>               | 573,377         |                                 |     |                           |
|                             | b       | Less: accumulated depreciation                                       | 230,978         | 349,832                         | 10c | 342,400                   |
|                             | 11      | Investments—publicly traded securities                               |                 | 0                               | 11  | C                         |
|                             | 12      | Investments—other securities. See Part IV, line 11                   |                 | 0                               | 12  | C                         |
|                             | 13      | Investments—program-related. See Part IV, line 11.                   |                 | 0                               | 13  | C                         |
|                             | 14      | Intangible assets  |                 | 0                               | 14  | C                         |
|                             | 15      | Other assets. See Part IV, line 11                                   |                 | 5,505                           | 15  | 12,530                    |
|                             | 16      | Total assets. Add lines 1 through 15 (must equal line 33)            |                 | 666,967                         | 16  | 600,949                   |
|                             | 17      | Accounts payable and accrued expenses                                |                 | 0                               | 17  |                           |
|                             | 18      | Grants payable   |                 | 0                               | 18  |                           |
|                             | 19      | Deferred revenue   | 0               | 19                              |     |                           |
|                             | 20      | Tax-exempt bond liabilities  |                 | 0                               | 20  |                           |
|                             | 21      | Escrow or custodial account liability. Complete Part IV of Schedu    |                 | 0                               | 21  |                           |
| Se                          | 22      | Loans and other payables to any current or former officer, directo   |                 |                                 |     |                           |
| Ē                           |         | trustee, key employee, creator or founder, substantial contributor   |                 |                                 |     |                           |
| Liabilities                 |         | controlled entity or family member of any of these persons           |                 | 0                               | 22  |                           |
| Ë                           | 23      | Secured mortgages and notes payable to unrelated third parties       |                 | 0                               | 23  | C                         |
|                             | 24      | Unsecured notes and loans payable to unrelated third parties .       |                 | 0                               | 24  | C                         |
|                             | 25      | Other liabilities (including federal income tax, payables to related |                 |                                 |     |                           |
|                             |         | parties, and other liabilities not included on lines 17-24). Comple  | te              |                                 |     |                           |
|                             |         | Part X of Schedule D   |                 | 4,626                           | 25  | 2,784                     |
|                             | 26      | Total liabilities. Add lines 17 through 25                           | [               | 4,626                           | 26  | 2,784                     |
| ŝ                           |         | Organizations that follow FASB ASC 958, check here                   |                 |                                 |     |                           |
| лс.                         |         | and complete lines 27, 28, 32, and 33.                               |                 |                                 |     |                           |
| alai                        | 27      | Net assets without donor restrictions                                | [               | 0                               | 27  |                           |
| ä                           | 28      | Net assets with donor restrictions                                   | 0               | 28                              |     |                           |
| pur                         |         | Organizations that do not follow FASB ASC 958, check here            |                 |                                 |     |                           |
| ц                           |         | and complete lines 29 through 33.                                    |                 |                                 |     |                           |
| ō                           | 29      | Capital stock or trust principal, or current funds                   |                 | 0                               | 29  |                           |
| ets                         | 30      | Paid-in or capital surplus, or land, building, or equipment fund.    |                 | 0                               | 30  |                           |
| SS                          | 31      | Retained earnings, endowment, accumulated income, or other fu        |                 | 662,341                         | 31  | 598,165                   |
| Net Assets or Fund Balances | 32      | Total net assets or fund balances                                    |                 | 662,341                         | 32  | 598,165                   |
| ¥                           | 33      | Total liabilities and net assets/fund balances                       |                 | 666,967                         | 33  | 600,949                   |

Form 990 (2023)

| Form 9 | 90 (2023) JUSTICE FOR ALL, INC  | 48-11   | 28944 | Pag          | e <b>12</b> |
|--------|---|---------|-------|--------------|-------------|
| Part   | XI Reconciliation of Net Assets   |         |       |              |             |
|        | Check if Schedule O contains a response or note to any line in this Part XI                                     |         |       |              |             |
| 1      | Total revenue (must equal Part VIII, column (A), line 12)   | 1       |       | 817          | ,442        |
| 2      | Total expenses (must equal Part IX, column (A), line 25)  | 2       |       | 881          | ,618        |
| 3      | Revenue less expenses. Subtract line 2 from line 1  | 3       |       | -64          | ,176        |
| 4      | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                       | 4       |       | 662          | .,341       |
| 5      | Net unrealized gains (losses) on investments  | 5       |       |              |             |
| 6      | Donated services and use of facilities  | 6       |       |              |             |
| 7      | Investment expenses   | 7       |       |              |             |
| 8      | Prior period adjustments  | 8       |       |              |             |
| 9      | Other changes in net assets or fund balances (explain 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      |       | 598          | ,165        |
| Part   |   |         |       |              |             |
|        | Check if Schedule O contains a response or note to any line in this Part XII                                    |         |       |              |             |
|        |   |         | _     | Yes          | No          |
| 1      | Accounting method used to prepare the Form 990: X Cash Other  |         |       |              |             |
|        | If the organization changed its method of accounting from a prior year or checked "Other," explain 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 compiled 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    |              | Х           |
|        | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a         |         |       |              |             |
|        | separate basis, consolidated basis, or both.  |         |       |              |             |
|        | Separate basis Consolidated basis Both consolidated and separate basis  |         |       |              |             |
| с      | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of  |         |       |              |             |
|        | the audit, review, or compilation of its financial statements and selection of an independent accountant?.      |         | 2c    |              |             |
|        | If the organization changed either its oversight process or selection process during the tax year, explain on   |         |       |              |             |
|        | Schedule O.   |         |       |              |             |
| 3a     | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the |         |       |              |             |
|        | Uniform Guidance, 2 C.F.R. Part 200, Subpart F?   |         | 3a    |              | Х           |
| b      | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the    |         |       |              |             |
|        | required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .       | <u></u> | 3b    |              |             |
|        |   |         | Form  | <b>990</b> ( | (2023)      |

