Extended to May 17, 2021

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

(Rev. January 2020) Department of the Treasury

Paid

Preparer

Use Only

▶ Do not enter social security numbers on this form as it may be made public. Open to Public ► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection and ending JUN 30, 2020 A For the 2019 calendar year, or tax year beginning JUL 1, 2019 D Employer identification number Check if applicable: C Name of organization Address change OneJustice 94-2589423 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ (415) 834-0100 433 California Street 1815 termin-ated 2,983,607. G Gross receipts \$ City or town, state or province, country, and ZIP or foreign postal code Amended return 94104 San Francisco, CA H(a) Is this a group return Applica-F Name and address of principal officer: Phil Hwang Yes X No for subordinates? pending same as C above H(b) Are all subordinates included? Yes No Tax-exempt status: X = 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ▶ www.onejustice.org **H(c)** Group exemption number ▶ K Form of organization: X Corporation Association Other -L Year of formation: 1979 M State of legal domicile: CA Part I Summary Briefly describe the organization's mission or most significant activities: OneJustice brings life-changing Activities & Governance legal help to those in need by transforming the legal aid system. Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 23 Number of voting members of the governing body (Part VI, line 1a) 23 Number of independent voting members of the governing body (Part VI, line 1b) $\overline{44}$ 5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 726 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 39 7b **Prior Year** Current Year 1,698,184. 2,485,151. Contributions and grants (Part VIII, line 1h) Revenue 407,362. 512,630. Program service revenue (Part VIII, line 2g) 3,742. 783. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 1.519. 52,843. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,213,116. 2.949.098. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 2,156,545. 2,015,014. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 66,375. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 717,840. 1,011,950. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,940,760. 3,026,964. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -727,644. -77,866. Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year **End of Year** 2,153,634. 1,783,373. 20 Total assets (Part X, line 16) 242,825. 690,952. 21 Total liabilities (Part X, line 26) 540,548. 1,462,682. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign Phil Hwang, CEO Here Type or print name and title PTIN Print/Type preparer's name Preparer's signature

P01612986

Firm's EIN ▶ 95-4557617

Phone no. (626) 403-6801

Firm's name | Harrington Group, CPAs, LLP

Pasadena, CA 91101

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

Firm's address ≥ 234 East Colorado Blvd., Suite M150

Sean E. Cain, CPA

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	OneJustice brings life-changing legal help to those in need by
	transforming the civil legal aid system. OneJustice removes barriers
	to justice by serving as a source of innovative and replicable
	projects that expand the delivery of legal services.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$
	Healthy Nonprofits Program:
	OneJustice's Healthy Nonprofits program provides training, coaching,
	and consulting to boards, executives, and senior management of legal
	services organizations throughout California to build the leadership
	and management skills they need to survive and thrive in the
	increasingly complex nonprofit sector. During Fiscal Year ("FY") 19-20,
	OneJustice provided brief technical assistance on nonprofit management
	in 185 cases to 47 unique legal services nonprofits, and provided in-depth consulting in 4 cases to 3 unique organizations. OneJustice
	also conducted 10 trainings for over 246 attendees from organizations
	throughout the state. One Justice completed the tenth year of the
	Executive Fellowship, an intensive 10-month program on nonprofit
4b	1 200 670
40	(Code:) (Expenses \$1, 200, 070 \cdot on including grants of \$) (Revenue \$) (Revenue \$)
	OneJustice's Pro Bono Justice Program expands volunteerism in the legal
	community, providing strategic planning, training, coaching, and
	resources to legal services organizations, nonprofits, law firms, law
	schools, and corporations on how to design and administer highly
	successful volunteer ("pro bono") legal projects. OneJustice also
	develops and tests innovative pro bono service delivery models,
	focusing on the needs of rural and underserved communities in
	California.
	During FY19-20, the Pro Bono Justice Program brought together pro bono
	leaders from the nonprofit and private sectors at the 2020 California
4c	(Code:) (Expenses \$
4 :	
4d	Other program services (Describe on Schedule O.)
4 -	(Expenses \$ including grants of \$) (Revenue \$) Table to a grant a supplied a supplied by the state of \$ 169, 359

Form 990 (2019)

Form 990 (2019) OneJustice Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Х	
2	If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	-
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		21	
3		3		x
4	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
4	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	┝╼		\vdash
3	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			37
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		37
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			37
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			37
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		37	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	l		v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	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	١		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
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			x
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		Х	
100	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	21	
ıza		12a	Х	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	IZa		\vdash
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	<u>-</u>		
~	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Form 990 (2019) OneJustice Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			l
	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			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			l
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			37
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			v
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			X
04	contributions? If "Yes," complete Schedule M	30		X
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		21
32		32		X
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		- 23
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	- 55		
5 7	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai	t 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			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

Form 990 (2019) OneJustice Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No						
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return 2a 44									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)									
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X						
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X						
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).									
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X						
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х						
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit									
	any contributions that were not tax deductible as charitable contributions?	6a		X						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts									
	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).		v							
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X							
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	-		Х						
~ I	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 7d	7с								
	, , , , , , , , , , , , , , , , , , , ,	7e		Х						
f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 6		X						
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/							
	If the organization received a contribution of qualified intellectual property, and the organization file a Form 1098-C?	7 h	N/							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
	sponsoring organization have excess business holdings at any time during the year? N/A	8								
9	Sponsoring organizations maintaining donor advised funds.									
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a								
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b								
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a									
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders N/A 11a									
b	Gross income from other sources (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
	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. Is the organization licensed to issue qualified health plans in more than one state? N/A	10								
а		13a								
L	Note: See the instructions for additional information the organization must report on Schedule O.									
D	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									
•										
		14a		Х						
	IS IN COLUMN TO THE TOTAL TO TH	14b								
15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	. 7.5								
. •	excess parachute payment(s) during the year?	15		х						
	If "Yes," see instructions and file Form 4720, Schedule N.	, ,								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х						
	If "Yes," complete Form 4720, Schedule O.									

