#### Extended to May 15, 2023

### 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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990 for instructions and the latest information. ax year beginning JUL 1 , 2021 and ending JUN 30 . and ending JUN 30

Open to Public Inspection

| A                       | For the             | $\simeq$ 2021 calendar year, or tax year beginning $$ JUL $$ $$ 1 , $$ $$ $$ $$ $$ 2 $$ $$ 2 $$ $$ $$ and ending                   | JUN 30, 2022                   |  |
|-------------------------|---------------------|--|--------------------------------|--|
| В                       | Check if applicable | C Name of organization   | D Employer identif             | ication number                               |
| Г                       | Addres              | OneJustice   |                                |  |
|                         | Name<br>change      |  | 94-25894                       | .23  |
| L                       | Initial<br>return   | Number and street (or P.O. box if mail is not delivered to street address) Room/s  |                                |  |
|                         | Final<br>return/    | 548 Market Street 2740   | 0 (415) 83                     | 4-0100                                       |
| _                       | termin<br>ated      | City or town, state or province, country, and ZIP or foreign postal code   | <b>G</b> Gross receipts \$     | 3,641,376.                                   |
| L                       | Ameno               | Dan Flancisco, CA Jaioa  | H(a) Is this a group r         |  |
|                         | Applic tion         |  | for subordinates               | s? Yes X No                                  |
|                         | pendir              | same as C above  | H(b) Are all subordinates i    | included? Yes No                             |
|                         |                     |  | 527 If "No," attach a          | a list. See instructions                     |
|                         |                     | e:▶ www.onejustice.org   | H(c) Group exemption           |  |
|                         |                     |  | 'ear of formation: $1979$      | <b>vi</b> State of legal domicile: <b>CA</b> |
| P                       |                     | Summary  |                                |  |
| ø                       | 1                   | Briefly describe the organization's mission or most significant activities: Strength   | en the legal                   | services                                     |
| Activities & Governance |                     | sector's expertise and capacity to advance j   |                                | _  |
| ern                     | 1                   | Check this box 🕨 📖 if the organization discontinued its operations or disposed of r  | nore than 25% of its net a     |  |
| હુ                      |                     |  | <u>3</u>                       | 19   |
| ∞<br>∞                  |                     | Number of independent voting members of the governing body (Part VI, line 1b)  |                                | 19   |
| ies                     |                     | Total number of individuals employed in calendar year 2021 (Part V, line 2a)   |                                | 15   |
| ፷                       |                     | Total number of volunteers (estimate if necessary)   |                                | 125  |
| Ac                      |                     | Total unrelated business revenue from Part VIII, column (C), line 12   |                                | 0.   |
|                         | b                   | Net unrelated business taxable income from Form 990-T, Part I, line 11   |                                |  |
|                         |                     | 0  | Prior Year 2,418,595.          | Current Year                                 |
| ne                      |                     | Contributions and grants (Part VIII, line 1h)  |                                | 3,219,685.                                   |
| Revenue                 |                     | Program service revenue (Part VIII, line 2g)   | 202,466.<br>671.               | 258,949.<br>1,628.                           |
| Be                      |                     | Investment income (Part VIII, column (A), lines 3, 4, and 7d)  | 46,408.                        | 58,127.                                      |
|                         | 1                   | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)   | 2,668,140.                     | 3,538,389.                                   |
|                         |                     | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)   | 2,000,140.                     | 3,330,309.                                   |
|                         |                     | Grants and similar amounts paid (Part IX, column (A), lines 1-3)   | 0.                             | 0.   |
|                         | 1                   | Benefits paid to or for members (Part IX, column (A), line 4)  | 1,500,945.                     |  |
| ses                     | 15                  | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  | 15,000.                        | 0.   |
| Expenses                | loa<br>h            | Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  332,800. | 13,000.                        |  |
| Ä                       | 17                  | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)   | 796,969.                       | 936,371.                                     |
|                         |                     | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)  | 2,312,914.                     |  |
|                         |                     | Revenue less expenses. Subtract line 18 from line 12   | 355,226.                       |  |
| JC<br>Pool              | 3 13                | Heverlue less expenses. Subtract line 10 from line 12  | Beginning of Current Year      | End of Year                                  |
| ets                     | 20                  | Total assets (Part X, line 16)   | 2,608,660.                     | 3,200,276.                                   |
| ASS                     | 21                  | Total liabilities (Part X, line 26)  | 790,752.                       | 438,862.                                     |
| Net Assets or           | 22                  | Net assets or fund balances. Subtract line 21 from line 20   | 1,817,908.                     | 2,761,414.                                   |
| P                       | art II              | Signature Block  |                                |  |
| _                       |                     | Ities of perjury, I declare that I have examined this return, including accompanying schedules and sta                             | atements, and to the best of m | ny knowledge and belief, it is               |
| true                    | , correc            | t, and complete. Declaration of preparer (other than officer) is based on all information of which prep                            | arer has any knowledge.        |  |
|                         |                     |  |                                |  |
| Sig                     | ın                  | Signature of officer   | Date                           |  |
| He                      |                     | ▶ Phil Hwang, CEO  |                                |  |
|                         |                     | Type or print name and title   |                                |  |
|                         |                     | Print/Type preparer's name Preparer's signature  | Date Check                     | PTIN   |
| Pai                     | d                   | Sean E. Cain, CPA  | self-employ                    | <sub>yed</sub> 12986                         |
| Pre                     | parer               | Firm's name Harrington Group, CPAs, LLP  | Firm's EIN ▶                   | 95-4557617                                   |
| Use                     | Only                | Firm's address 2698 Mataro Street  |                                |  |
|                         |                     | Pasadena, CA 91107   | Phone no. (6                   |  |
| Ма                      | y the IF            | RS discuss this return with the preparer shown above? See instructions   | <del></del>                    | X Yes No                                     |