#### **Depreciation and Amortization**

#### (Including Information on Listed Property)

|     | partment of the Treasury                            |                  | ·                      |               | ach to your tax  |                    |                 |                  | Attach          |                      |
|-----|---|------------------|------------------------|---------------|------------------|--------------------|-----------------|------------------|-----------------|----------------------|
|     | ernal Revenue Service                               |                  | Go to www.irs.g        |               |                  |                    | test informatio |                  |                 | ence No. <b>179</b>  |
|     | me(s) shown on return                               |                  |                        | ess or activi | ty to which this | form relates       |                 | Identifying nun  | iber            |                      |
|     | STICE FOR ALL, INC                                  |                  | 990                    | اممرا ايشر    | an Castian A     | 70                 |                 | 48-1128944       |                 |                      |
| Pa  |   | -                | Certain Prop           | -             |                  |                    |                 |                  |                 |                      |
| -   |   |                  | property, complet      |               |                  |                    |                 |                  |                 | 4 400 000            |
| 1   | Maximum amount (see                                 |                  |                        |               |                  |                    |                 |                  | 1               | 1,160,000            |
| -   | Total cost of section 17                            |                  |                        |               |                  |                    |                 |                  | 2               | 2 800 000            |
| 3   | Threshold cost of secti<br>Reduction in limitation. |                  |                        |               |                  |                    |                 |                  | 3<br>4          | 2,890,000            |
| 4   | Dollar limitation for tax                           |                  |                        |               |                  |                    |                 |                  | 4               | 0                    |
| 5   |   |                  |                        |               |                  |                    | ming            |                  | 5               | 1 160 000            |
| 6   | separately, see instruc                             | Description of p |                        |               |                  | ost (business use  | <u></u>         | (c) Elected co   |                 | 1,160,000            |
| 0   | (a)   | Description of p | торену                 |               | (b) C            | USI (DUSITIESS USE | Unity)          |                  | 51              |                      |
|     |   |                  |                        |               |                  |                    |                 |                  |                 |                      |
| 7   | Listed property. Enter                              | the amount f     | rom line 20            |               |                  |                    | 7               |                  |                 |                      |
|     | Total elected cost of se                            |                  |                        |               |                  |                    |                 | <u> </u>         | 8               | 0                    |
|     | Tentative deduction. E                              |                  |                        |               |                  |                    |                 |                  | 9               | 0                    |
|     | Carryover of disallower                             |                  |                        |               |                  |                    |                 |                  | 10              | 2,515                |
|     | Business income limita                              |                  | •                      |               |                  |                    |                 |                  | 11              | 2,010                |
|     | Section 179 expense of                              |                  |                        |               |                  |                    |                 |                  | 12              | 0                    |
|     | Carryover of disallowe                              |                  |                        |               |                  |                    |                 |                  | 2,515           |                      |
|     | te: Don't use Part II or F                          |                  |                        |               |                  |                    | 10              | · · · · · ·      | 2,010           |                      |
|     |   |                  |                        |               |                  | n (Don't incl      | ude listed p    | operty. See in   | structi         | ons)                 |
|     | Special depreciation al                             |                  |                        |               |                  |                    |                 |                  |                 | 0110.7               |
| ••• | during the tax year. Se                             |                  |                        | • •           |                  | • / •              |                 |                  | 14              |                      |
| 15  | Property subject to sec                             |                  |                        |               |                  |                    |                 |                  | 15              |                      |
|     | Other depreciation (inc                             |                  |                        |               |                  |                    |                 |                  | 16              |                      |
| Pa  | rt III MACRS De                                     | epreciation      | ( <b>Don't</b> include | e listed pr   | operty. See      | instructions.)     | )               |                  |                 |                      |
|     |   |                  |                        |               | Section A        | inet detteriet,    | ,               |                  |                 |                      |
| 17  | MACRS deductions for                                | r assets plac    | ed in service in t     | ax vears b    |                  | e 2023             |                 |                  | 17              | 7,433                |
|     | If you are electing to g                            |                  |                        |               |                  |                    |                 |                  |                 | ,                    |
|     | asset accounts, check                               | • •              | •                      |               |                  |                    | •               |                  |                 |                      |
|     |   |                  |                        |               |                  |                    |                 | eciation System  |                 |                      |
|     | 000110  |                  | (b) Month and          |               | for depreciation |                    |                 |                  |                 |                      |
|     | (a) Classification of pro                           | operty           | year placed            | • •           | /investment use  | (d) Recovery       | (e) Convention  | (f) Method       | ( <b>a</b> ) De | preciation deduction |
|     |   |                  | in service             |               | e instructions)  | period             |                 | (I) Motilou      | (9) 00          |                      |
| 19  | a 3-year property                                   |                  |                        |               |                  |                    |                 |                  |                 |                      |
|     | <b>b</b> 5-year property                            |                  |                        |               |                  |                    |                 |                  |                 |                      |
|     | <b>c</b> 7-year property                            |                  |                        |               |                  |                    |                 |                  |                 |                      |
|     | <b>d</b> 10-year property                           |                  |                        |               |                  |                    |                 |                  |                 |                      |
|     | e 15-year property                                  |                  |                        |               |                  | 1                  |                 | 1                |                 |                      |
|     | f 20-year property                                  |                  |                        |               |                  |                    |                 |                  |                 |                      |
|     | g 25-year property                                  |                  |                        |               |                  | 25 yrs.            |                 | S/L              |                 |                      |
|     | h Residential rental                                |                  |                        |               |                  | 27.5 yrs.          | MM              | S/L              |                 |                      |
|     | property  |                  |                        |               |                  | 27.5 yrs.          | MM              | S/L              |                 |                      |
|     | i Nonresidential real                               |                  |                        |               |                  | 39 yrs.            | MM              | S/L              |                 |                      |
|     | property  |                  |                        |               |                  |                    | MM              | S/L              |                 |                      |
|     | Section   | n C - Assets     | Placed in Servio       | ce During     | 2023 Tax Yea     | r Using the A      | ternative De    | preciation Syste | m               |                      |
| 20  | a Class life  |                  |                        |               |                  |                    |                 | S/L              |                 |                      |
|     | <b>b</b> 12-year                                    |                  |                        |               |                  | 12 yrs.            |                 | S/L              |                 |                      |
|     | <b>c</b> 30-year                                    |                  |                        |               |                  | 30 yrs.            | MM              | S/L              |                 |                      |
|     | d 40-year   |                  |                        |               |                  | 40 yrs.            | MM              | S/L              |                 |                      |
| Pa  | rt IV Summary                                       | (See instruc     | ctions.)               |               |                  |                    |                 |                  |                 |                      |
| 21  | Listed property. Enter                              |                  |                        |               |                  |                    |                 |                  | 21              |                      |
|     | Total. Add amounts fro                              |                  |                        | 7, lines 19   | and 20 in colu   | ımn (g), and lir   | ne 21. Enter    |                  |                 |                      |
|     | here and on the approp                              | priate lines o   | f your return. Pa      | rtnerships    | and S corpora    | tions—see ins      | tructions       | <u></u> .        | 22              | 7,433                |
| 23  | For assets shown above                              | ve and place     | d in service durir     | ng the curr   | ent year, enter  | the                |                 |                  |                 |                      |
|     | portion of the basis attr                           | ributable to s   | ection 263A cos        | ts            |                  |                    | 23              |                  |                 |                      |

Form **4562** 

OMB No. 1545-0172

2023

| SCHE  | DULE |
|-------|------|
| (Form | 990) |

Α

#### **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.

2023 Open to Public Inspection

OMB No. 1545-0047

|        |      | t of the Treasury<br>venue Service                   | Got  |  | 1990 for instructions an   |                   | st informa                            |   | Inspection  |
|--------|------|--|--|--|--|-------------------|---------------------------------------|---|---|
|        |      | ne organization                                      |  |  |  |                   |                                       | Employer identification                                 |   |
|        |      | E FOR ALL, INC                                       | :  |  |  |                   |                                       | 48-11   | 28944   |
| Par    |      |  |  |  | ganizations must co  |                   |                                       |   |   |
|        | orga |  | •  | •  | or lines 1 through 12, o   | •                 |                                       | ,   |   |
| 1      |      | -  |  |  | f churches described in  |                   | 170(b)(1)(                            | (I).  |   |
| 2      |      |  |  |  | ach Schedule E (Form   |                   |                                       |   |   |
| 3      |      | •  | •  |  | zation described in <b>sec</b>   | •                 |                                       |   |   |
| 4      |      |  | arch organizatio<br>e, city, and state     |  | nction with a hospital d   | escribed i        | in section                            | 170(b)(1)(A)(iii). Er                                   | iter the  |
| 5      |      |  | n operated for th<br>(1)(A)(iv). (Com      |  | e or university owned  | or operate        | ed by a go                            | vernmental unit desc                                    | cribed in   |
| 6      |      | A federal, state                                     | , or local govern                          | ment or governmer  | ital unit described in <b>se</b>   | ction 170         | (b)(1)(A)(                            | v).   |   |
| 7      |      |  |  | eceives a substantia<br>( <b>A)(vi).</b> (Complete F   | al part of its support fro<br>Part II.)  | m a govei         | rnmental u                            | init or from the gene                                   | ral public  |
| 8      |      | A community tr                                       | ust described in                           | section 170(b)(1)(/  | A)(vi). (Complete Part   | II.)              |                                       |   |   |
| 9      |      | An agricultural                                      | research organi                            | zation described in  | section <b>170(b)(1)(A)(ix</b><br>ure (see instructions).  | ) operated        |                                       |   |   |
| 10     | X    | An organization<br>receipts from a<br>support from g | ctivities related t<br>ross investment     | to its exempt functio  | an 33 1/3% of its suppo<br>ns, subject to certain e<br>ed business taxable in<br>See <b>section 509(a)(2).</b> | xceptions         | ; and (2) r<br>s section {            | no more than 33 1/3<br>511 tax) from busine             | % of its  |
| 11     |      | An organization                                      | n organized and                            | operated exclusivel  | y to test for public safe  | ty. See <b>se</b> | ection 509                            | 9(a)(4).  |   |
| 12     |      | one or more pu                                       | blicly supported                           | organizations desc   | y for the benefit of, to prived in <b>section 509(a</b> ibes the type of support                               | )(1) or sec       | ction 509(                            | a)(2). See section 5                                    | 509(a)(3).  |
| а      | [    | the supporte<br>organizatior                         | ed organization(s<br>. <b>You must con</b> | s) the power to regunder to regunder the power to regunder the power to regulate the pow |  | majority o        | of the direc                          | ctors or trustees of th                                 | ne supporting   |
| b<br>c | r    | control or m<br>organizatior                         | anagement of th<br>(s). <b>You must c</b>  | e supporting organi<br>complete Part IV, S   | r controlled in connecti<br>zation vested in the sa<br>ections A and C.<br>organization operated i             | me perso          | ns that co                            | ntrol or manage the                                     | supported   |
|        | -    | its supporte   | d organization(s                           | ) (see instructions).  | You must complete F  | Part IV, Se       | ections A,                            | D, and E.   |   |
| d      |      | that is not fu                                       | inctionally integr                         | ated. The organizat  | ting organization opera<br>ion generally must sati<br>plete Part IV, Sections                                  | sfy a distr       | ibution red                           | quirement and an att                                    |   |
| е      | [    | Check this t   | ox if the organiz                          | ation received a wr  | itten determination fror<br>illy integrated supportir  | n the IRS         | that it is a                          |   | e III   |
| f      |      |  | er of supported                            |  |  |                   |                                       |   | 0   |
| g      |      |  |  | n about the support  |  |                   |                                       |   |   |
|        | (i)  | Name of supported o                                  | organization                               | (ii) EIN   | (iii) Type of organization<br>(described on lines 1–10<br>above (see instructions))                            | listed in you     | organization<br>ur governing<br>ment? | (v) Amount of monetary<br>support (see<br>instructions) | (vi) Amount of<br>other support (see<br>instructions) |
|        |      |  |  |  |  | Yes               | No                                    |   |   |
| (A)    |      |  |  |  |  |                   |                                       |   |   |
|        |      |  |  |  |  |                   |                                       |   |   |
| (B)    |      |  |  |  |  |                   |                                       |   |   |
| (C)    |      |  |  |  |  |                   |                                       |   |   |
| (D)    | _    |  |  |  |  |                   |                                       |   |   |
| (E)    |      |  |  |  |  |                   |                                       |   |   |