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

<u> </u>					Δ
Sec	tion A. Governing Body and Management			1,,	
		ا با	3	Yes	No
та	Enter the number of voting members of the governing body at the end of the tax year	1a 4	긕		
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		3		
	Enter the number of voting members included on line 1a, above, who are independent		긕		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh				v
_	officer, director, trustee, or key employee?		. 2		X
3	Did the organization delegate control over management duties customarily performed by or under t				- V
	of officers, directors, trustees, or key employees to a management company or other person?				X
4	Did the organization make any significant changes to its governing documents since the prior Form				
5	Did the organization become aware during the year of a significant diversion of the organization's a	ssets?			X
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 a	appoint one or			٦,
	more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockholders, or			
	persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y			l	
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-				l
_	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		. 9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal I	Revenue Code.)			
				Yes	No
	Did the organization have local chapters, branches, or affiliates?		10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such				
	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 bo	dy before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			l	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris		12b	X	
С	$ \ \text{Did the organization regularly and consistently monitor and enforce compliance with the policy?} \ \textit{If} \text{``}$	Yes," describe		l	
	in Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?			Х	
14	Did the organization have a written document retention and destruction policy?		14	X	
15	Did the process for determining compensation of the following persons include a review and appro-	val by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision			l	
	The organization's CEO, Executive Director, or top management official			X	
b	Other officers or key employees of the organization		15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement with a			
	taxable entity during the year?		16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org	anization's			
_	exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶CA				
18	$Section\ 6104\ requires\ an\ organization\ to\ make\ its\ Forms\ 1023\ (1024\ or\ 1024\cdot A,\ if\ applicable),\ 990,$	and 990-T (Section 501(c)	(3)s only	y) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.				
		n on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, or	conflict of interest policy,	and fina	ncial	
	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 b	ooks and records 🕨			
	The Organization - (415) 834-0100 A33 California Street No. 815 San Francisco CA	0.41.0.4			
	433 California Street No. 815 San Francisco CA	94104			

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Mitchell A. Kamin	2.00			l					•	
Immediate Past Chair		Х		Х				0.	0.	0.
(2) Kyuli Oh	2.00			l						
Chair		Х		Х				0.	0.	0.
(3) Rebecca Justice Lazarus	2.00			l						•
Vice Chair/Secretary		Х		Х				0.	0.	0.
(4) Matthew Werdegar	2.00			l						
Treasurer	1	Х		Х				0.	0.	0.
(5) Maureen P. Alger	1.00									•
Board Member	1	Х						0.	0.	0.
(6) Tamika L. Butler	1.00									
Board Member		Х						0.	0.	0.
(7) Diego Cartagena	1.00									
Board Member		Х						0.	0.	0.
(8) Jennifer Chaloemtiarana	1.00									
Board Member	1	Х						0.	0.	0.
(9) Ethan Dettmer	1.00	ļ								
Board Member		Х						0.	0.	0.
(10) Vanessa Frank	1.00	1								
Board Member (Term Start 10/19)		Х						0.	0.	0.
(11) Amelia Hansen	1.00]						_	_	_
Board Member		Х						0.	0.	0.
(12) Rahul Kapoor	1.00	1								
Board Member		Х						0.	0.	0.
(13) Ellen LaPointe	1.00	1								
Board Member		Х						0.	0.	0.
(14) David Lash	1.00	1								
Board Member		Х						0.	0.	0.
(15) Seth D. Levy	1.00								_	_
Board Member		Х						0.	0.	0.
(16) Emma Luevano	1.00	ļ								
Board Member		Х						0.	0.	0.
(17) Judi A. McManigal	1.00									•
Board Member		Х						0.	0.	0. Form 990 (2010)

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ighe	st C	compensated Employe	es (continued)						
(A)	(B)			•	C)			(D)	(E)		ĺ	(F)			
Name and title	Average	(do	not c	Pos heck	itior more) than	one	Reportable	Reportable		Es	stimat	ed		
	hours per week					is bot		compensation	compensation	1	ar	nount			
	(list any	\vdash					T	from the	from related organizations		000	other pensa			
	hours for	direct				b		organization	(W-2/1099-MIS		l .	rom th			
	related	ee or	trustee			nsate		(W-2/1099-MISC)	(** 2) 1000 11110	٥,	l	anizat			
	organizations	trust	ıal tru		yee	ompe					an	d relat	ted		
	below	Individual trustee or director	Institutional t	Je.	Key employee	Highest compensated employee	ner				org	anizati	ions		
	line)	lndi	Inst	Offlicer	Key	High	- F								
(18) Emily Kane Miller	1.00									^			•		
Board Member	4 00	Х					$oxed{oxed}$	0.		0.	<u> </u>		0.		
(19) Rob Nolan	1.00	١								^	ĺ		_		
Board Member	1 00	Х		_		_	╙	0.		0.			0.		
(20) Max Ochoa	1.00									•	ĺ		•		
Board Member	1 00	Х					╙	0.		0.			0.		
(21) Toby Rothschild	1.00												_		
Board Member		Х				$oxed{oxed}$	┖	0.		0.	<u> </u>		0.		
(22) Ellen Sueda	1.00										ĺ		_		
Board Member (Term Start 10/19)		Х				$oxed{oxed}$	┖	0.		0.	<u> </u>		0.		
(23) Wanji Walcott	1.00	_								_	ĺ		_		
Board Member (Term End 8/19)		Х						0.		0.	<u> </u>		0.		
(24) Eric Zabinski	1.00	_								_	ĺ		_		
Board Member		Х				$oxed{oxed}$	┖	0.		0.	<u> </u>		0.		
(25) Julia Wilson	40.00										ĺ	_			
CEO (Term End 3/20)				Х		$oxed{oxed}$	┖	157,973.		0.	<u> </u>	2	242.		
(26) Kimberly K. Heinonen	40.00	1		l				100 540		•					
Chief Prgm Offr/Prgm Dir(Term Start				X				100,542.		0.		7,2			
1b Subtotal								258,515.		0.		7,4	88.		
c Total from continuation sheets to Part V								0.		0.	<u> </u>	- A	0.		
d Total (add lines 1b and 1c)								258,515.		0.		/,4	88.		
2 Total number of individuals (including but r	ot limited to th	nose	liste	ed al	bove	e) w	ho r	eceived more than \$100	0,000 of reportable	;			,		
compensation from the organization															
												Yes	No		
3 Did the organization list any former officer,	,	,	,		,	,	_	, , ,	,				v		
line 1a? If "Yes," complete Schedule J for s											3		X		
4 For any individual listed on line 1a, is the su	-		-					•	the organization			v			
and related organizations greater than \$15											4	X			
5 Did any person listed on line 1a receive or a	•				•			•			_		- v		
rendered to the organization? If "Yes," com	ipiete Scheaui	e J ī	or s	ucn	pers	son					5		X		
<u> </u>		-l	l -						\$100,000 of comm			f			
1 Complete this table for your five highest co										bens	ation	irom			
the organization. Report compensation for	the calendar y	ear	enai	ng v	vitri	or w	/itmir	-	year.	—		2)			
(A) Name and business	address	NI	INC	7				(B) Description of s	services	C	ر) ompe	C) ensatio	าท		
		14/	2141	_			\dashv	2000p.110101.							
							\dashv								
							\dashv								
							\dashv								
							\dashv								
2 Total number of independent contractors (i	ncluding but r	ot li	mite	d to	tho	se li	stec	d above) who received n	nore than						
	-							•							