| Par | 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's mission is to strengthen the legal services sector's  |
|     | expertise and capacity to advance justice and equity.  |
|     |  |
|     |  |
| 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 \$1,079,934 • including grants of \$) (Revenue \$) (Revenue \$)  |
|     | Pro Bono Justice Program:  |
|     | During Fiscal Year 21-22, OneJustice brought together more than 60   |
|     | legal aid organizations, law firms and corporations to address emerging  |
|     | needs, highlight successful pro bono models, and strategize on the   |
|     | effective management and strategic deployment of volunteer resources.  |
|     | This included OneJustice's annual Pro Bono Conference, webinars, and   |
|     | strategy meetings throughout the year, which addressed topics, such as   |
|     | language justice and pro bono, housing pro bono opportunities, legal   |
|     | name change and gender marker change clinics, and hybrid pro bono work.  |
|     | The law firms and corporations supported by OneJustice contributed a   |
|     | majority of the hours donated to legal aid programs throughout   |
|     | California.  |
| 4b  | (Code:) (Expenses \$ 785,809 . including grants of \$) (Revenue \$) (Revenue \$  |
| 40  | Healthy Nonprofits Program:  |
|     | During Fiscal Year 21-22, OneJustice provided training, resources, and   |
|     | consultations to over 100 legal services organizations that serve more   |
|     | than 500,000 individuals per year, with the goal of optimizing their   |
|     | performance and community impact.  |
|     | OneJustice completed the twelfth year of its Executive Fellowship  |
|     | program, an intensive 10-month program on nonprofit leadership and   |
|     | management. OneJustice trained leaders from 28 legal services  |
|     | organizations in California, Georgia, New Jersey, New York, and  |
|     | Washington state. 50% of these leaders identified as BIPOC and/or  |
|     | LGBTQIA+.  |
|     | OneJustice also provided in-depth support to many of California's  |
| 4-  |  |
| 4c  | (Code:) (Expenses \$   |
|     |  |
|     |  |
|     |  |
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|     |  |
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|     |  |
|     |  |
| 4d  | Other program services (Describe on Schedule O.)   |
|     | (Expenses \$\frac{\text{including grants of \$}}{\text{1.00 CF. FA2}}\) (Revenue \$  |
| 4e  | Total program service expenses ► 1,865,743.  |

# Form 990 (2021) 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  | 2   | X   |        |
| 3   | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for  |     | -25 |        |
| 3   | public office? If "Yes," complete Schedule C, Part I   | 3   |     | x      |
| 4   | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect   |     |     |        |
| •   | during the tax year? If "Yes," complete Schedule C, Part II  | 4   | Х   |        |
| 5   | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or   | _   |     |        |
| •   | similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III  | 5   |     | Х      |
| 6   | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to  |     |     |        |
|     | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I   | 6   |     | Х      |
| 7   | Did the organization receive or hold a conservation easement, including easements to preserve open space,  |     |     |        |
|     | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II   | 7   |     | Х      |
| 8   | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete   |     |     |        |
|     | Schedule D, Part III   | 8   |     | Х      |
| 9   | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for  |     |     |        |
|     | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?  |     |     |        |
|     | If "Yes," complete Schedule D, Part IV   | 9   |     | Х      |
| 10  | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments   |     |     |        |
|     | or in quasi endowments? If "Yes," complete Schedule D, Part V  | 10  |     | Х      |
| 11  | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,  |     |     |        |
|     | as applicable.   |     |     |        |
| а   | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,  |     |     |        |
|     | Part VI  | 11a | Х   |        |
| b   | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total   |     |     |        |
|     | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  | 11b |     | 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  |     |     | ٠,,    |
|     | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII   | 11c |     | Х      |
| d   | Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in  |     |     |        |
|     | Part X, line 16? If "Yes," complete Schedule D, Part IX  | 11d |     | X      |
| e   | 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  | 446 | Х   |        |
| 10- | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X   | 11f | 21  |        |
| ıza | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete  | 12a | Х   |        |
| h   | Schedule D, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year?  | IZa | -21 |        |
| b   | 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  |     | Х      |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States?  | 14a |     | Х      |
| b   | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,  |     |     |        |
|     | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000   |     |     |        |
|     | or more? If "Yes," complete Schedule F, Parts I and IV   | 14b |     | Х      |
| 15  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any  |     |     |        |
|     | foreign organization? If "Yes," complete Schedule F, Parts II and IV   | 15  |     | Х      |
| 16  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to   |     |     |        |
|     | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  | 16  |     | Х      |
| 17  | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,  |     |     |        |
|     | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions   | 17  |     | 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,"   | 10  |     |        |
| .5  | complete Schedule G, Part III  | 19  |     | x      |
| 20a | 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 |     |        |
| 21  | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or  |     |     |        |
|     | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  | 21  |     | Х      |
|     |  |     | 000 | (0004) |

# Form 990 (2021) 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        |                |     |             |  |  |
|          | Schedule L, Part I   | 25b            |     | Х           |  |  |
| 26       | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current              |                |     |             |  |  |
|          | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%                      |                |     |             |  |  |
|          | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II                           | 26             |     | X           |  |  |
| 27       | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,  |                |     |             |  |  |
|          | creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled  |                |     |             |  |  |
|          | entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III     | 27             |     | Х           |  |  |
| 28       | Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,       |                |     |             |  |  |
|          | instructions for applicable filing thresholds, conditions, and exceptions):  |                |     |             |  |  |
| а        | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>      |                |     |             |  |  |
| u        | "Yes," complete Schedule L, Part IV  | 28a            |     | X           |  |  |
| h        | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV                              | 28b            |     | X           |  |  |
|          | c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f                    |                |     |             |  |  |
| ·        | "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             |     | X           |  |  |
| 30       | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation  |                |     | ╁           |  |  |
| 00       | contributions? If "Yes," complete Schedule M   | 30             |     | X           |  |  |
| 31       | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I           | 31             |     | X           |  |  |
| 32       | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete             | <del>  •</del> |     | ┢▔          |  |  |
| UZ.      | Cohodulo N. Dort II  | 32             |     | X           |  |  |
| 33       | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations                   | - 02           |     | ╁           |  |  |
| 55       | 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           |     | <del></del> |  |  |
| <b>-</b> |  | 34             |     | х           |  |  |
| 35 2     | 211  | 35a            |     | X           |  |  |
|          | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity    | UJa            |     | <del></del> |  |  |
| b        | 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?   | 335            |     |             |  |  |
| 30       | If "Yes," complete Schedule R, Part V, line 2  | 36             |     | x           |  |  |
| 37       | Did the organization conduct more than 5% of its activities through an entity that is not a related organization             | 30             |     | <del></del> |  |  |
| 31       | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI                 | 37             |     | х           |  |  |
| 20       | Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?               | 31             |     |             |  |  |
| 38       |  | 20             | х   |             |  |  |
| Pai      | Note: All Form 990 filers are required to complete Schedule 0  t V Statements Regarding Other IRS Filings and Tax Compliance | 38             |     |             |  |  |
| L        | Check if Schedule O contains a response or note to any line in this Part V   |                |     |             |  |  |
|          | Shook if Ourloadio O contains a response of flote to any line in this fact v   |                | Yes | No          |  |  |
| 1.       | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable   |                | 162 | 140         |  |  |
|          | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable   |                |     |             |  |  |
|          | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming           |                |     |             |  |  |
| C        |  | 10             | Х   |             |  |  |
|          | (gambling) winnings to prize winners?  | 1c             |     | Ь           |  |  |