Total

0

0

| Sche | dule A (Form 990) 2023 JUSTICE I   | FOR ALL, INC                  |                                |                            |                            | 48-112894  | 44 Page <b>2</b> |
|------|--|-------------------------------|--------------------------------|----------------------------|----------------------------|------------|------------------|
| Ра   | rt II Support Schedule for Orga  |                               | cribed in Sect                 | ions 170(b)(1)             | (A)(iv) and 170            |            | ·                |
|      | (Complete only if you checke   |                               |                                |                            | •                          |            | nder             |
|      | Part III. If the organization fa   | ils to qualify und            | der the tests lis              | sted below, plea           | ase complete F             | Part III.) |                  |
|      | tion A. Public Support   | (-) 0040                      | (1-) 0000                      | (-) 0004                   | (-1) 0000                  | (-) 0000   | (f) T . t . l    |
|      | ndar year (or fiscal year beginning in)  | <b>(a)</b> 2019               | <b>(b)</b> 2020                | (c) 2021                   | (d) 2022                   | (e) 2023   | <b>(f)</b> Total |
| 1    | Gifts, grants, contributions, and  |                               |                                |                            |                            |            |                  |
|      | membership fees received. (Do not include any "unusual grants.")                             |                               |                                |                            |                            |            | 0                |
| 2    | Tax revenues levied for the  |                               |                                |                            |                            |            | 0                |
| -    | organization's benefit and either paid   |                               |                                |                            |                            |            |                  |
|      | to or expended on its behalf   |                               |                                |                            |                            |            | 0                |
| 3    | The value of services or facilities  |                               |                                |                            |                            |            |                  |
|      | furnished by a governmental unit to the  |                               |                                |                            |                            |            |                  |
|      | organization without charge  |                               |                                |                            |                            |            | 0                |
| 4    | Total. Add lines 1 through 3   | 0                             | 0                              | 0                          | 0                          | 0          | 0                |
| 5    | The portion of total contributions by  |                               |                                |                            |                            |            |                  |
|      | each person (other than a  |                               |                                |                            |                            |            |                  |
|      | governmental unit or publicly  |                               |                                |                            |                            |            |                  |
|      | supported organization) included on line 1 that exceeds 2% of the amount                     |                               |                                |                            |                            |            |                  |
|      | shown on line 11, column (f)   |                               |                                |                            |                            |            |                  |
| 6    | Public support. Subtract line 5 from line 4  |                               |                                |                            |                            |            | 0                |
| Sec  | tion B. Total Support  |                               |                                |                            |                            |            |                  |
| Cale | ndar year (or fiscal year beginning in)  | <b>(a)</b> 2019               | <b>(b)</b> 2020                | (c) 2021                   | (d) 2022                   | (e) 2023   | <b>(f)</b> Total |
| 7    | Amounts from line 4  | 0                             | 0                              | 0                          | 0                          | 0          | 0                |
| 8    | Gross income from interest, dividends,   |                               |                                |                            |                            |            |                  |
|      | payments received on securities loans,   |                               |                                |                            |                            |            |                  |
|      | rents, royalties, and income from  |                               |                                |                            |                            |            |                  |
| •    | similar sources  |                               |                                |                            |                            |            | 0                |
| 9    | Net income from unrelated business activities, whether or not the business is                |                               |                                |                            |                            |            |                  |
|      | regularly carried on   |                               |                                |                            |                            |            | 0                |
| 10   | Other income. Do not include gain or   |                               |                                |                            |                            |            | <b></b>          |
|      | loss from the sale of capital assets   |                               |                                |                            |                            |            |                  |
|      | (Explain in Part VI.)  |                               |                                |                            |                            |            | 0                |
| 11   | Total support. Add lines 7 through 10 .  |                               |                                |                            |                            |            | 0                |
| 12   | Gross receipts from related activities, etc. (s  | ,                             |                                |                            |                            | 12         |                  |
| 13   | First 5 years. If the Form 990 is for the orga   |                               |                                | -                          |                            |            |                  |
|      | organization, check this box and <b>stop here</b>  |                               |                                |                            |                            |            | · · · · ·        |
|      | tion C. Computation of Public Su   |                               |                                |                            |                            |            | 0.000/           |
| 14   | Public support percentage for 2023 (line 6, c  |                               |                                |                            |                            | 14<br>15   | 0.00%            |
| 15   | Public support percentage from 2022 Sched<br>33 1/3% support test—2023. If the organiz       |                               |                                |                            |                            |            | 0.00%            |
| IUd  | and <b>stop here</b> . The organization qualifies as   |                               |                                |                            |                            |            | П                |
| b    | 33 1/3% support test—2022. If the organiz  |                               | -                              |                            |                            |            |                  |
|      | box and <b>stop here</b> . The organization qualified  |                               |                                |                            |                            |            | 🔲                |
| 17a  | 10%-facts-and-circumstances test-2023  | <b>3.</b> If the organization | did not check a b              | ox on line 13, 16a,        | or 16b, and line 14        | 1          |                  |
|      | 10% or more, and if the organization meets   | the facts-and-circum          | nstances test, cheo            | ck this box and <b>sto</b> | <b>p here</b> . Explain in |            |                  |
|      | Part VI how the organization meets the facts   |                               | -                              |                            |                            |            | E I              |
| F    | organization   |                               |                                |                            |                            |            | · · · · · ·      |
| α    | <b>10%-facts-and-circumstances test—2022</b><br>15 is 10% or more, and if the organization m | -                             |                                |                            |                            |            |                  |
|      | in Part VI how the organization meets the factor   |                               |                                |                            |                            |            |                  |
|      | organization   |                               |                                |                            |                            |            |                  |
| 18   | Private foundation. If the organization did  | not check a box on l          | ine 13, 16a, 16b, <sup>-</sup> | 17a, or 17b, check         | this box and see           |            | . <u></u>        |
|      | instructions   |                               |                                |                            |                            |            |                  |