Form 990 (2019)

Form 990 OneJustice 94-2589423

Doub \/!!										
Part VII Section A. Officers, Directors, Tr	ustees, Key Eı	nplo	yee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours	(cl	neck	all ·	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	L				oyee		the	organizations	compensation
	(list any	recto				em pl		organization	(W-2/1099-MISC)	from the
	nours for	or di	99			sated		(W-2/1099-MISC)		organization
	related	ustee	trust		ee	ubeu				and related organizations
	helow	dual t	tiona	١.	nploy	stcor	_			Organizations
	(list any hours for related organizations below line)	ndivic	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) Cindy Myers	28.00	 -	 -	H	-	_	_			
Interim CEO (Term Start 3/20)	20.00			Х				0.	0.	0
interim the (Term bears 5/20)	+									
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Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII Revenuè éxcluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b 447,153. c Fundraising events 1c 1d d Related organizations 1,348,352. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 689,646. similar amounts not included above 1f g Noncash contributions included in lines 1a-1f 1g \$ 2,485,151 h Total. Add lines 1a-1f Business Code 293,839. 900099 293,839. 2 a Fee for service Program Service Revenue 113,523. b Workshops & conference 900099 113,523. С f All other program service revenue 407,362. g Total. Add lines 2a-2f . Investment income (including dividends, interest, and 3,742. 3,742. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 33,000. 6 a Gross rents 0. **b** Less: rental expenses ... 33,000. c Rental income or (loss) 33,000. 33,000. d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 7a **b** Less: cost or other basis Other Revenue 7b and sales expenses c Gain or (loss) ______7c d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 447,153. of contributions reported on line 1c). See 34,509. Part IV, line 18 34,509. **b** Less: direct expenses 0. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9b **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10b **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 12,423. 12,423. 900099 11 a Cy pres b Other income 900099 7,420. 7,420. С d All other revenue 19,843. e Total. Add lines 11a-11d 2,949,098. 407,362. 56,585. Total revenue. See instructions 12

Form 990 (2019) OneJustice Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

3600	on 501(c)(3) and 501(c)(4) organizations must com				
D-	Check if Schedule O contains a respon	nse or note to any line in (A)	this Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
4	individuals. See Part IV, lines 15 and 16			+	
4 5	Benefits paid to or for members				
3	trustees, and key employees	183,507.	54,509.	80,358.	48,640.
6	Compensation not included above to disqualified	203/3074	31/3031	0073301	10,0101
Ū	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,522,606.	1,180,672.	145,146.	196,788.
8	Pension plan accruals and contributions (include			·	
-	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	169,995.	130,850.	13,969.	25,176.
10	Payroll taxes	138,906.	100,332.	18,236.	20,338.
11	Fees for services (nonemployees):				
а	Management				
b	Legal	44,377.		44,377.	
С	Accounting	55,546.		55,546.	
	Lobbying	34,800.			34,800.
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	204 770	250 120		26 651
	column (A) amount, list line 11g expenses on Sch O.)	284,779.	258,128. 2,312.	96.	26,651. 515.
12	Advertising and promotion	74,875.	49,305.	6,043.	19,527.
13 14	Office expenses	32,381.	25,803.	6,578.	17,527.
15	Information technology Royalties	32,301.	25,005.	0,3700	
16	Occupancy	276,634.	201,118.	35,053.	40,463.
17	Travel	57,658.	53,226.	1,196.	3,236.
18	Payments of travel or entertainment expenses		·		
-	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	38,126.	36,248.	1,357.	521.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	11 00:	6 222	, , , , ,	1 100
23	Insurance	11,934.	6,323.	4,131.	1,480.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	Training	26,200.	24,186.	544.	1,470.
b	Miscellaneous	21,623.	8,170.	2,663.	10,790.
С	Meals and entertainment	21,324.	19,053.	1,132.	1,139.
d	Dues and fees	19,392.	11,886.	2,543.	4,963.
е	All other expenses	9,378.	7,238.	522.	1,618.
25	Total functional expenses. Add lines 1 through 24e	3,026,964.	2,169,359.	419,490.	438,115.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
_	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2010)