### OneJustice Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

|            |  |                | Yes | No         |  |  |  |  |  |  |
|------------|--|----------------|-----|------------|--|--|--|--|--|--|
| <b>2</b> 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 15  | 1              | 37  |            |  |  |  |  |  |  |
| 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.  Did the organization have unrelated business gross income of \$1,000 or more during the year? |                |     |            |  |  |  |  |  |  |
|            |  | 3a             |     | X          |  |  |  |  |  |  |
|            | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O  | 3b             |     |            |  |  |  |  |  |  |
| 48         | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a  | 4a             |     | x          |  |  |  |  |  |  |
| h          | financial account in a foreign country (such as a bank account, securities account, or other financial account)?   | <del>4</del> a |     |            |  |  |  |  |  |  |
| b          | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  |                |     |            |  |  |  |  |  |  |
| 5a         | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  | 5a             |     | х          |  |  |  |  |  |  |
|            | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?   | 5b             |     | Х          |  |  |  |  |  |  |
|            | If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  | 5c             |     |            |  |  |  |  |  |  |
|            | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit  |                |     |            |  |  |  |  |  |  |
|            | any contributions that were not tax deductible as charitable contributions?  | 6a             |     | Х          |  |  |  |  |  |  |
| b          | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts   |                |     |            |  |  |  |  |  |  |
|            | were not tax deductible?   | 6b             |     |            |  |  |  |  |  |  |
| 7          | Organizations that may receive deductible contributions under section 170(c).  |                |     |            |  |  |  |  |  |  |
| а          | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  | 7a             | Х   |            |  |  |  |  |  |  |
| b          | 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  |                |     | <u>-</u> _ |  |  |  |  |  |  |
|            | to file Form 8282?   | 7с             |     | X          |  |  |  |  |  |  |
|            | If "Yes," indicate the number of Forms 8282 filed during the year  | 7e             |     | Х          |  |  |  |  |  |  |
| е          | e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  |                |     |            |  |  |  |  |  |  |
| f          |  |                |     |            |  |  |  |  |  |  |
| g          |  |                |     |            |  |  |  |  |  |  |
|            | h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?   |                |     |            |  |  |  |  |  |  |
| 8          | 7 77 77  |                |     |            |  |  |  |  |  |  |
| 9          | sponsoring organization have excess business holdings at any time during the year?  N/A  Sponsoring organizations maintaining donor advised funds.   | 8              |     |            |  |  |  |  |  |  |
|            | 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   |                |     |            |  |  |  |  |  |  |
| b          | 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.   | 120            |     |            |  |  |  |  |  |  |
| а          | Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.                  | 13a            |     |            |  |  |  |  |  |  |
| h          | 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   |                |     |            |  |  |  |  |  |  |
| С          | Enter the amount of reserves on hand   |                |     |            |  |  |  |  |  |  |
|            | Did the organization receive any payments for indoor tanning services during the tax year?   | 14a            |     | X          |  |  |  |  |  |  |
|            | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O  | 14b            |     |            |  |  |  |  |  |  |
| 15         | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or  |                |     |            |  |  |  |  |  |  |
|            | excess parachute payment(s) during the year?   | 15             |     | Х          |  |  |  |  |  |  |
|            | If "Yes," see the instructions and file Form 4720, Schedule N.   |                |     |            |  |  |  |  |  |  |
| 16         | Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  | 16             |     | Х          |  |  |  |  |  |  |
|            | If "Yes," complete Form 4720, Schedule O.  |                |     |            |  |  |  |  |  |  |
| 17         | Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any   |                |     |            |  |  |  |  |  |  |
|            | activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? N/A  | 17             |     |            |  |  |  |  |  |  |
|            | If "Yes," complete Form 6069.  |                |     |            |  |  |  |  |  |  |

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

|     | Check if Schedule O contains a response or note to any line in this Part VI  |          |                                       |   |          | X    |  |  |  |
|-----|--|----------|---------------------------------------|---|----------|------|--|--|--|
| Sec | tion A. Governing Body and Management  |          |                                       |   |          |      |  |  |  |
|     | <del>, , , , , , , , , , , , , , , , , , , </del>  |          |                                       |   | Yes      | No   |  |  |  |
| 1a  | Enter the number of voting members of the governing body at the end of the tax year  | 1a       | 1                                     | 9   | 100      |      |  |  |  |
|     | If there are material differences in voting rights among members of the governing body, or if the governing  |          |                                       |   |          |      |  |  |  |
|     | body delegated broad authority to an executive committee or similar committee, explain on Schedule O.  |          |                                       |   |          |      |  |  |  |
| b   | Enter the number of voting members included on line 1a, above, who are independent   | 1b       | 1                                     | 9   |          |      |  |  |  |
| 2   | Did any officer, director, trustee, or key employee have a family relationship or a business relationship  |          |                                       |   |          |      |  |  |  |
| _   | officer, director, trustee, or key employee?   |          |                                       |   |          |      |  |  |  |
| 3   | Did the organization delegate control over management duties customarily performed by or under the   |          |                                       | . 2   |          |      |  |  |  |
| _   | of officers, directors, trustees, or key employees to a management company or other person?  |          | · · · · · · · · · · · · · · · · · · · | 3   |          | Х    |  |  |  |
| 4   | Did the organization make any significant changes to its governing documents since the prior Form 9  |          |                                       |   |          | Х    |  |  |  |
| 5   |  |          |                                       |   |          |      |  |  |  |
| 6   | Did the organization have members or stockholders?   |          |                                       |   |          | X    |  |  |  |
|     | Did the organization have members, stockholders, or other persons who had the power to elect or ap   |          |                                       | ·   —   |          |      |  |  |  |
|     | more members of the governing body?  |          |                                       | 7a  |          | Х    |  |  |  |
| b   | Are any governance decisions of the organization reserved to (or subject to approval by) members, si   |          |                                       | ·   ··-                                       |          |      |  |  |  |
| ~   |  |          |                                       | 7b  |          | Х    |  |  |  |
| 8   | persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the yea   | r hv the | following*                            | ·   |          |      |  |  |  |
|     | The governing body?  |          |                                       | 8a  | х        |      |  |  |  |
|     | Each committee with authority to act on behalf of the governing body?  |          |                                       |   | X        |      |  |  |  |
| 9   | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read   |          |                                       | \ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u> | +        |      |  |  |  |
| Ū   | 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 Re   |          |                                       | .   •   |          |      |  |  |  |
|     | and the state of the section of the state of | 707.00   |                                       |   | Yes      | No   |  |  |  |
| 10a | Did the organization have local chapters, branches, or affiliates?   |          |                                       | 10a   | +        | X    |  |  |  |
|     | If "Yes," did the organization have written policies and procedures governing the activities of such ch  |          |                                       | 100   |          |      |  |  |  |
| _   | and branches to ensure their operations are consistent with the organization's exempt purposes?  |          |                                       | 10b   |          |      |  |  |  |
| 11a | 1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?   |          |                                       |   |          |      |  |  |  |
|     | b Describe on Schedule O the process, if any, used by the organization to review this Form 990.  |          |                                       |   |          |      |  |  |  |
|     | Did the organization have a written conflict of interest policy? If "No," go to line 13  |          |                                       |   |          |      |  |  |  |
|     | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise  |          |                                       | 12a   | X        |      |  |  |  |
|     | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes  |          |                                       | ·   |          |      |  |  |  |
|     | on Schedule O how this was done  |          |                                       | 120   | X        |      |  |  |  |
| 13  | Did the organization have a written whistleblower policy?  |          |                                       |   | X        |      |  |  |  |
| 14  | Did the organization have a written document retention and destruction policy?   |          |                                       |   | X        |      |  |  |  |
| 15  | Did the process for determining compensation of the following persons include a review and approva   |          |                                       |   |          |      |  |  |  |
|     | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  |          | aoponaone                             |   |          |      |  |  |  |
| а   | The organization's CEO, Executive Director, or top management official   |          |                                       | 15a   | Х        |      |  |  |  |
|     | Other officers or key employees of the organization  |          |                                       |   |          | Х    |  |  |  |
| ~   | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.   |          |                                       | 102   |          |      |  |  |  |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen  | nent w   | ith a                                 |   |          |      |  |  |  |
|     | taxable entity during the year?  |          |                                       | 16a   |          | Х    |  |  |  |
| b   | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat  |          |                                       | 100   |          |      |  |  |  |
| ~   | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ  | -        | -                                     |   |          |      |  |  |  |
|     | exempt status with respect to such arrangements?   |          |                                       | 16b   |          |      |  |  |  |
| Sec | tion C. Disclosure   |          |                                       | . 102   |          |      |  |  |  |
| 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-A, if applicable), 990, ar  | nd 990   | -T (section 501(c)                    | (3)s onl                                      | v) avail | able |  |  |  |
| .5  | for public inspection. Indicate how you made these available. Check all that apply.  |          | . (0001.011.001(0)                    | (5)5 0111                                     | ,, avan  | 2210 |  |  |  |
|     | X Own website X Another's website X Upon request Other (explain  | on Sci   | nedule (0)                            |   |          |      |  |  |  |
| 19  | Describe on Schedule O whether (and if so, how) the organization made its governing documents, co  |          |                                       | and find                                      | ancial   |      |  |  |  |
| .5  | statements available to the public during the tax year.  |          |                                       | a, 10 11110                                   | 10101    |      |  |  |  |
| 20  | State the name, address, and telephone number of the person who possesses the organization's body  | nks an   | d records                             |   |          |      |  |  |  |
| _0  | The Organization - (415) 834-0100  | ino ai i |                                       |   |          |      |  |  |  |
|     | 548 Market Street 27400 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 the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