| Sche |   | FOR ALL, INC          |                     |                     |                     | 48-112894        | 4 Page <b>3</b>  |
|------|---|-----------------------|---------------------|---------------------|---------------------|------------------|------------------|
| Pa   | rt III Support Schedule for Orga  | nizations Desc        | ribed in Secti      | on 509(a)(2)        |                     |                  |                  |
|      | (Complete only if you checke  | ed the box on lin     | e 10 of Part I o    | or if the organiz   | ation failed to o   | qualify under Pa | rt II.           |
|      | If the organization fails to qu   | alify under the te    | ests listed belo    | w, please com       | olete Part II.)     |                  |                  |
| Sec  | tion A. Public Support  |                       |                     |                     |                     |                  |                  |
| Cale | ndar year (or fiscal year beginning in)   | <b>(a)</b> 2019       | <b>(b)</b> 2020     | (c) 2021            | (d) 2022            | (e) 2023         | <b>(f)</b> Total |
| 1    | Gifts, grants, contributions, and membership fees   |                       |                     |                     |                     |                  |                  |
|      | received. (Do not include any "unusual grants.")  | 215,048               | 737,330             | 807,271             | 834,089             | 816,143          | 3,409,881        |
| 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   |                       |                     |                     |                     |                  | 0                |
| 3    | Gross receipts from activities that are not an  |                       |                     |                     |                     |                  |                  |
|      | unrelated trade or business under section 513.  |                       |                     |                     |                     |                  | 0                |
| 4    | Tax revenues levied for the   |                       |                     |                     |                     |                  |                  |
|      | organization's benefit and either paid to   |                       |                     |                     |                     |                  |                  |
|      | or expended on its behalf   |                       |                     |                     |                     |                  | 0                |
| 5    | The value of services or facilities   |                       |                     |                     |                     |                  |                  |
|      | furnished by a governmental unit to the   |                       |                     |                     |                     |                  |                  |
|      | organization without charge   |                       |                     |                     |                     |                  | 0                |
| 6    | Total. Add lines 1 through 5  | 215,048               | 737,330             | 807,271             | 834,089             | 816,143          | 3,409,881        |
| 7a   | Amounts included on lines 1, 2, and 3   |                       |                     |                     |                     |                  |                  |
|      | received from disqualified persons .  |                       |                     |                     |                     |                  | 0                |
| b    | Amounts included on lines 2 and 3   |                       |                     |                     |                     |                  |                  |
|      | received from other than disqualified   |                       |                     |                     |                     |                  |                  |
|      | persons that exceed the greater of \$5,000  |                       |                     |                     |                     |                  | _                |
|      | or 1% of the amount on line 13 for the year   |                       |                     |                     | -                   |                  | 0                |
| С    | Add lines 7a and 7b   | 0                     | 0                   | 0                   | 0                   | 0                | 0                |
| 8    | Public support (Subtract line 7c from   |                       |                     |                     |                     |                  |                  |
|      | line 6.).   |                       |                     |                     |                     |                  | 3,409,881        |
|      | tion B. Total Support   | ( ) 00 ( 0            | (1) 0000            | ( ) 000 (           | ( 1) 0000           | ( ) 0000         | (0 <b>T</b> / 1  |
| -    | ndar year (or fiscal year beginning in)   | (a) 2019              | (b) 2020            | (c) 2021            | (d) 2022            | (e) 2023         | (f) Total        |
| 9    | Amounts from line 6   | 215,048               | 737,330             | 807,271             | 834,089             | 816,143          | 3,409,881        |
| 10a  | Gross income from interest, dividends,  |                       |                     |                     |                     |                  |                  |
|      | payments received on securities loans, rents,   | 40                    |                     | 95                  |                     |                  | 70               |
|      | royalties, and income from similar sources  | 43                    |                     | 35                  |                     |                  | 78               |
| D    | Unrelated business taxable income (less   |                       |                     |                     |                     |                  |                  |
|      | section 511 taxes) from businesses  |                       |                     |                     |                     |                  | 0                |
| -    | acquired after June 30, 1975  | 43                    | 0                   | 35                  | 0                   | 0                | 0<br>78          |
|      | Add lines 10a and 10b   | 43                    | 0                   |                     | 0                   | 0                | 10               |
| 11   | Net income from unrelated business activities not included on line 10b, whether             |                       |                     |                     |                     |                  |                  |
|      | or not the business is regularly carried on .   |                       |                     |                     |                     |                  | 0                |
| 12   | Other income. Do not include gain or  |                       |                     |                     |                     |                  | 0                |
| 14   | loss from the sale of capital assets  |                       |                     |                     |                     |                  |                  |
|      | (Explain in Part VI.).  |                       |                     |                     |                     |                  | 0                |
| 13   | <b>Total support.</b> (Add lines 9, 10c, 11,  |                       |                     |                     |                     |                  | <u> </u>         |
| 10   | and 12.).   | 215,091               | 737,330             | 807,306             | 834,089             | 816,143          | 3,409,959        |
| 14   | First 5 years. If the Form 990 is for the orga  |                       |                     |                     |                     | 010,140          | 0,100,000        |
|      | organization, check this box and stop here.   |                       |                     | •                   | ( )( )              |                  | 🔲                |
| Sec  | tion C. Computation of Public Su  |                       |                     |                     |                     |                  |                  |
| 15   | Public support percentage for 2023 (line 8, c   |                       |                     | 5))                 |                     | 15               | 100.00%          |
| 16   | Public support percentage for 2023 (line 8, c<br>Public support percentage from 2022 Schedu |                       |                     |                     |                     | 16               | 99.99%           |
|      | tion D. Computation of Investmen  |                       |                     |                     |                     | ••               | 00.0070          |
| 17   | Investment income percentage for 2023 (line   |                       |                     | olumn (f))          |                     | 17               | 0.00%            |
| 18   | Investment income percentage for <b>2023</b> (inte  |                       | -                   |                     |                     | 18               | 0.01%            |
|      | 33 1/3% support tests—2023. If the organi   |                       |                     |                     |                     |                  | 0.0170           |
|      | not more than 33 1/3%, check this box and s   |                       |                     |                     |                     |                  | X                |
| b    | 33 1/3% support tests—2022. If the organi   |                       |                     |                     | -                   |                  | <u> </u>         |
|      | line 18 is not more than 33 1/3%, check this  |                       |                     |                     |                     |                  | 🗌                |
| 20   | Private foundation. If the organization did r   | not check a box on li | ine 14, 19a, or 19b | , check this box ar | nd see instructions |                  | 🔲                |

JUSTICE FOR ALL, INC

| <ul> <li>Part IV Supporting Organizations         <ul> <li>(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete I</li> </ul> </li> <li>Section A. All Supporting Organizations</li> <li>1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i></li> <li>2 Did the organization have any supported organization that does not have an IRS determination of status</li> </ul> | l, complete                       |
|--|-----------------------------------|
| <ul> <li>and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete I Section A. All Supporting Organizations</li> <li>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.</li> </ul>  | l, complete<br>Part V.)<br>Yes No |
| Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete F<br>Section A. All Supporting Organizations<br>1 Are all of the organization's supported organizations listed by name in the organization's governing<br>documents? If "No," describe in Part VI how the supported organizations are designated. If designated by<br>class or purpose, describe the designation. If historic and continuing relationship, explain.  | Part V.) Yes No                   |
| 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.  | Yes No                            |
| <b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>   |                                   |
| documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.  |                                   |
| documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.  | 1                                 |
| class or purpose, describe the designation. If historic and continuing relationship, explain.  | 1                                 |
|  | 1                                 |
| 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 <b>Part VI</b> how the organization determined that the supported   |                                   |
| organization was described in section 509(a)(1) or (2).  | 2                                 |
| <b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer</i>  | _                                 |
| lines 3b and 3c below.   | 3a                                |
| <b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and  | 00                                |
|  |                                   |
| satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the  |                                   |
| organization made the determination.   | 3b                                |
| <b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)$   |                                   |
| (B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.  | 3c                                |
| 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.  | 4a                                |
| <b>b</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.   | 4b                                |
| 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.  | 4c                                |
| <b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If</i> "Yes,"  |                                   |
| answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , 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).  | Fa                                |
|  | 5a                                |
| <b>b</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?  | 5b                                |
| <b>c</b> Substitutions only. Was the substitution the result of an event beyond the organization's control?  | 5c                                |
| 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.   | 6                                 |
| 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).  | 7                                 |
| 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).  | 8                                 |
| 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 <b>Part VI</b> .   | 9a                                |
| <b>b</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 <b>Part VI</b> .  | 9b                                |
|  | 30                                |
| c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit  | 0.0                               |
| from, assets in which the supporting organization also had an interest? <i>If</i> "Yes," <i>provide detail in Part VI.</i>   | 9c                                |
| <b>10a</b> 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  |                                   |
|  | 10a                               |
| <b>b</b> Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to  |                                   |
| determine whether the organization had excess business holdings.)  | 10b                               |

|       | Fublic inspection copy   |        |          |              |
|-------|--|--------|----------|--------------|
| Sched | ule A (Form 990) 2023 JUSTICE FOR ALL, INC 48-1  | 128944 | P        | age <b>5</b> |
| Part  | <b>IV</b> Supporting Organizations (continued)   |        |          |              |
|       |  |        | 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, provide             |        |          |              |
|       | detail in <b>Part VI.</b>  | 11c    |          |              |
| Sect  | tion B. Type I Supporting Organizations  |        |          | <u> </u>     |
|       |  |        | 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 <b>Part VI</b> how the supported organization(s) |        |          |              |
|       | effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supporte  | d      |          |              |
|       | 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                |        |          |              |
|       | <b>VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated,                  |        |          |              |
|       | supervised, or controlled the supporting organization.   | 2      |          |              |
| Sect  | tion C. Type II Supporting Organizations   |        |          | L            |
|       |  |        | Yes      | No           |
| 1     | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors               |        |          |              |
| •     | or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control           |        |          |              |
|       | or management of the supporting organization was vested in the same persons that controlled or managed                         |        |          |              |
|       | the supported organization(s).   | 1      |          |              |
| Sect  | tion D. All Type III Supporting Organizations  | •      |          | L            |
| 0000  |  |        | Yes      | No           |
| 1     | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the                 |        | 100      |              |
| •     | organization's tax year, (i) a written notice describing the type and amount of support provided during the prior ta           | ×      |          |              |
|       | 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 <b>Part VI</b> how     |        |          |              |
|       | the organization maintained a close and continuous working relationship with the supported organization(s).                    | 2      |          |              |
| 3     | By reason of the relationship described on line 2, above, did the organization's supported organizations have                  | 2      |          |              |
| 5     | 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 <b>Part VI</b> the role the organization's            |        |          |              |
|       | supported organizations played in this regard.   | 3      |          |              |
| Soci  | tion E. Type III Functionally Integrated Supporting Organizations  | 3      | <u> </u> | Ļ            |
| 000   |  |        |          |              |

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).