Form 990 (2019)
Part X Balance Sheet

Га	ILΛ	Dalance Sneet					
		Check if Schedule O contains a response or	note to ar	ny line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			155,551.	1	216,166.
	2	Savings and temporary cash investments			1,070,476.	2	852,598.
	3	Pledges and grants receivable, net			242,500.	3	550,000.
	4	Accounts receivable, net			252,622.	4	424,223.
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of t		· ·		5	
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons descri		6			
Ş	7	Notes and loans receivable, net	F		7		
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			42,647.	9	101,920.
	10a	Land, buildings, and equipment: cost or othe					
		basis. Complete Part VI of Schedule D		16,847.			
	b	Less: accumulated depreciation		16,847.	0.	10c	0.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, lir		12			
	13	Investments - program-related. See Part IV, lii		13			
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			19,577.	15	8,727.
	16	Total assets. Add lines 1 through 15 (must e			1,783,373.	16	2,153,634.
	17	Accounts payable and accrued expenses			225,825.	17	216,323.
	18	Grants payable			18		
	19	Deferred revenue	17,000.	19	99,629.		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
S	22	Loans and other payables to any current or for	ormer offi	cer, director,			
≝		trustee, key employee, creator or founder, su	bstantial	contributor, or 35%			
Liabilities		controlled entity or family member of any of t	hese pers	ons		22	
	23	Secured mortgages and notes payable to un	related th	ird parties		23	
	24	Unsecured notes and loans payable to unrela	ated third	parties	0.	24	375,000.
	25	Other liabilities (including federal income tax,	payables	to related third			
		parties, and other liabilities not included on li	nes 17-24). Complete Part X			
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			242,825.	26	690,952.
"		Organizations that follow FASB ASC 958, or	check her	re X			
Š		and complete lines 27, 28, 32, and 33.					
lan	27	Net assets without donor restrictions			642,206.	27	293,167.
B	28	Net assets with donor restrictions			898,342.	28	1,169,515.
ü		Organizations that do not follow FASB AS6	C 958, ch	eck here 🕨 📖			
Ē		and complete lines 29 through 33.					
ls o	29	Capital stock or trust principal, or current fun	ds			29	
se	30	Paid-in or capital surplus, or land, building, or	equipme	nt fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated		F		31	
Ne	32	Total net assets or fund balances			1,540,548.	32	1,462,682.
	33	Total liabilities and net assets/fund balances			1,783,373.	33	2,153,634.

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Pa	rt 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)		2,94						
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,02		$\frac{64.}{66.}$				
3									
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,54	0,5	48.				
5	Net unrealized gains (losses) on investments								
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			0.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,								
	column (B))	10	1,46	2,6	82.				
Pa	rt XII Financial Statements and Reporting	•							
	Check if Schedule O contains a response or note to any line in this Part XII								
				Yes	No				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other								
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.							
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	e basis,							
	consolidated basis, or both:								
	X Separate basis Consolidated basis Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,							
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X					
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch								
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit							
	Act and OMB Circular A-133?	~	3a		Х				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit							
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b						

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Name of the organization

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

OneJustice 94-2589423 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,279,791.	3,013,433.	3,298,340.	1,698,184.	2,485,151.	11,774,899.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1,279,791.	3,013,433.	3,298,340.	1,698,184.	2,485,151.	11,774,899.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						1,029,163.
	Public support. Subtract line 5 from line 4.						10,745,736.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 4	1,279,791.	3,013,433.	3,298,340.	1,698,184.	2,485,151.	11,774,899.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	200	220	550	702	2 742	F 70 <i>C</i>
	and income from similar sources	300.	329.	552.	783.	3,742.	5,706.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	2 402	16,443.		1 510	E2 0/2	72 207
	assets (Explain in Part VI.)	2,482.	10,443.		1,519.	54,045.	73,287.
	Total support. Add lines 7 through 10	-1- (!11	\			12 2	,936,480.
12	Gross receipts from related activities,						, 930 , 400 •
13	First five years. If the Form 990 is for						▶□
Sec	organization, check this box and storection C. Computation of Publ		rcentage				
	Public support percentage for 2019 (olumn (fl)		14	90.65 %
15	Public support percentage from 2018					15	90.47 %
	33 1/3% support test - 2019. If the o					· · · · · · · · · · · · · · · · · · ·	
	stop here. The organization qualifies	•		,		,	X
b	33 1/3% support test - 2018. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac	J					*
	meets the "facts-and-circumstances"			-	•	-	
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the	ū				•	
	organization meets the "facts-and-circ						▶ □
18	Private foundation. If the organization						s >

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	qualify under the tests listed be ction A. Public Support	elow, please com	plete Part II.)				
	endar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and	(a) 2013	(b) 2010	(6) 2017	(u) 2016	(e) 2019	(I) Total
•	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
2	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the						
2	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4							
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
_							
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5						
7 6	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	endar year (or fiscal year beginning in)	(a) 201 F	(h) 2016	(a) 2017	(4) 2010	(a) 2010	(f) Total
		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6 Gross income from interest,						
100	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
ľ	Unrelated business taxable income (less section 511 taxes) from businesses						
	paguired offer June 20, 1075						
	Add lines 10a and 10b Net income from unrelated business						
•••	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital						
12	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)	the evanization'	a first second this	d founds or fifth t	l		ration
14	First five years. If the Form 990 is for	· ·			•	. , . ,	zation,
Se	check this box and stop here ction C. Computation of Publi						
	Public support percentage for 2019 (li			column (fl)		15	
	Public support percentage for 2019 (iii					16	<u>%</u>
	ction D. Computation of Inves					10	70
	Investment income percentage for 20					17	%
						18	
	Investment income percentage from 2 a 33 1/3% support tests - 2019. If the						
198							17 15 1101
	more than 33 1/3%, check this box ar						
	33 1/3% support tests - 2018. If the line 18 is not more than 33 1/3%, che						
20							
20	20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	3a		
	- Ou		
	3b		
	30		
	0-		
	3c		
	4a		
	4b		
	4c		
	5a		
	Ju		
	5b		
	5c		
	30		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	100		
	10a		
	401		
	10b		00.40
m 9	90 or 99	O-EZ)	2019