| (A) (B)   |                        | (C)                            |   |         |              |                                 | iout   | (D)                 | (E)                              | (F)                   |
|---|------------------------|--------------------------------|---|---------|--------------|---------------------------------|--------|---------------------|----------------------------------|-----------------------|
| Name and title                                  | Average                | (do                            | Position<br>(do not check more than one |         |              |                                 | one    | Reportable          | Reportable                       | Estimated             |
|   | hours per              | box                            | , unle                                  | ss pe   | rson i       | is bot                          | h an   | compensation        | compensation                     | amount of             |
|   | week                   | _                              | Jer an                                  | lu a u  | recio        | r/trus                          | lee)   | from                | from related                     | other<br>             |
|   | (list any<br>hours for | Individual trustee or director |   |         |              | _                               |        | the<br>organization | organizations<br>(W-2/1099-MISC/ | compensation from the |
|   | related                | 96 Or (                        | stee                                    |         |              | ısatec                          |        | (W-2/1099-MISC/     | 1099-NEC)                        | organization          |
|   | organizations          | truste                         | al tru                                  |         | yee          | educ                            |        | 1099-NEC)           | ,                                | and related           |
|   | below                  | vidual                         | Institutional trustee                   | Je.     | Key employee | Highest compensated<br>employee | ner    |                     |                                  | organizations         |
|   | line)                  | Indi                           | Insti                                   | Officer | Key          | High<br>emp                     | Former |                     |                                  |                       |
| (1) Phil Hwang                                  | 40.00                  |                                |   |         |              |                                 |        | 450 456             |                                  | 2 445                 |
| CEO   | 40.00                  |                                |   | Х       |              |                                 |        | 178,156.            | 0.                               | 3,447.                |
| (2) Gail Quan                                   | 40.00                  |                                |   |         |              |                                 |        | 122 254             |                                  | 01 650                |
| Director, Legal, Operations, People             | 40.00                  |                                |   |         |              | Х                               |        | 133,354.            | 0.                               | 21,659.               |
| (3) Sharon Bashan                               | 40.00                  |                                |   |         |              |                                 |        | 111 000             |                                  | 10 000                |
| Director, Pro Bono Justice Program              |                        |                                |   |         |              | Х                               |        | 111,990.            | 0.                               | 18,937.               |
| (4) Matthew Werdegar                            | 2.00                   |                                |   |         |              |                                 |        |                     |                                  | •                     |
| Chair   | 2 00                   | Х                              |   | Х       |              |                                 |        | 0.                  | 0.                               | 0.                    |
| (5) Rebecca Justice Lazarus                     | 2.00                   | ,,                             |   | ,,      |              |                                 |        |                     | 0                                | 0                     |
| Vice Chair, Secretary                           | 2 00                   | Х                              |   | Х       |              |                                 |        | 0.                  | 0.                               | 0.                    |
| (6) Rob Nolan                                   | 2.00                   | ,,                             |   | ,,      |              |                                 |        |                     | 0                                | 0                     |
| Treasurer                                       | 1 00                   | Х                              |   | Х       |              |                                 |        | 0.                  | 0.                               | 0.                    |
| (7) Christian Abasto                            | 1.00                   | ,,                             |   |         |              |                                 |        |                     | 0                                | 0                     |
| Board Member                                    | 1 00                   | Х                              |   |         |              |                                 |        | 0.                  | 0.                               | 0.                    |
| (8) Benjamin Adams                              | 1.00                   | X                              |   |         |              |                                 |        | 0.                  | 0                                | 0                     |
| Board Member                                    | 1.00                   | Α                              |   |         |              |                                 |        | 0.                  | 0.                               | 0.                    |
| (9) Sirena Castillo                             | 1.00                   | X                              |   |         |              |                                 |        | 0.                  | 0.                               | 0                     |
| Board Member (Start 2/2022)                     | 1.00                   | ^                              |   |         |              |                                 |        | 0.                  | 0.                               | 0.                    |
| (10) Jennifer Chaloemtiarana                    | 1.00                   | Х                              |   |         |              |                                 |        | 0.                  | 0.                               | 0.                    |
| Board Member                                    | 1.00                   | ^                              |   |         |              |                                 |        | 0.                  | 0.                               | <u> </u>              |
| (11) Danielle Coleman                           | 1.00                   | Х                              |   |         |              |                                 |        | 0.                  | 0.                               | 0.                    |
| Board Member (Start 10/2021) (12) Ethan Dettmer | 1.00                   | ^                              |   |         |              |                                 |        | 0.                  | 0.                               | <u> </u>              |
| Board Member                                    | 1.00                   | X                              |   |         |              |                                 |        | 0.                  | 0.                               | 0.                    |
| (13) Andrea Fitanides                           | 1.00                   | ^                              |   |         |              |                                 |        | 0.                  | 0.                               | <u></u>               |
| Board Member (Start 2/2022)                     | 1.00                   | X                              |   |         |              |                                 |        | 0.                  | 0.                               | 0.                    |
| (14) Vanessa Frank                              | 1.00                   | ^                              |   |         |              |                                 |        | 0.                  | 0.                               | <u></u>               |
| Board Member                                    | 1.00                   | х                              |   |         |              |                                 |        | 0.                  | 0.                               | 0.                    |
| (15) David Leeb                                 | 1.00                   |                                |   |         |              |                                 |        | <b>.</b>            | 0.                               |                       |
| Board Member                                    | 1.00                   | x                              |   |         |              |                                 |        | 0.                  | 0.                               | 0.                    |
| (16) Judi A. McManigal                          | 1.00                   |                                |   |         |              |                                 |        | 0.                  | 0.                               |                       |
| Board Member                                    | 1.50                   | x                              |   |         |              |                                 |        | 0.                  | 0.                               | 0.                    |
| (17) Max Ochoa                                  | 1.00                   | <del></del>                    |   |         |              |                                 |        |                     |                                  |                       |
| Board Member                                    |                        | x                              |   |         |              |                                 |        | 0.                  | 0.                               | 0.                    |
|   | I                      |                                |   |         | L            | _                               |        |                     | ÿ.                               | - 000                 |