- a 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.*
- c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a 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.
- 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.
- 3 Parent of Supported Organizations. *Answer lines 3a and 3b below.*
- **a** 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.*
- **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.*

Yes No 2a 2b 3a 3b

| Public Inspection Co   | Jy         |                             |                                |
|--|------------|-----------------------------|--------------------------------|
| Schedule A (Form 990) 2023 JUSTICE FOR ALL, INC                                  |            | 48-1                        | 128944 Page                    |
| Part V Type III Non-Functionally Integrated 509(a)(3) Supporting (               | Organiz    | ations                      |                                |
| 1 Check here if the organization satisfied the Integral Part Test as a qualifyi  | ng trust c | on Nov. 20, 1970 (explain i | n Part VI). See                |
| instructions. All other Type III non-functionally integrated supporting orga     | anization  | s must complete Sections    | A through E.                   |
| Section A - Adjusted Net Income  |            | (A) Prior Year              | (B) Current Year<br>(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          | 0                           |                                |
| 5 Depreciation and depletion   | 5          |                             |                                |
| 6 Portion of operating expenses paid or incurred for production or collection of |            |                             |                                |
| gross income or for management, conservation, or maintenance of property         |            |                             |                                |
| held for production of income (see instructions)                                 | 6          |                             |                                |
| 7 Other expenses (see instructions)  | 7          |                             |                                |
| 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)                   | 8          | 0                           |                                |
| Section B - Minimum Asset Amount   |            | (A) Prior Year              | (B) Current Year<br>(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>b</b> Average monthly cash balances   | 1b         |                             |                                |
| c Fair market value of other non-exempt-use assets                               | 1c         |                             |                                |
| <b>d</b> Total (add lines 1a, 1b, and 1c)  | 1d         | 0                           |                                |
| e Discount claimed for blockage or other factors                                 |            |                             |                                |
| (explain in detail in <b>Part VI</b> ):  |            |                             |                                |
| 2 Acquisition indebtedness applicable to non-exempt-use assets                   | 2          |                             |                                |
| 3 Subtract line 2 from line 1d.  | 3          | 0                           |                                |
| 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,    |            |                             |                                |
| see instructions).   | 4          | 0                           |                                |
| 5 Net value of non-exempt-use assets (subtract line 4 from line 3)               | 5          | 0                           |                                |
| 6 Multiply line 5 by 0.035.  | 6          | 0                           |                                |
| 7 Recoveries of prior-year distributions   | 7          | 0                           |                                |
| 8 Minimum Asset Amount (add line 7 to line 6)                                    | 8          | 0                           |                                |
| Section 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          |                             | (                              |

instructions).

| Schedule | A (Form 990) 2023 JUSTICE FOR ALL, INC                           |                                   |                     | 48-1128944 Page <b>7</b> |
|----------|--|-----------------------------------|---------------------|--------------------------|
| Part V   | Type III Non-Functionally Integrated 509(a)(3                    | ) Supporting Organi               | zations (continued) | )                        |
| Sectio   | on D - Distributions   |                                   |                     | Current Year             |
| 1        | Amounts paid to supported organizations to accomplish exe        | empt purposes                     | 1                   |                          |
| 2        | Amounts paid to perform activity that directly furthers exem     |                                   |                     |                          |
|          | organizations, in excess of income from activity                 |                                   | 2                   | 2                        |
| 3        | Administrative expenses paid to accomplish exempt purpos         | es of supported organiza          | ations              | 3                        |
| 4        | Amounts paid to acquire exempt-use assets                        |                                   | 4                   | 1                        |
| 5        | Qualified set-aside amounts (prior IRS approval required-        | provide details in <b>Part VI</b> | ) 5                 | 5                        |
| 6        | Other distributions (describe in Part VI). See instructions.     |                                   | 6                   | 5                        |
| 7        | Total annual distributions. Add lines 1 through 6.               |                                   | 7                   | 0                        |
| 8        | Distributions to attentive supported organizations to which t    | he organization is respor         | nsive               |                          |
|          | (provide details in Part VI). See instructions.                  |                                   | 8                   | 3                        |
| 9        | Distributable amount for 2023 from Section C, line 6             |                                   | 9                   | 0                        |
| 10       | Line 8 amount divided by line 9 amount                           |                                   | 1                   | 0.000                    |
|          |  | (1)                               | (ii)                | (iii)                    |
| 5        | Section E - Distribution Allocations (see instructions)          | (i)<br>Excess Distributions       | Underdistributions  | Distributable            |
|          |  | Excess Distributions              | Pre-2023            | Amount for 2023          |
| 1        | Distributable amount for 2023 from Section C, line 6             |                                   |                     | 0                        |
| 2        | Underdistributions, if any, for years prior to 2023              |                                   |                     |                          |
|          | (reasonable cause required— <i>explain in Part VI</i> ). See     |                                   |                     |                          |
|          | instructions.  |                                   |                     |                          |
| 3        | Excess distributions carryover, if any, to 2023                  |                                   |                     |                          |
| а        | From 2018 0  |                                   |                     |                          |
| b        | From 2019 0  |                                   |                     |                          |
| С        | From 2020 0  |                                   |                     |                          |
| d        | From 2021 0  |                                   |                     |                          |
| е        | From 2022 0  |                                   |                     |                          |
| f        | Total of lines 3a through 3e                                     | 0                                 |                     |                          |
| g        | Applied to underdistributions of prior years                     |                                   |                     | 0                        |
| h        | Applied to 2023 distributable amount                             |                                   |                     | 0                        |
| i        | Carryover from 2018 not applied (see instructions)               |                                   |                     |                          |
| j        | Remainder. Subtract lines 3g, 3h, and 3i from line 3f.           | 0                                 |                     |                          |
| 4        | Distributions for 2023 from                                      |                                   |                     |                          |
|          | Section D, line 7: \$ 0  |                                   |                     |                          |
| а        | Applied to underdistributions of prior years                     |                                   |                     | 0                        |
| b        | Applied to 2023 distributable amount                             |                                   |                     | 0                        |
| С        | Remainder. Subtract lines 4a and 4b from line 4.                 | 0                                 |                     |                          |
| 5        | Remaining underdistributions for years prior to 2023, if         |                                   |                     |                          |
|          | any. Subtract lines 3g and 4a from line 2. For result            |                                   |                     |                          |
|          | greater than zero, explain in <b>Part VI</b> . See instructions. |                                   |                     | 0                        |
| 6        | Remaining underdistributions for 2023. Subtract lines 3h         |                                   |                     |                          |
|          | and 4b from line 1. For result greater than zero, explain        |                                   |                     |                          |
|          | in Part VI. See instructions.                                    |                                   |                     | 0                        |
| 7        | Excess distributions carryover to 2024. Add lines 3j             |                                   |                     |                          |
|          | and 4c.  | 0                                 |                     |                          |
| 8        | Breakdown of line 7:   |                                   |                     |                          |
| a        | Excess from 2019 0   |                                   |                     |                          |
| b        | Excess from 2020 0   |                                   |                     |                          |
| С        | Excess from 2021 0   |                                   |                     |                          |
| d        | Excess from 2022 0   |                                   |                     |                          |
| е        | Excess from 2023 0   |                                   |                     |                          |

| Part VII       Supplemental information. Provide the explanations required by Part II, line 17 Part II, Section Part II, 20 Section A, Bins 1, 20 Section B, Bins 2 and 3: Part IV, Section E, lines 1, 20 Section B, lines 2, Part V, Section D, lines 5, 6, and 8, and 7 Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) | Schedule A (Fe | orm 990) 2023 JUSTICE  | FOR ALL, INC  |  | 48-1128944 Page <b>8</b>                                  |
|--|----------------|--|---|--|---|
|  |                | <b>Supplemental Information.</b> Prov<br>III, line 12; Part IV, Section A, line<br>B, lines 1 and 2; Part IV, Section<br>3a, and 3b; Part V, line 1; Part V, | vide the explanations required<br>es 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9<br>C, line 1; Part IV, Section D, I<br>, Section B, line 1e; Part V, Se | a, 9b, 9c, 11a, 11b, and 11c; Pa<br>ines 2 and 3; Part IV, Section E<br>ection D, lines 5, 6, and 8; and P | 7a or 17b; Part<br>art IV, Section<br>, lines 1c, 2a, 2b, |
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| Supplemental Financial Statements |  |
|-----------------------------------|--|
|-----------------------------------|--|

SCHEDULE D

(Form 990)