Par	T IV 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 in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	tion C. Type II Supporting Organizations			
000	non of Type it oupporting organizations	$\overline{}$	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	tion D. All Type III Supporting Organizations			
000	non D. 7th Type in cupporting organizations	$\overline{}$	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	_		
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
2	By reason of the relationship described in (2), did the organization's supported organizations have a			
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	2		
Sact	tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
ı a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instru	uctions	1	
2	Activities Test. Answer (a) and (b) below.		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	NO
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	Za		
b	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	26		
2	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	2-		
1-	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	21-		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust o	n Nov. 20, 1970 (explain in	Part VI). See instructions. A
	other Type III non-functionally integrated supporting organizations must con-	mplete :	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	y integr	ated Type III supporting org	ganization (see
	instructions)			

Schedule A (Form 990 or 990-EZ) 2019

Pai	1 v Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	
Secti	ion D - Distributions	,	Current Year	
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	ns		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	9	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

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

OneJustice 94-2589423

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2019

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
Equal Justice Works	317,475.	80,397.
Grove Foundation	360,000.	122,922.
The Horace W. Goldsmith Foundation	400,000.	162,922.
Thomas J. Long Foundation	900,000.	662,922.
Total Excess Contributions to Schedule A, Part II, Line 5		1,029,163.

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

2019

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

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

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

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

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

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

·ux	, (occ ocparate motrations), then				
•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nan	ne of organization			Empl	oyer identification number
	OneJust				94-2589423
Pa	art I-A Complete if the org	ganization is exempt unde	er section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organiz	tures		▶ \$	
3	Volunteer hours for political campa	ign activities			
Pa	art I-B Complete if the org	ganization is exempt unde	er section 501(c)(3).	
1	Enter the amount of any excise tax				
2	Enter the amount of any excise tax	incurred by organization manage	rs under section 4955	▶\$	
3	If the organization incurred a section	on 4955 tax, did it file Form 4720 f	or this year?		Yes No
	Was a correction made?				
	If "Yes," describe in Part IV.				
	art I-C Complete if the org	ganization is exempt und	er section 501(c),	except section 501(c)(3).
1	Enter the amount directly expended	d by the filing organization for sec	tion 527 exempt funct	on activities > \$	
	Enter the amount of the filing organ				
	exempt function activities		-	▶\$	
3	Total exempt function expenditures				
	line 17b			▶\$	
4	Did the filing organization file Form				
	Enter the names, addresses and er				
	made payments. For each organiza	. ,		•	0 0
	contributions received that were pr	romptly and directly delivered to a	separate political orga	inization, such as a separa	te segregated fund or a
	political action committee (PAC). If	additional space is needed, provi	de information in Part I	V.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

	Schedule C (Form 990 or 990-EZ) 2019 OneJustice						589423 Page 2	
Pa	art II-A C	complete if the orga	nization is exe	mpt under sectio	n 501(c)(3) and fi	led Form 5768 (el	ection under	
	s	ection 501(h)).						
A	Check 🕨	if the filing organization	on belongs to an aff	iliated group (and list ir	n Part IV each affiliated	d group member's nam	ie, address, EIN,	
	expenses, and share of excess lobbying expenditures).							
В	3 Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.							
		1 :	and althoracy France			(a) Filing	(b) Affiliated group	
			on Lobbying Expe	natures unts paid or incurred.	1	organization's	totals	
		(The term "expendit)	totals				
18	Total lobby	ring expenditures to influe	nce public opinion	(grassroots lobbying)		4,806.		
ı	Total lobby	ring expenditures to influe	nce a legislative bo	dy (direct lobbying)		4,509.		
(Total lobby	ring expenditures (add line	es 1a and 1b)			9,315.		
(npt purpose expenditures				3,017,649.		
		pt purpose expenditures				3,026,964.		
		nontaxable amount. Enter				301,348.		
	If the amou	nt on line 1e, column (a) or ((b) is: The lok	bying nontaxable am	ount is:			
	Not over \$	500,000	20% of	the amount on line 1e.				
	Over \$500	,000 but not over \$1,000,0	000 \$100,0	00 plus 15% of the exc	ess over \$500,000.			
	Over \$1,00	0,000 but not over \$1,500	0,000 \$175,0	00 plus 10% of the exc	ess over \$1,000,000.			
	Over \$1,50	0,000 but not over \$17,00	00,000 \$225,0	00 plus 5% of the exce	ess over \$1,500,000.			
	Over \$17,0	000,000	\$1,000	000.				
(g Grassroots	nontaxable amount (ente	er 25% of line 1f)			75,337.		
ı	n Subtract lin	ne 1g from line 1a. If zero	or less, enter -0-			0.		
	i Subtract lin	ne 1f from line 1c. If zero c	or less, enter -0			0.		
	j If there is a	an amount other than zero	on either line 1h or	line 1i, did the organiz	ation file Form 4720	_		
	reporting section 4911 tax for this year?					L	Yes No	
				eraging Period Under	` '			
		(Some organizations tha		` '	•	of the five columns b	elow.	
			<u>.</u>	ate instructions for li				
			Lobbying Expe	nditures During 4-Yea	ar Averaging Period			
					I	I	1	

Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total		
2a Lobbying nontaxable amount	268,000.	292,875.	296,359.	301,348.	1,158,582.		
b Lobbying ceiling amount (150% of line 2a, column(e))					1,737,873.		
c Total lobbying expenditures	19,831.	21,200.	33,597.	9,315.	83,943.		
d Grassroots nontaxable amount	67,000.	73,219.	74,090.	75,337.	289,646.		
e Grassroots ceiling amount (150% of line 2d, column (e))					434,469.		
f Grassroots lobbying expenditures	7,916.	1,668.	1,606.	4,806.	15,996.		