| Form 990 (2021) OneJustic   |  |                                |                       |  |                         |                                 |             |   | 94-25   | 89   | 423                     | Р   | age 8          |
|---|--|--------------------------------|-----------------------|--|-------------------------|---------------------------------|-------------|---|---|------|-------------------------|---|----------------|
| Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) |  |                                |                       |  |                         |                                 |             |   |   |      |                         |   |                |
| (A)<br>Name and title   | (B) Average hours per week   | box                            | not c                 | Posi<br>heck in the ss per and a di          | ition<br>more<br>rson i | than<br>is bot                  | h an        | (D) (E)  Reportable Reportable compensation                 |   |      | (F) Estimated amount of |   |                |
|   | (list any<br>hours for<br>related<br>organizations<br>below<br>line) | Individual trustee or director | Institutional trustee | Officer                                      | key employee            | Highest compensated<br>employee | Former      | from<br>the<br>organization<br>(W-2/1099-MISC/<br>1099-NEC) | from related<br>organizations<br>(W-2/1099-MIS<br>1099-NEC) | 3    | com<br>fr<br>org<br>and | other<br>pensation the<br>anization<br>d relation | e<br>ion<br>ed |
| (18) Kyuli Oh<br>Board Member   | 1.00   | х                              |                       |  |                         |                                 |             | 0.  |   | 0.   |                         |   | 0.             |
| (19) Cindy Panuco   | 1.00   |                                |                       |  |                         |                                 |             |   |   | •    |                         |   | •              |
| Board Member  |  | Х                              |                       |  |                         |                                 |             | 0.  |   | 0.   |                         |   | 0.             |
| (20) Toby Rothschild<br>Board Member  | 1.00   | Х                              |                       |  |                         |                                 |             | 0.  |   | ٠0   |                         |   | 0.             |
| (21) Ellen Sueda  | 1.00   |                                |                       |  |                         |                                 |             | _   |   |      |                         |   |                |
| Board Member  | 1 00   | Х                              |                       |  |                         |                                 |             | 0.  |   | 0.   |                         |   | 0.             |
| (22) Rachel Williams Board Member   | 1.00   | Х                              |                       |  |                         |                                 |             | 0.  |   | 0.   |                         |   | 0.             |
|   |  |                                |                       |  |                         |                                 |             |   |   |      |                         |   |                |
|   |  | H                              |                       |  |                         |                                 |             |   |   |      |                         |   |                |
| 1b Subtotal   |  | <u> </u>                       | <u> </u>              | <u></u>                                      |                         | <u> </u>                        | <u> </u>    | 423,500.  |   | 0.   | 4                       | 4,0   |                |
| c Total from continuation sheets to Part VI<br>d Total (add lines 1b and 1c)                                    |  |                                |                       |  |                         |                                 | <b>&gt;</b> | 423,500.  |   | 0.   | 4                       | 4,0   | 0.<br>43.      |
| 2 Total number of individuals (including but n compensation from the organization                               |  |                                |                       |  |                         |                                 | no r        | received more than \$100                                    | 0,000 of reportabl  | е    |                         |   | 3              |
|   |  |                                |                       |  |                         |                                 |             |   |   |      |                         | Yes   | No             |
| 3 Did the organization list any former officer,<br>line 1a? If "Yes," complete Schedule J for s                 |  |                                | -                     |  | -                       |                                 | _           | -   | •   |      | 3                       |   | Х              |
| 4 For any individual listed on line 1a, is the su and related organizations greater than \$150                  | ım of reportab   | le co                          | omp                   | ensa   | ation                   | n and                           | d ot        | her compensation from                                       | the organization  |      | 4                       | X   |                |
| 5 Did any person listed on line 1a receive or a   | accrue compe   | nsat                           | ion f                 | from   | any                     | unr/                            | elat        | ted organization or indiv                                   | idual for services  |      | 5                       |   | Х              |
| rendered to the organization? If "Yes," com<br>Section B. Independent Contractors                               | piete Scriedur   | <del>e</del>                   | 01 30                 | ист  | pers                    | SOIT .                          |             |   |   |      | 3                       |   |                |
| Complete this table for your five highest co<br>the organization. Report compensation for                       |  |                                |                       |  |                         |                                 |             |   |   | pens | ation f                 | rom   |                |
| (A) Name and business   |  |                                | ONI                   |  | VICIT                   | OI W                            |             | (B)  Description of s                                       |   |      | (Compe                  |   | n              |
| - Name and business   | address  | 11/                            | זאזע                  | <u>.                                    </u> |                         |                                 |             | Description of  | SCI VICES   |      | ОПРС                    | 134110  |                |
|   |  |                                |                       |  |                         |                                 |             |   |   |      |                         |   |                |
|   |  |                                |                       |  |                         |                                 |             |   |   |      |                         |   |                |
|   |  |                                |                       |  |                         |                                 |             |   |   |      |                         |   |                |
|   |  |                                |                       |  |                         |                                 |             |   |   |      |                         |   |                |
| 2 Total number of independent contractors (i  | ncludina but n   | ot li                          | mite                  | d to   | tho                     | se li                           | ster        | d above) who received n                                     | nore than   |      |                         |   |                |
| \$100,000 of compensation from the organi   | •  |                                |                       | -5   |                         | 0                               |             | ,   |   |      |                         |   |                |