.... - - - OMB No. 1545-0047 

|       |   | •                                   | the organization answered "Ye                          |               | -                         | 2023                    |
|-------|---|-------------------------------------|--|---------------|---------------------------|-------------------------|
|       |   | Part IV, line 6,                    | 7, 8, 9, 10, 11a, 11b, 11c, 11d, 1 <sup>4</sup>        | 1e, 11f, 12a, | or 12b.                   | Open to Public          |
|       | ment of the Treasury<br>I Revenue Service | Go to www.irs.gov                   | Attach to Form 990.<br>/Form990 for instructions and t | he latest inf | formation.                | Inspection              |
|       | of the organization                       |                                     |  |               | Employer identification n |                         |
|       | ICE FOR ALL, IN                           | c.                                  |  |               | 48-112                    |                         |
| Part  |   |                                     | dvised Funds or Other S                                | imilar Fur    |                           | 20944                   |
| I all |   |                                     | d "Yes" on Form 990, Part                              |               | ius of Accounts.          |                         |
|       | Completer                                 |                                     | (a) Donor advised funds                                | rv, iirio o.  | (b) Funds and             | other accounts          |
| 1     | Total number at e                         | end of year                         |  | 2             | (4) Fundo una             |                         |
| 2     |   | contributions to (during year) .    |  | 0             |                           |                         |
| 3     |   | grants from (during year)           |  | 0             |                           |                         |
| 4     |   | at end of year                      |  | 0             |                           |                         |
| 5     | 00 0                                      | 5                                   | or advisors in writing that the as                     | sets held in  | donor advised             |                         |
|       | -   |                                     | the organization's exclusive le                        |               |                           | Yes X No                |
| 6     | -   |                                     | , and donor advisors in writing                        | -             |                           |                         |
|       | only for charitable                       | e purposes and not for the ber      | efit of the donor or donor advis                       | or, or for an | y other purpose           |                         |
|       | conferring imperr                         | missible private benefit?           |  |               |                           | Yes X No                |
| Part  | Conservat                                 | tion Easements.                     |  |               |                           |                         |
|       | Complete i                                | f the organization answere          | d "Yes" on Form 990, Part                              | IV, line 7.   |                           |                         |
| 1     |   |                                     | the organization (check all that                       |               |                           |                         |
|       | Preservation                              | of land for public use (for example | e, recreation or education)                            | Preservatio   | n of a historically impo  | ortant land area        |
|       | Protection of                             | f natural habitat                   |  | Preservatio   | n of a certified historic | structure               |
|       |   | of open space                       |  |               |                           |                         |
| 2     |   |                                     | n held a qualified conservation                        | contribution  | in the form of a conse    | ervation                |
| -     | -   | last day of the tax year.           |  | contribution  |                           | the End of the Tax Year |
| а     |   |                                     |  |               |                           |                         |
| b     |   |                                     | nents  |               |                           |                         |
| С     | -   | -                                   | ed historic structure included or                      |               |                           |                         |
| d     |   |                                     | n line 2c acquired after July 25,                      |               |                           |                         |
|       | not on a historic                         | structure listed in the National    | Register   |               | <b>2</b> d                |                         |
| 3     | Number of conse                           | ervation easements modified, t      | ransferred, released, extinguish                       | ned, or term  | inated by the organiza    | tion during             |
|       | the tax year                              |                                     |  |               |                           |                         |
| 4     |   |                                     | servation easement is located                          |               |                           |                         |
| 5     | -   |                                     | arding the periodic monitoring,                        |               | -                         |                         |
|       |   |                                     | easements it holds?                                    |               |                           | Yes No                  |
| 6     | Staff and volunteer                       | r hours devoted to monitoring, ins  | pecting, handling of violations, and                   | d enforcing c | onservation easements     | during the year         |
| -     |   |                                     |  |               |                           |                         |
| 7     | Amount of expense                         | es incurred in monitoring, inspect  | ng, handling of violations, and enf                    | orcing conse  | rvation easements durin   | g the year              |
| 8     | Doos oach cons                            | nution accoment reported on         | line 2d above satisfy the requir                       | romonte of a  | ration (170(h)(4)(R)(i)   |                         |
| 0     |   |                                     |  |               |                           | Yes No                  |
| 9     |   |                                     | rts conservation easements in                          |               |                           |                         |
| Ū     |   |                                     | xt of the footnote to the organiz                      |               |                           |                         |
|       |   | counting for conservation ease      |  |               |                           |                         |
| Part  |   |                                     | ons of Art, Historical Trea                            | sures. or     | Other Similar Ass         | ets.                    |
|       |   |                                     | d "Yes" on Form 990, Part                              |               |                           |                         |
| 1a    |   |                                     | ASB ASC 958, not to report in                          |               | statement and balance     | ce sheet                |
|       | works of art, histo                       | orical treasures, or other simila   | r assets held for public exhibiti                      | on, educatio  | on, or research in furth  | erance of               |
|       | public service, pr                        | ovide in Part XIII the text of the  | e footnote to its financial statem                     | nents that de | escribes these items.     |                         |
| b     | If the organizatio                        | n elected, as permitted under l     | FASB ASC 958, to report in its                         | revenue sta   | tement and balance s      | heet works              |
|       | -   | -                                   | ts held for public exhibition, edu                     |               |                           |                         |
|       |   | the following amounts relating      |  |               |                           |                         |
|       |   |                                     | ne1  |               |                           |                         |
|       |   |                                     |  |               |                           |                         |
| 2     | -   |                                     | , historical treasures, or other s                     |               | s for financial gain, pro | ovide the               |
|       | -   |                                     | r FASB ASC 958 relating to the                         |               |                           |                         |
| а     |   |                                     |  |               |                           |                         |
| b     | Assets included i                         | n Form 990, Part X                  |  |               | \$                        |                         |

| Sched | ule D (Form 990) 2023 JUSTICE FOR ALL, INC   | ;                   |                        |             |                 |            | 48-11289            | 944      | )        | Page <b>2</b> |
|-------|--|---------------------|------------------------|-------------|-----------------|------------|---------------------|----------|----------|---------------|
| Par   | III Organizations Maintaining Colle  |                     | Histo                  | rical Trea  | asures, or (    | Other S    | imilar Assets       | (contir  |          |               |
| 3     | Using the organization's acquisition, access collection items (check all that apply).  |                     |                        |             |                 |            |                     |          | ,        |               |
| а     | Public exhibition  |                     | d                      | Loan or     | exchange pro    | naram      |                     |          |          |               |
|       |  |                     |                        | Other       |                 |            |                     |          |          |               |
| b     | Scholarly research   |                     | e                      | Other       |                 |            |                     |          | ·        |               |
| С     | Preservation for future generations  |                     |                        |             |                 |            |                     |          |          |               |
| 4     | Provide a description of the organization's c XIII.  | ollections and e    | xplain h               | ow they fu  | irther the orga | inization' | s exempt purpos     | ie in Pa | rt       |               |
| 5     | During the year, did the organization solicit or assets to be sold to raise funds rather than the solid to raise funds rather the solid to rather the so |                     |                        |             |                 |            |                     | Ye       | s        | No            |
| Part  | IV Escrow and Custodial Arrangen   | nents.              |                        |             |                 |            |                     |          |          |               |
|       | Complete if the organization answ<br>990, Part X, line 21.   | ered "Yes" on       | Form §                 | 990, Part   | IV, line 9, o   | r reporte  | ed an amount        | on For   | m        |               |
| 1a    | Is the organization an agent, trustee, custod  | lian. or other inte | ermedia                | rv for cont | ributions or o  | ther asse  | ts not              |          |          |               |
|       | included on Form 990, Part X?  |                     |                        |             |                 |            |                     | Ye       | s        | No            |
| b     | If "Yes," explain the arrangement in Part XII  | I and complete t    | he follo               | wing table  |                 |            |                     |          |          |               |
|       |  |                     |                        |             |                 |            | Ar                  | nount    |          |               |
| С     | Beginning balance  |                     |                        |             |                 | 1c         |                     |          |          | 0             |
| d     | Additions during the year  |                     |                        |             |                 | 1d         |                     |          |          |               |
| е     | Distributions during the year  |                     |                        |             |                 | 1e         |                     |          |          |               |
| f     | Ending balance   |                     |                        |             |                 | 1f         |                     |          |          | 0             |
| 2a    | Did the organization include an amount on F  | Form 990, Part >    | K, line 2 <sup>-</sup> | 1, for escr | ow or custodia  | al accour  | nt liability?       | Ye       | s X      | No            |
| b     | If "Yes," explain the arrangement in Part XII  | I. Check here if    | the expl               | anation ha  | as been provi   | ded in Pa  | rt XIII....         |          |          |               |
| Part  | V Endowment Funds.   |                     |                        |             |                 |            |                     |          |          |               |
|       | Complete if the organization answ  | ered "Yes" on       | Form §                 | 990. Part   | IV. line 10.    |            |                     |          |          |               |
|       |  | Current year        |                        | or year     | (c) Two years   | back (d    | I) Three years back | (e) Fo   | ur years | back          |
| 1a    | Beginning of year balance  | 0                   |                        | 0           |                 | 0          | 0                   |          |          | 0             |
| b     | Contributions  |                     |                        |             |                 |            |                     |          |          |               |
| с     | Net investment earnings, gains,  |                     |                        |             |                 |            |                     |          |          |               |
|       | and losses   |                     |                        |             |                 |            |                     |          |          |               |
| d     | Grants or scholarships   |                     |                        |             |                 |            |                     |          |          |               |
| е     | Other expenditures for facilities  |                     |                        |             |                 |            |                     |          |          |               |
|       | and programs   |                     |                        |             |                 |            |                     |          |          |               |
| f     | Administrative expenses  |                     |                        |             |                 |            |                     |          |          |               |
| g     | End of year balance  |                     |                        | 0           |                 | 0          | 0                   |          |          | 0             |
| 2     | Provide the estimated percentage of the cur  | -                   |                        | line 1g, co | olumn (a)) held | d as:      |                     |          |          |               |
| a     | Board designated or quasi-endowment  | %                   | <u>6</u>               |             |                 |            |                     |          |          |               |
| b     | Permanent endowment %  | %                   |                        |             |                 |            |                     |          |          |               |
| С     | Term endowment %<br>The percentages on lines 2a, 2b, and 2c sho  | auld aqual 100%     |                        |             |                 |            |                     |          |          |               |
| 3a    | Are there endowment funds not in the posse   |                     |                        | n that are  | held and adm    | ninistarad | l for the           |          |          |               |
| Ja    | organization by:   |                     | Janizatio              | in that are |                 | linisteret |                     | Г        | Yes      | No            |
|       | (i) Unrelated organizations  |                     |                        |             |                 |            |                     | 3a(i)    | 103      | NO            |
|       | (ii) Related organizations   |                     |                        |             |                 |            |                     | 3a(ii)   |          |               |
| b     | If "Yes" on line 3a(ii), are the related organiz   |                     |                        |             |                 |            |                     | 3b       |          |               |
| 4     | Describe in Part XIII the intended uses of th  |                     | •                      |             |                 |            |                     | 1        |          |               |
| Part  |  |                     |                        |             |                 |            |                     |          |          |               |
|       | Complete if the organization answ  |                     | Form §                 | 990, Part   | IV, line 11a    | . See Fo   | orm 990, Part 2     | X, line  | 10.      |               |
|       | Description of property  | (a) Cost or othe    |                        |             | or other basis  |            | cumulated           |          | ok valu  | е             |
|       |  | (investmen          |                        | . ,         | other)          | • •        | reciation           | (1)=0    |          |               |
| 1a    | Land   |                     | 0                      |             | 59,000          |            |                     |          | 5        | 59,000        |
| b     | Buildings  |                     | 0                      |             | 400,639         |            | 117,239             |          |          | 33,400        |
| с     | Leasehold improvements   |                     | 0                      |             | 0               |            | 0                   |          |          | 0             |
| d     | Equipment  |                     | 0                      |             | 113,739         |            | 113,739             |          |          | 0             |
| е     | Other  |                     | 0                      |             | 0               |            | 0                   |          |          | 0             |