Schedule C (Form 990 or 990-EZ) 2019

Schedule C (Form 990 or 990-EZ) 2019 OneJustice 94-258942 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b))
the lobbying activity.	Yes	No	Amo	unt
1 During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section	on F01/o\/	5) or or	otion	
501(c)(6).)((c)(i	oj, or se	CUUII	
/-//-/-			Yes	N
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Part III-B Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5), or se		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	on 501(c)(5), or se		e 3,
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	on 501(c)("No" OR	5), or se		e 3,
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members	on 501(c)("No" OR	5), or se (b) Part		e 3,
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members	on 501(c)("No" OR	5), or se (b) Part		e 3,
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year	on 501(c)("No" OR	5), or se (b) Part		e 3,
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year	on 501(c)(i "No" OR	5), or se (b) Part		e 3,
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Carryover from last year	on 501(c)(i "No" OR	5), or se (b) Part		e 3, i
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	on 501(c)(i "No" OR	5), or se (b) Part		e 3,
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Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and part of the section of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and part of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and part of the exceeded the amount on line 2 to the reasonable estimate of nondeductible lobbying and part of the exceeded the amount on line 2 to the reasonable estimate of nondeductible lobbying and part of the exceeded the amount on line 2 to the reasonable estimate of nondeductible lobbying and part of the exceeded the amount of the exceeded the	on 501(c)(c "No" OR	5), or se (b) Part 1 2a 2b 2c 3		e 3,
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

OneJustice

Employer identification number 94-2589423

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor		-
			·
Pa	rt II Conservation Easements. Complete if the or		
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of a	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structu	ire
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing cons	ervation easements during the year
			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservat	ion easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense	statement and
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial stateme	ents that describes the
_	organization's accounting for conservation easements.		
Pa	rt III Organizations Maintaining Collections of		ther Similar Assets.
	Complete if the organization answered "Yes" on Forn		
1a	If the organization elected, as permitted under FASB ASC 98	•	
	of art, historical treasures, or other similar assets held for pu		
	service, provide in Part XIII the text of the footnote to its fina		
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furth	erance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		• \$
2	If the organization received or held works of art, historical tre		gain, provide
	the following amounts required to be reported under FASB A		
а	Revenue included on Form 990, Part VIII, line 1		• \$
h	Assets included in Form 990 Part Y		• •

	t III Organizations Maintaining Co		rt Hist	torical Tr	easures or	Other	Simila	r Asse	ts/contin		aye Z
	Using the organization's acquisition, accession									rucu)	
3	collection items (check all that apply):	in, and other record	15, CHEC	Carry or tine	Tollowing that h	ilane sigi	illicant (use oi its			
	Public exhibition	d		l oon or ovo	hange program						
a		d									
	b Scholarly research e Other										
C	Preservation for future generations	Unations and symbol	ما ما ما		la a a u a a a i a a ti a a	·		i- D-:	+ VIII		
4	Provide a description of the organization's co							se in Par	t XIII.		
5	During the year, did the organization solicit or								7		٦.,.
Dai	to be sold to raise funds rather than to be ma								Yes		No
Fai	t IV Escrow and Custodial Arrang reported an amount on Form 990, Part		ete if the	organizatio	n answered "Ye	es" on Fo	orm 990	, Part IV,	line 9, oi		
1a	Is the organization an agent, trustee, custodia	an or other intermed	diary for	contribution	ns or other asse	ts not in	cluded		_		_
	on Form 990, Part X?							<u> </u>	Yes		No
b	If "Yes," explain the arrangement in Part XIII a										
									Amoun	t	
С	Beginning balance						1c				
	Additions during the year						1d				
	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fo						?	<u></u>	Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	kplanatio	n has been	provided on Pa	art XIII					
Pai	T V Endowment Funds. Complete if	the organization an	swered	"Yes" on Fo	orm 990, Part IV	, line 10.					
		(a) Current year	(b) P	rior year	(c) Two years b	ack (d)	Three ye	ears back	(e) Four	r years	back
1a	Beginning of year balance										
	Contributions										
	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curre	ent year end baland	e (line 1	g, column (a	a)) held as:						
а	Board designated or quasi-endowment	•	%		"						
b	Permanent endowment	%	_								
С	Term endowment > 9/	<u> </u>									
	The percentages on lines 2a, 2b, and 2c shou	ıld equal 100%.									
За	Are there endowment funds not in the posses		ation tha	at are held a	and administered	d for the	organiza	ation			
	by:	·-·-·					9		1	Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								·		
b	If "Yes" on line 3a(ii), are the related organization	ions listed as requi	red on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the										
Pai	t VI Land, Buildings, and Equipme										
	Complete if the organization answered		D. Part IV	/. line 11a. S	See Form 990. F	Part X. lin	ne 10.				
	Description of property	(a) Cost or o			or other		umulate		(d) Boo	k valu	<u> </u>
	becomplien of property	basis (investr			(other)	` '	ciation		(4) 200	it valu	•
	Land	<u> </u>	,		` '	- 1- / -	.=.,				
	Buildings										
	Leasehold improvements				+						
				1	6,847.	1	6,84	7.			0.
	Equipment Other				,		,				
	Other		V colun	nn (P) lino 1	100)						0.

		0	4 0500400	
Schedule D (Form 990) 2019 OneJustice Part VIII Investments - Other Securities.		94	1-2589423	Page 3
Complete if the organization answered "Yes"	on Form 990 Part IV line	11h See Form 990 Part V line 12		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	nd-of-vear market v	alue
(1) Financial derivatives	(D) DOON TOLICO	(6)		
(2) Closely held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market v	alue
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶				
Part IX Other Assets.				
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.		
(a) [Description		(b) Book va	lue
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				

(4)	
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total	(Column (h) must equal Form 990 Part X col. (B) line 25.)	