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) 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 416,960. c Fundraising events ..... 1c 1d d Related organizations 1,986,607. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 816,118. similar amounts not included above 1f 7,932. g Noncash contributions included in lines 1a-1f 1g \$ 3,219,685. h Total. Add lines 1a-1f **Business Code** 900099 129,630. 2 a Fee for service 129,630. Program Service Revenue 129,319. b Workshops & conference 900099 129,319. С f All other program service revenue 258,949. g Total. Add lines 2a-2f. Investment income (including dividends, interest, and 1,628. 1,628. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties ..... (i) Real (ii) Personal 57,054. 6 a Gross rents 0. **b** Less: rental expenses ... 57,054. c Rental income or (loss) 57,054. 57,054. 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 and sales expenses 7b c Gain or (loss) \_\_\_\_\_\_7c d Net gain or (loss) 8 a Gross income from fundraising events (not including \$416,960. ofcontributions reported on line 1c). See  $|_{8a}|_{102,987}$ Part IV, line 18 8b 102,987. **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** 11 a Other income 900099 1,073. 1,073. b d All other revenue 1,073. e Total. Add lines 11a-11d 3,538,389. 258,949. Total revenue. See instructions 12

### Form 990 (2021) 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).

|       | Check if Schedule O contains a respon   | so or note to any line in | this Dart IV    | , ,              | X                      |
|-------|---|---------------------------|-----------------|------------------|------------------------|
| Do    | not include amounts reported on lines 6b,   | (A)                       | (B)             | (C)              | (D)                    |
|       | 8b, 9b, and 10b of Part VIII.   | Total expenses            | Program service | Management and   | Fundraising            |
|       |   |                           | expenses        | general expenses | 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   |                           |                 |                  |                        |
|       | individuals. See Part IV, lines 15 and 16   |                           |                 |                  |                        |
| 4     | Benefits paid to or for members   |                           |                 |                  |                        |
| 5     | Compensation of current officers, directors,  |                           |                 |                  |                        |
|       | trustees, and key employees   | 200,905.                  | 104,470.        | 68,308.          | 28,127.                |
| 6     | Compensation not included above to disqualified   |                           | •               |                  | <u> </u>               |
| •     | persons (as defined under section 4958(f)(1)) and   |                           |                 |                  |                        |
|       |   |                           |                 |                  |                        |
| 7     |   | 1,151,800.                | 882,854.        | 136,073.         | 132,873.               |
| 7     | Other salaries and wages  | ±,±3±,000•                | 004,034.        | 130,073.         | 134,013.               |
| 8     | Pension plan accruals and contributions (include  | 36,000.                   | 27 005          | 2 [1 [           | 1 600                  |
| _     | section 401(k) and 403(b) employer contributions)   |                           | 27,805.         | 3,515.           | 4,680.                 |
| 9     | Other employee benefits   | 134,805.                  | 104,153.        | 13,128.          | 17,524.                |
| 10    | Payroll taxes   | 135,002.                  | 100,744.        | 16,480.          | 17,778.                |
| 11    | Fees for services (nonemployees):   |                           |                 |                  |                        |
| а     | Management  |                           |                 |                  |                        |
| b     | Legal   |                           |                 |                  |                        |
|       | Accounting  | 70,804.                   |                 | 70,804.          | _                      |
|       | Lobbying  |                           |                 |                  |                        |
|       | Professional fundraising services. See Part IV, line 17   |                           |                 |                  |                        |
|       | Investment management fees  |                           |                 |                  |                        |
|       | Other. (If line 11g amount exceeds 10% of line 25,  |                           |                 |                  |                        |
| 9     | column (A), amount, list line 11g expenses on Sch O.)   | 335,139.                  | 293,481.        | 11,040.          | 30.618.                |
| 12    | Advertising and promotion   | 1,675.                    | 105.            | 1,560.           | 30,618.                |
| 13    |   | 72,592.                   | 47,822.         | 6,683.           | 18,087.                |
|       | Office expenses   | 62,796.                   | 32,857.         | 14,273.          | 15,666.                |
| 14    | Information technology  | 324,715.                  | 232,320.        | 46,111.          | 46,284.                |
| 15    | Royalties   | 324,713.                  | 252,520.        | 40,111.          | 40,204.                |
| 16    | Occupancy   | 7,453.                    | 6,575.          | 213.             | 665.                   |
| 17    | Travel  | 7,433.                    | 0,373.          | 213.             | 005.                   |
| 18    | Payments of travel or entertainment expenses  |                           |                 |                  |                        |
|       | for any federal, state, or local public officials   | 661                       | 0.50            | 411              |                        |
| 19    | Conferences, conventions, and meetings  | 661.                      | 250.            | 411.             |                        |
| 20    | Interest  |                           |                 |                  |                        |
| 21    | Payments to affiliates  |                           |                 |                  | _                      |
| 22    | Depreciation, depletion, and amortization   |                           | _               |                  |                        |
| 23    | Insurance   | 10,011.                   | 7,468.          | 1,222.           | 1,321.                 |
| 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     | Dues and fees   | 24,357.                   | 10,475.         | 4,799.           | 9,083.                 |
| b     | In kind materials   | 7,932.                    |                 |                  | 7,932.                 |
| С     | Meals and entertainment   | 7,803.                    | 5,817.          | 894.             | 1,092.                 |
| d     | Training  | 4,250.                    | 3,749.          | 122.             | 379.                   |
|       | All other expenses  | 6,183.                    | 4,798.          | 704.             | 681.                   |
| 25    | Total functional expenses. Add lines 1 through 24e  | 2,594,883.                | 1,865,743.      | 396,340.         | 332,800.               |
| 26    | Joint costs. Complete this line only if the organization  | -                         | -               | -                | <u> </u>               |
|       | reported in column (B) joint costs from a combined  |                           |                 |                  |                        |
|       | educational campaign and fundraising solicitation.  |                           |                 |                  |                        |
|       | Check here if following SOP 98-2 (ASC 958-720)  |                           |                 |                  |                        |
| 13201 | 0 12-09-21  |                           |                 |                  | Form <b>990</b> (2021) |