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

342,400

| Schedule D (F     | Form 990) 2023 JUSTICE FOR ALL, INC  |                              |   | 48-1128944        | Page <b>3</b> |
|-------------------|--|------------------------------|---|-------------------|---------------|
| Part VII          |  |                              |   |                   |               |
|                   | Complete if the organization answered  | "Yes" on Form 990,           | Part IV, line 11b. See Form             | 990, Part X, line | e 12.         |
|                   | <ul> <li>(a) Description of security or category<br/>(including name of security)</li> </ul> | (b) Book value               | (c) Method of v.<br>Cost or end-of-year |                   |               |
| • •               | al derivatives..............   | 0                            |   |                   |               |
|                   | held equity interests  | 0                            |   |                   |               |
| (3) Other         |  |                              |   |                   |               |
| (A)               |  |                              |   |                   |               |
| (B)               |  |                              |   |                   |               |
| (C)               |  |                              |   |                   |               |
| (D)               |  |                              |   |                   |               |
| <u>(E)</u>        |  |                              |   |                   |               |
| (F)               |  |                              |   |                   |               |
| (G)<br>(H)        |  |                              |   |                   |               |
|                   | nn (b) must equal Form 990, Part X, line 12, col. (B)) .                                     | 0                            |   |                   |               |
|                   | Investments—Program Related.   | 0                            |   |                   |               |
|                   | Complete if the organization answered  | "Yes" on Form 990            | Part IV line 11c See Form               | 990 Part X line   | 13            |
|                   |  |                              | (c) Method of v                         |                   | 5 10.         |
|                   | (a) Description of investment  | (b) Book value               | Cost or end-of-year                     |                   |               |
| (1)               |  |                              |   |                   |               |
| (2)               |  |                              |   |                   |               |
| (3)               |  |                              |   |                   |               |
| (4)               |  |                              |   |                   |               |
| (5)               |  |                              |   |                   |               |
| (6)               |  |                              |   |                   |               |
| (7)               |  |                              |   |                   |               |
| (8)               |  |                              |   |                   |               |
| (9)               |  |                              |   |                   |               |
|                   | nn (b) must equal Form 990, Part X, line 13, col. (B)) .                                     | 0                            |   |                   |               |
| Part IX           | Other Assets.  |                              |   |                   | 45            |
|                   | Complete if the organization answered  |                              | Part IV, line 11d. See Form             |                   |               |
| (4)               | (a) Descr  | iption                       |   | (b) Book valu     | ue            |
| (1)               |  |                              |   | +                 |               |
| (2)               |  |                              |   | -                 |               |
| (3)               |  |                              |   |                   |               |
| <u>(4)</u><br>(5) |  |                              |   |                   |               |
| (6)               |  |                              |   |                   |               |
| (7)               |  |                              |   |                   |               |
| (8)               |  |                              |   |                   |               |
| (9)               |  |                              |   |                   |               |
| -                 | umn (b) must equal Form 990, Part X, line 15, o  | col. (B))                    |   |                   | 0             |
| Part X            | Other Liabilities.   |                              |   |                   |               |
|                   | Complete if the organization answered  | "Yes" on Form 990,           | Part IV, line 11e or 11f. See           | Form 990, Part    | tΧ,           |
|                   | line 25.   |                              |   |                   |               |
| 1.                | (a) Descrip  | tion of liability            |   | (b) Book valu     | ue            |
| (1) Federa        | al income taxes  |                              |   |                   | 0             |
| (2) CRED          | DIT CARD LIABILITIES   |                              |   |                   | 2,784         |
| (3)               |  |                              |   |                   |               |
| (4)               |  |                              |   |                   |               |
| (5)               |  |                              |   | <b></b>           |               |
| (6)               |  |                              |   | <b></b>           |               |
| (7)               |  |                              |   | <b></b>           |               |
| (8)               |  |                              |   | <b></b>           |               |
| (9)               |  |                              |   | <u> </u>          |               |
|                   | umn (b) must equal Form 990, Part X, line 25, o  |                              | <u> </u>                                | <u> </u>          | 2,784         |
| 2. Liability for  | or uncertain tax positions. In Part XIII, provide the te                                     | ext of the footnote to the o | organization's financial statements the | hat 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 .

| Schedu | ule D (Form 990) 2023 JUSTICE FOR ALL, INC   | 48-1128944 | Page <b>4</b> |
|--------|--|------------|---------------|
| Par    | t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R   |            |               |
|        | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  |            |               |
| 1      | Total revenue, gains, and other support per audited financial statements   | 1          |               |
| 2      | Amounts included on line 1 but not on Form 990, Part VIII, line 12:  |            |               |
| 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 <b>2a</b> through <b>2d</b>  | 2e         | 0             |
| 3<br>4 | Subtract line 2e from line 1         Image: Amounts included on Form 990, Part VIII, line 12, but not on line 1:         Image: Amounts included on Form 990, Part VIII, line 12, but not on line 1:                                   | 3          | 0             |
| ч<br>а | Investment expenses not included on Form 990, Part VIII, line 7b 4a  |            |               |
| b      | Other (Describe in Part XIII.)   | -          |               |
|        | Add lines <b>4a</b> and <b>4b</b>  | 4c         | 0             |
| 5      | Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 12.</i> ).  | 5          | 0             |
| Part   | XII Reconciliation of Expenses per Audited Financial Statements With Expenses per  | Return.    |               |
|        | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  |            |               |
| 1      | Total expenses and losses per audited financial statements   | 1          |               |
| 2      | Amounts included on line 1 but not on Form 990, Part IX, line 25:  |            |               |
| а      | Donated services and use of facilities   |            |               |
| b      | Prior year adjustments   |            |               |
| С      | Other losses   | _          |               |
| d      | Other (Describe in Part XIII.)   |            |               |
| e      | Add lines <b>2a</b> through <b>2d</b>  | 2e         | 0             |
| 3<br>⊿ | Subtract line <b>2e</b> from line <b>1</b>   | 3          | 0             |
| 4<br>a | Amounts included on Form 990, Part IX, line 25, but not on line 1:<br>Investment expenses not included on Form 990, Part VIII, line 7b 4a  |            |               |
| a<br>b | Other (Describe in Part XIII.).  | -          |               |
|        | Add lines <b>4a</b> and <b>4b</b>  | 4c         | 0             |
| 5      | Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 18.</i> ).   | 5          | 0             |
| Part   | XIII Supplemental Information.   |            |               |
|        | de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa<br>rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform |            |               |
|        |  |            |               |
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| Schedule D (Fo | Drm 990) 2023 JUSTICE FOR ALL, INC   | 48-1128944 | Page <b>5</b> |
|----------------|--------------------------------------|------------|---------------|
| Part XIII      | Supplemental Information (continued) |            |               |
|                |                                      |            |               |
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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 Form 990-EZ. Go to *www.irs.gov/Form*990 for the latest information.