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

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Pa	rt XI Reconciliation of Revenue per Audited Financial	Statements with	Revenue per R	eturr	i.
	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	2,994,310.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	45,212.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	45,212.
3	Subtract line 2e from line 1			3	2,949,098.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	2,949,098.
	rt XII Reconciliation of Expenses per Audited Financial	Statements With			
	rt XII Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" on Form 990, Part IV	Statements With /, line 12a.	Expenses per	Retu	rn.
	rt XII Reconciliation of Expenses per Audited Financial	Statements With /, line 12a.	Expenses per		
Pa	rt XII Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" on Form 990, Part IN Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	Statements With /, line 12a.	Expenses per	Retu	rn.
Pa 1	rt XII Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" on Form 990, Part IX Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	Statements With /, line 12a.	Expenses per	Retu	rn.
1 2	Complete if the organization answered "Yes" on Form 990, Part IV. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	Statements With /, line 12a.	Expenses per	Retu	rn.
Pa 1 2 a	rt XII Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" on Form 990, Part IX Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b	Expenses per	Retu	rn.
Pa 1 2 a	Complete if the organization answered "Yes" on Form 990, Part IX Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a	Expenses per	Retu	rn. 3,072,176.
Pa 1 2 a b c d	Complete if the organization answered "Yes" on Form 990, Part IV. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a	45,212.	Retu	rn. 3,072,176. 45,212.
Pa 1 2 a b c d	Complete if the organization answered "Yes" on Form 990, Part IX Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a	45,212.	Retu	rn. 3,072,176.
Pa 1 2 a b c d e	Total expenses and losses per audited financial amounts included on line 1 but not on Form 990, Part IX. Donated services and use of facilities. Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a	45,212.	Retu	rn. 3,072,176. 45,212.
Pa 1 2 a b c d e 3	Complete if the organization answered "Yes" on Form 990, Part IV. Total expenses and losses per audited financial statements. Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities. Prior year adjustments. Other losses. Other (Describe in Part XIII.) Add lines 2a through 2d. Subtract line 2e from line 1. Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b.	2a	45,212.	Retu	rn. 3,072,176. 45,212.
Pa 1 2 a b c d e 3 4	Total expenses and losses per audited financial amounts included on line 1 but not on Form 990, Part IX. Donated services and use of facilities. Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a	45,212.	Retu	45,212. 3,026,964.
1 2 a b c d e 3 4 a b	Complete if the organization answered "Yes" on Form 990, Part IV. Total expenses and losses per audited financial statements. Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities. Prior year adjustments. Other losses. Other (Describe in Part XIII.) Add lines 2a through 2d. Subtract line 2e from line 1. Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b.	2a	45,212.	Retu	rn. 3,072,176. 45,212.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part X, Line 2:

OneJustice is exempt from taxation under Internal Revenue Code Section 501(c)(3) and California Revenue and Taxation Code Section 23701d.

Generally accepted accounting principles provide accounting and disclosure guidance about positions taken by an organization in its tax returns that might be uncertain. Management has considered its tax positions and believes that all of the positions taken by OneJustice in its federal and state exempt organization tax returns are more likely than not to be sustained upon examination. OneJustice's returns are subject to examination by federal and state taxing authorities, generally for three and four years, respectively, after they are filed.

Schedule D ((Form 990) 2019	OneJustice		94-2589423	Page 5
Part XIII	(Form 990) 2019 Supplemental Info	rmation (continued)			

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Employer identification number

OneJust	ice				94-2589	423
Part I Fundraising Activities required to complete this part	• Complete if the organization answert.	ered "Y	'es" o	n Form 990, Part IV,	line 17. Form 990-E2	Z filers are not
Indicate whether the organization rai	e Solicitar f Solicitar g Special or oral agreement with any individual Part VII) or entity in connection with providuals or entities (fundraisers) pursu	tion of tion of fundra (includerofess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, tru fundraising services?	stees, or	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	aiser	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
Velocity Ink, LLC - 9157		Yes	No			
Camino Real, San Gabriel, CA	Fundraising services		Х	0.	34,800.	0.
					34,800.	
3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	outions	s or has been notifie	d it is exempt from re	egistration
CA						

94-2589423 Page 2 Schedule G (Form 990 or 990-EZ) 2019 OneJustice Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events None Opening (add col. (a) through Doors to Jus col. (c)) (event type) (event type) (total number) Revenue 481,662. 481,662. 1 Gross receipts 447,153. 447,153. 2 Less: Contributions 34,509. 34,509. 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 34,509. 9 Other direct expenses 34,509. 34,509. 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? _____ Yes ____ No

b If "Yes," explain: ____

Sch	nedule G (Form 990 or 990-EZ) 2019 OneJustice 94	-2589	423	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	Ш	Yes	└── No
	Indicate the percentage of gaming activity conducted in:	13a	I	%
	a The organization's facility o An outside facility		_	
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		1	,,
	Name			
15	Address Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	□ No
158	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Ш	163	
ŀ	o If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount			
	of gaming revenue retained by the third party > \$			
(If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation > \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
47	Manufacture distribution as			
	Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
•	retain the state gaming license?		Yes	☐ No
ŀ	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	ie		
	organization's own exempt activities during the tax year ▶ \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	d Part III, I	ines 9,	9b, 10b,
Sc	hedule G, Part I, Line 2b, List of Ten Highest Paid Fundrais	ers:		
(i) Name of Fundraiser: Velocity Ink, LLC			
(i	.) Address of Fundraiser: 9157 Camino Real, San Gabriel, CA	91775	5	

Schedule G	(Form 990 or 990-EZ)	OneJustice		94-2589423	Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Info	rmation (continued)			

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

OneJustice

Employer identification number 94-2589423

Pa	art I Questions Regarding Compensation			
	·		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			7.7
	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			37
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		77	
	not described on lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9	I	1

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

Schedule J (Form 990) 2019

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(F) Compensation in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	berients	(B)(i)-(D)	reported as deferred on prior Form 990
(1) Julia Wilson	(i)	152,973.	5,000.	0.	0.	242.	158,215.	0.
CEO (Term End 3/20)	(ii)	0.	0.	0.	0.	0.		0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2019

Page 2

Schedule J (Form 990) 2019 OneJustice	94-2589423	Page 3
Part III Supplemental Information		
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also comp	lete this part for any additional informat	tion.
Part I, Line 7:		
Julia Wilson received a performance based bonus resulting from FY 18-19.		