### Form 990 (2021) Part X Balance Sheet

| Pa                          | IL A | Dalance Sneet                                     |                                       |                       |                                 |     |                           |
|-----------------------------|------|---|---------------------------------------|-----------------------|---------------------------------|-----|---------------------------|
|                             |      | Check if Schedule O contains a response or        | note to a                             | y line in this Part X |                                 |     |                           |
|                             |      |   |                                       |                       | <b>(A)</b><br>Beginning of year |     | <b>(B)</b><br>End of year |
|                             | 1    | Cash - non-interest-bearing                       |                                       |                       | 870,813.                        | 1   | 740,204.                  |
|                             | 2    | Savings and temporary cash investments            |                                       |                       | 996,359.                        | 2   | 1,296,667.                |
|                             | 3    | Pledges and grants receivable, net                |                                       |                       | 512,030.                        | 3   | 752,211.                  |
|                             | 4    | Accounts receivable, net                          |                                       |                       | 205,529.                        | 4   | 380,450.                  |
|                             | 5    | Loans and other receivables from any currer       |                                       |                       | 200,0230                        | _   | 300,2301                  |
|                             |      | trustee, key employee, creator or founder, su     |                                       |                       |                                 |     |                           |
|                             |      | controlled entity or family member of any of      |                                       |                       |                                 | 5   |                           |
|                             | 6    | Loans and other receivables from other disq       |                                       |                       | Ŭ                               |     |                           |
|                             | "    | under section 4958(f)(1)), and persons descr      |                                       | 6                     |                                 |     |                           |
| S                           | 7    | Notes and loans receivable, net                   |                                       | F                     |                                 | 7   |                           |
| Assets                      | 8    | Inventories for sale or use                       |                                       |                       |                                 | 8   |                           |
| As                          | 9    | Prepaid expenses and deferred charges             |                                       |                       | 16,227.                         | 9   | 23,042.                   |
|                             |      | Land, buildings, and equipment: cost or other     |                                       |                       |                                 |     |                           |
|                             | 104  | basis. Complete Part VI of Schedule D             | I                                     | 16,847.               |                                 |     |                           |
|                             | h    | Less: accumulated depreciation                    |                                       | 16,847.               | 0.                              | 10c | 0.                        |
|                             | 11   | Investments - publicly traded securities          |                                       | •                     | 11                              | •   |                           |
|                             | 12   | Investments - other securities. See Part IV, li   |                                       |                       |                                 | 12  |                           |
|                             | 13   | Investments - program-related. See Part IV, II    |                                       | 13                    |                                 |     |                           |
|                             | 14   | Intangible assets                                 |                                       |                       | 14                              |     |                           |
|                             | 15   | Other assets. See Part IV, line 11                | 7,702.                                | 15                    | 7,702.                          |     |                           |
|                             | 16   | Total assets. Add lines 1 through 15 (must e      |                                       |                       | 2,608,660.                      | 16  | 3,200,276.                |
|                             | 17   | Accounts payable and accrued expenses             |                                       |                       | 304,159.                        | 17  | 336,871.                  |
|                             | 18   | Grants payable                                    | · · · · · · · · · · · · · · · · · · · | 18                    | ,                               |     |                           |
|                             | 19   | Deferred revenue                                  | 111,581.                              | 19                    | 101,991.                        |     |                           |
|                             | 20   | Tax-exempt bond liabilities                       |                                       |                       | ·                               | 20  | -                         |
|                             | 21   | Escrow or custodial account liability. Comple     |                                       |                       |                                 | 21  |                           |
| Ś                           | 22   | Loans and other payables to any current or t      |                                       |                       |                                 |     |                           |
| Liabilities                 |      | trustee, key employee, creator or founder, su     |                                       |                       |                                 |     |                           |
| abi                         |      | controlled entity or family member of any of      |                                       |                       |                                 | 22  |                           |
| =                           | 23   | Secured mortgages and notes payable to ur         |                                       |                       |                                 | 23  |                           |
|                             | 24   | Unsecured notes and loans payable to unrel        |                                       |                       | 375,012.                        | 24  | 0.                        |
|                             | 25   | Other liabilities (including federal income tax   |                                       |                       |                                 |     |                           |
|                             |      | parties, and other liabilities not included on li |                                       |                       |                                 |     |                           |
|                             |      | of Schedule D                                     |                                       |                       |                                 | 25  |                           |
|                             | 26   | Total liabilities. Add lines 17 through 25        |                                       |                       | 790,752.                        | 26  | 438,862.                  |
| <u> </u>                    |      | Organizations that follow FASB ASC 958,           | check he                              | e 🕨 X                 |                                 |     |                           |
| ĕ                           |      | and complete lines 27, 28, 32, and 33.            |                                       |                       |                                 |     |                           |
| lan                         | 27   | Net assets without donor restrictions             |                                       |                       | 774,676.                        | 27  | 1,047,336.                |
| B                           | 28   | Net assets with donor restrictions                |                                       | <u></u>               | 1,043,232.                      | 28  | 1,714,078.                |
| ů                           |      | Organizations that do not follow FASB AS          | C 958, ch                             | eck here 🕨 🗌          |                                 |     |                           |
| Ē                           |      | and complete lines 29 through 33.                 |                                       |                       |                                 |     |                           |
| ts o                        | 29   | Capital stock or trust principal, or current fur  | nds                                   |                       |                                 | 29  |                           |
| se                          | 30   | Paid-in or capital surplus, or land, building, o  | r equipme                             | nt fund               |                                 | 30  |                           |
| Net Assets or Fund Balances | 31   | Retained earnings, endowment, accumulate          | d income,                             | or other funds        |                                 | 31  |                           |
| Se                          | 32   | Total net assets or fund balances                 |                                       |                       | 1,817,908.                      | 32  | 2,761,414.                |
|                             | 33   | Total liabilities and net assets/fund balances    |                                       |                       | 2,608,660.                      | 33  | 3,200,276.                |

Form **990** (2021)

Form 990 (2021) One Justice 94-2589423 Page 12

| Pa               | rt XI Reconciliation of Net Assets   |            |                            |            |            |  |  |
|------------------|--|------------|----------------------------|------------|------------|--|--|
|                  | Check if Schedule O contains a response or note to any line in this Part XI  |            |                            |            |            |  |  |
| 1<br>2<br>3      | Total revenue (must equal Part VIII, column (A), line 12)  Total expenses (must equal Part IX, column (A), line 25)  Revenue less expenses. Subtract line 2 from line 1  | 1 2 3      | 3,53<br>2,59<br>94<br>1,81 | 4,8<br>3,5 | 83.<br>06. |  |  |
| 4<br>5<br>6<br>7 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))  Net unrealized gains (losses) on investments  Donated services and use of facilities  Investment expenses  7  |            |                            |            |            |  |  |
| 8<br>9<br>10     | Prior period adjustments  Other changes in net assets or fund balances (explain on Schedule O)  9  |            |                            |            |            |  |  |
| Pai              | column (B)) rt XII Financial Statements and Reporting  | 10         | 2,76                       | 1,4        | 14.        |  |  |
|                  | Check if Schedule O contains a response or note to any line in this Part XII   |            |                            |            |            |  |  |
| 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 on Schedule   | _          |                            | Yes        | No         |  |  |
| 2a               | Were the organization's financial statements compiled or reviewed by an independent accountant?  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 |            |                            |            |            |  |  |
|                  | Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat consolidated basis, or both:  X Separate basis  Consolidated basis  Both consolidated and separate basis                                 | e basis,   | 2b                         | X          |            |  |  |
| С                | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain on Sch          |            | 2c                         | Х          |            |  |  |
|                  | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir<br>Act and OMB Circular A-133?   | ngle Audit | За                         |            | X          |  |  |
| b                | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why on Schedule O and describe any steps taken to undergo such audits  |            | 3b                         |            |            |  |  |