|     | OMB No. 1545-0047            |
|-----|------------------------------|
|     | 2023                         |
|     | Open to Public<br>Inspection |
| tit | fication number              |

Department of the Treasury Internal Revenue Service Name of the organization

SCHEDULE O

(Form 990)

| Employer identification | nur |
|-------------------------|-----|
| 48-1128944              |     |

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Form 990, Part VI, Section A, Line 6, 7a, and 7b: THE MEMBERS OF THE CORPORATION HAVE THE

AUTHORITY TO ELECT AND REMOVE THE MEMBERS OF THE GOVERNING BODY.

Form 990, Part VI, Section B, Line 11b: FORM 990 AND ASSOCIATED FORMS AND SCHEDULES ARE

EMAILED TO ALL MEMBERS OF THE GOVERNING BODY BEFORE FILING. WHILE REVIEW IS ENCOURAGED, NO

REVIEW IS REQUIRED PRIOR TO FILING.

Form 990, Part VI, Section B, Line 15a: THE BOARD OF DIRECTORS REVIEWS AND APPROVES

COMPENSATION FOR STEPHEN WAGNER. THE PROCESS FOR DETERMINING 2023 COMPENSATION FOR STEPHEN

WAGNER INCLUDED A REVIEW OF COMPARABLES, APPROVAL BY INDEPENDENT PERSONS (BOARD OF DIRECTORS),

AND CONTEMPORANEOUS SUBSTANTIATION OF DELIBERATION AND DECISION.

Form 990, Part VI, Section C, Line 19: JFA MAKES ITS GOVERNING DOCUMENTS, CONSTITUTION,

BYLAWS, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC AT ITS OFFICE AT 113 N MARTINSON,

WICHITA, KS.

Form 990, Part III, Line 4a: IN 2023, 441 PEOPLE PARTICIPATED IN 20 INTERACTIVE SEMINARS OF

FOUR HOURS OR MORE. 404 PEOPLE PARTICIPATED IN 22 INTERACTIVE WORKSHOPS OF LESS THAN FOUR

HOURS. 124 PEOPLE PARTICIPATED AS FIRST-TIME VOLUNTEERS AND 33 PEOPLE SERVED AS RETURNING

VOLUNTEERS DURING JFA'S 51 OUTREACH EVENTS ON 25 COLLEGE CAMPUSES. 2,850 PEOPLE LISTENED TO

ONE OF 18 PRESENTATIONS. JFA TRAINERS CARRIED OUT IN-PERSON SPEAKING AND OUTREACH EVENTS IN 15

STATES: AZ, CA, CO, DC, ID, KS, MI, MN, NE, NM, OH, OK, PA, TX, AND VA. IN 2023, JFA OFFERED

ITS SEVEN-HOUR ONLINE INTERACTIVE TRAINING COURSE 9 TIMES TO PARTICIPANTS IN 22 STATES AND

INDIA. 47 PEOPLE COMPLETED AT LEAST FIVE HOURS OF THE COURSE, AND 30 PEOPLE COMPLETED BETWEEN

ONE AND FOUR HOURS. 8 PARTICIPANTS COMPLETED ADDITIONAL MENTORING DURING 5 ONLINE SESSIONS.

JFA CONTINUED TO MAKE ITS TRAINING MATERIALS AVAILABLE FOR FREE TO PEOPLE ALL OVER THE WORLD

THROUGH ITS WEBSITE, SOCIAL MEDIA, AND TRAINING EVENTS. DURING 2023, JFA'S WEBSITE

(WWW.JFAWEB.ORG) RECEIVED 37,274 PAGE VIEWS AND 79,150 UNIQUE VISITS FROM 74,689 UNIQUE

VISITORS. (NOTE THAT CHANGES TO THE WAY JFA'S WEBSITE HANDLES COOKIES MAY HAVE AFFECTED THESE

| Schedule O (Form 990) 2023  | Page 2                         |
|---|--------------------------------|
| Name of the organization  | Employer identification number |
| JUSTICE FOR ALL, INC  | 48-1128944                     |
| AT THE END OF 2023, JFA'S YOUTUBE CHANNEL (@PICTUREJUSTICEFORALL) HAD 289 S | SUBSCRIBERS AND                |
| JFA'S INSTAGRAM ACCOUNT (@PICTUREJUSTICEFORALL) HAD OVER 1000 FOLLOWERS     | 8.                             |
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# Assets by Classification - 990

| JUSTICE | E FOR ALL, INC 48-1128944         |              |       |          |         |           |           |                   |         |          |          |        |         |              |         |         |
|---------|-----------------------------------|--------------|-------|----------|---------|-----------|-----------|-------------------|---------|----------|----------|--------|---------|--------------|---------|---------|
|         | Description of                    | Date         | 1     | Business | Cost or | ·         |           |                   | 1       |          |          |        | Con-    | Prior Accum. | 2023    | 2023    |
| Item    | Property                          | Placed       | Asset | Use      | Other   | Sec. 179  |           | Special           | Salvage | Recovery | Recovery |        | vention | Deprec.,     | I       | Accum.  |
| No.     | "**" indicates DISPOSED           | In Service   | Code  | %        | Basis   | Deduction | Credit    | Allowance         | Value   | Basis    | Period   | Method | Code    | 179, Bonus   | Deprec. | Deprec. |
|         |                                   |              |       |          |         |           |           |                   |         |          |          |        |         |              |         |         |
|         | neral purpose tools, machinery    | y, and equip | ument |          |         |           |           |                   |         |          |          |        |         |              |         |         |
|         | OFFICE EQUIPMENT                  | 9/16/2016    |       | 100.00%  | 4,222   | ,         | 0         |                   | 0       | -        |          | 200DB  | HY      | 4,222        | 0       | ,       |
|         | OFFICE EQUIPMENT                  | 2/7/2022     | F-10  | 100.00%  | 5,875   | 0         | 0         | 5,875             | 0       | 0        | 7.0      | 200DB  | HY      | 5,875        | 0       | 5,875   |
|         | Total: 7-yr Genl purp tools, mac  | აh, equip    |       | -        | 10,097  | 4,222     | 0         | 5,875             | 0       | 0        | -        |        |         | 10,097       | 0       | 10,097  |
|         | Residential rental real estate    |              |       |          |         |           |           |                   |         |          |          |        |         |              |         |         |
|         | BUILDING IMPROVEMENTS             |              |       | 100.00%  | 3,446   | 0         | 0         | 0 0               | 0       | - , -    |          | SL/GDS |         | 120          | 125     |         |
|         | HVAC UNIT                         | 6/6/2022     | R-4   | 100.00%  | 4,903   | 0         | 0         | , 0               | 0       | 4,903    | 27.5     | SL/GDS | MM      | 97           | 178     | 275     |
|         | NEW ROOF                          | 12/7/2022    | R-4   | 100.00%  | 16,874  | 0         | 0         | <i>i</i> <b>0</b> | 0       | 16,874   | 27.5     | SL/GDS | MM      | 26           | 614     | 640     |
|         | Total: 27.5-yr Res rental real es | 25,223       | 0     | 0        | 0       | 0         | 25,223    | -                 |         |          | 243      | 917    | 1,160   |              |         |         |
|         | SubTotals                         |              |       |          | 35,320  | 4,222     | 0         | ) 5,875           | 0       | 25,223   | ļ        |        |         | 10,340       | 917     | 11,257  |
|         | Less: Disposed Assets             |              |       | 7        | ( 0) (  | ( 0) (    | ( 0)      | ) ( 0)            | ( 0)    | ) ( 0)   | 1        |        |         | ( 0)         | ( 0)    | ( 0)    |
|         | Ending Totals                     |              |       | _        | 35,320  | 4,222     | <u> ٦</u> | 5,875             | 0       | 25,223   | -        |        |         | 10,340       | 917     | 11,257  |