SCHEDULE 0

Internal Revenue Service

(Form 990 or 990-EZ)
Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

➤ Attach to Form 990 or 990-EZ.

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

2019 Open to Public

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

OneJustice

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Form 990, Part III, Line 4a, Program Service Accomplishments:

leadership and management, with 24 Fellows graduating in May 2020.

The Healthy Nonprofits Program continued its Organizational Change

Accelerators in FY 19-20, which is a capacity-building fellowship

program that provides training and coaching in three specific content

areas that are critical to increasing the efficiency and effectiveness

of legal services organizations: Research and Evaluation, Pro Bono, and

Innovation. During FY 19-20, we enrolled staff from close to 20

organizations in the three fellowships. Additionally, the Capacity

Building Academy, which aims to increase the capacity of legal services

organizations serving rural immigrant communities through an online

training program. We enrolled and taught 3 cohorts of legal services

staff (2 cohorts focused on healthy nonprofits topics and one cohort

focused on pro bono best practices).

In FY 19-20, the Healthy Nonprofits Program's Californians for Legal
Aid project supported public policies that increase access to legal
services for low-income Californians in the following ways: staff
contacted all offices of California's federal Members of Congress in
Washington, DC, to educate them about the services that legal aid
programs provide to constituents in their districts and urged their
support for increased federal funding for legal aid; mobilized the
Californians for Legal Aid network on the federal appropriations
process for Legal Services Corporation funding, and authored multiple
policy advocacy letters on state and federal issues.

Name of the organization
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Form 990, Part III, Line 4b, Program Service Accomplishments:

Pro Bono Conference in Oakland, convening 159 individuals from legal services organizations, law firms, corporations, bar associations, courts, and other nonprofit organizations. One Justice also hosted webinars for the California Joint Pro Bono Manager Forum, a quarterly program addressing emerging needs in pro bono and featuring highlighted pro bono projects from around the state and country.

Throughout FY19-20, OneJustice continued to staff and convene and facilitate meetings for the Bay Area and Southern California Pro Bono Managers groups. Given the evolving challenges and needs stemming from the COVID-19 pandemic and shift to remote services, OneJustice increased support for the regional groups in 2020, which involved more frequent meetings, additional avenues for communication and shared resources. The impact of the COVID-19 pandemic also necessitated a redesign of OneJustice's mobile pop-up in-person legal clinics model; working with our partners, we were able to pivot and provide remote services through the Justice Bus Network, IMPACT LA, Rural Justice Collaborative, Justice Bus, Justice Plane, Inland Empire, and Access to Asylum projects. Throughout 2020, we engaged 325 pro bono volunteers to staff 30 free remote legal clinics. We utilized our experience and learnings to create a Remote Clinic Toolkit to help legal services organizations pivot to a remote service model; the toolkit has been shared with over 100 organizations across the country.

OneJustice also continued its work in the collaborative Pro Bono

Training Institute (PBTI); in addition to developing 10 new training

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wideo modules, PBTI revamped their entire library of 100+ training modules during the development of a new website, which launched in April 2020.

Form 990, Part VI, Section B, line 11b:

OneJustice's Form 990 is reviewed by the organization's governing body before it is filed. The process is as follows: OneJustice's Audit Committee reviews the Form 990 with the CEO. After approval by the Audit Committee for submission, the Form 990 is distributed via email to the entire Board of Directors for Board members to raise any questions or concerns. The Form is then submitted.

Form 990, Part VI, Section B, Line 12c:

OneJustice's conflict of interest policy requires Board members and key employees to disclose, on an annual basis, any interests that could rise to conflicts. Board members and key employees are given a disclosure form each year that asks them to disclose any conflicts, as defined by the policy.

The policy also requires any Director who is affiliated with a prospective vendor, paid consultant, or grantee to abstain from voting with regard to any transaction with financial consequences to OneJustice involved that person or entity and, after disclosing his or her interest, to leave the room during discussion and while the vote is taken. At Board meetings, the Chair routinely reminds Board members about the policy and the conflicts requirement before any votes are taken involving transactions with financial consequences to OneJustice. The minutes reflect the Board's actions were in compliance with the policy when any such votes are taken.

Name of the organization
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The OneJustice Board delegated to its Executive Committee the review of executive compensation. The Executive Committee is comprised of board members, all of whom are independent persons. The CEO was not involved in the compensation review and approval process.

In its evaluation, the Executive Committee reviewed comparable executive compensation packages in the broader nonprofit sector, as well as the legal services nonprofit sector more specifically. The Board reaffirmed the Committee's determinations about executive compensation when it approved the organization's budget. The Board ensures on an ongoing basis that the CEO's pay continues to abide by market standards.

Form 990, Part VI, Section C, Line 19:

OneJustice provides the financial information from its annual audit and the Form 990 to the public online at www.onejustice.org. OneJustice also states on the website that it will share the conflict of interest policy, whistleblower policy, audit and Form 990 directly with anyone who submits an email request for the documents. OneJustice also provides its Form 990, audit, and financial information to GuideStar; OneJustice has also earned the Gold GuideStar Exchange Seal in recognition of its commitment to transparency.