Form **990** (2021)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

#### **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

Name of the organization Employer identification number OneJustice 94-2589423 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. 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 ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

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

(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) 2017        | <b>(b)</b> 2018                       | (c) 2019               | (d) 2020           | (e) 2021           | (f) Total               |  |  |  |  |  |
| 1    | Gifts, grants, contributions, and  |                 |                                       |                        |                    |                    |                         |  |  |  |  |  |
|      | membership fees received. (Do not  |                 |                                       |                        |                    |                    |                         |  |  |  |  |  |
|      | include any "unusual grants.")   | 3,298,340.      | 1,698,184.                            | 2,485,151.             | 2,418,595.         | 3,219,685.         | 13,119,955.             |  |  |  |  |  |
| 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   | 3,298,340.      | 1,698,184.                            | 2,485,151.             | 2,418,595.         | 3,219,685.         | 13,119,955.             |  |  |  |  |  |
| 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)   |                 |                                       |                        |                    |                    |                         |  |  |  |  |  |
|      | Public support. Subtract line 5 from line 4.                                 |                 |                                       |                        |                    |                    | 13,119,955.             |  |  |  |  |  |
|      | Section B. Total Support   |                 |                                       |                        |                    |                    |                         |  |  |  |  |  |
|      | ndar year (or fiscal year beginning in) 🕨                                    | <b>(a)</b> 2017 | <b>(b)</b> 2018                       | (c) 2019               | (d) 2020           | (e) 2021           | (f) Total               |  |  |  |  |  |
|      | Amounts from line 4  | 3,298,340.      | 1,698,184.                            | 2,485,151.             | 2,418,595.         | 3,219,685.         | 13,119,955.             |  |  |  |  |  |
| 8    | Gross income from interest,  |                 |                                       |                        |                    |                    |                         |  |  |  |  |  |
|      | dividends, payments received on  |                 |                                       |                        |                    |                    |                         |  |  |  |  |  |
|      | securities loans, rents, royalties,  |                 | <b>500</b>                            | 2 540                  | 45 050             | F0 600             | 110 000                 |  |  |  |  |  |
|      | and income from similar sources  | 552.            | 783.                                  | 3,742.                 | 47,079.            | 58,682.            | 110,838.                |  |  |  |  |  |
| 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   |                 | 1 510                                 | E2 042                 |                    | 1 072              | EE 42E                  |  |  |  |  |  |
|      | assets (Explain in Part VI.)   |                 | 1,519.                                | 52,843.                |                    | 1,0/3.             | 55,435.                 |  |  |  |  |  |
| 11   | •••  |                 | ,                                     |                        |                    | 1                  | 13,286,228.             |  |  |  |  |  |
| 12   | Gross receipts from related activities,                                      |                 |                                       |                        |                    |                    | ,915,096.               |  |  |  |  |  |
| 13   | First 5 years. If the Form 990 is for th                                     | -               | rst, second, third,                   | fourth, or fifth tax y | ear as a section t | 001(c)(3)          |                         |  |  |  |  |  |
| 800  | organization, check this box and stop<br>etion C. Computation of Publ        |                 | roontago                              |                        |                    |                    | <u></u>                 |  |  |  |  |  |
|      | -  |                 |                                       | actume (fl)            |                    | 14                 | 98.75 %                 |  |  |  |  |  |
|      | Public support percentage for 2021 (   |                 |                                       |                        |                    | 15                 | $\frac{98.75}{91.35}$ % |  |  |  |  |  |
| 15   | Public support percentage from 2020<br>33 1/3% support test - 2021. If the o |                 |                                       |                        |                    |                    | ,,,                     |  |  |  |  |  |
| 100  | stop here. The organization qualifies  | •               |                                       | •                      |                    | •                  |                         |  |  |  |  |  |
| h    | 33 1/3% support test - 2020. If the  |                 |                                       |                        |                    |                    |                         |  |  |  |  |  |
|      | and stop here. The organization qual   |                 |                                       |                        |                    |                    |                         |  |  |  |  |  |
| 172  | 10% -facts-and-circumstances tes   |                 |                                       |                        |                    |                    |                         |  |  |  |  |  |
| 176  | and if the organization meets the fact                                       | -               |                                       |                        |                    |                    |                         |  |  |  |  |  |
|      | meets the facts-and-circumstances to   |                 | ·                                     | -                      | •                  | •                  | <b>.</b> .              |  |  |  |  |  |
| h    | 10% -facts-and-circumstances tes   | -               | · · · · · · · · · · · · · · · · · · · |                        | -                  | I7a and line 15 is |                         |  |  |  |  |  |
|      | more, and if the organization meets the                                      | _               |                                       |                        |                    |                    | 10/0 01                 |  |  |  |  |  |
|      | 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   | ction A. Public Support   | siow, picase com           | piete i uit ii.j          |                      |                    |                     |           |
|------|---|----------------------------|---------------------------|----------------------|--------------------|---------------------|-----------|
|      | endar year (or fiscal year beginning in)                                  | (a) 2017                   | <b>(b)</b> 2018           | (c) 2019             | (d) 2020           | (e) 2021            | (f) Total |
|      | Gifts, grants, contributions, and   |                            |                           | , ,                  |                    |                     | ,         |
|      | membership fees received. (Do not   |                            |                           |                      |                    |                     |           |
|      | include any "unusual grants.")  |                            |                           |                      |                    |                     |           |
| 2    | Gross receipts from admissions,   |                            |                           |                      |                    |                     |           |
|      | merchandise sold or services per-   |                            |                           |                      |                    |                     |           |
|      | formed, or facilities furnished in  |                            |                           |                      |                    |                     |           |
|      | any activity that is related to the organization's tax-exempt purpose     |                            |                           |                      |                    |                     |           |
| 3    | Gross receipts from activities that                                       |                            |                           |                      |                    |                     |           |
| _    | are not an unrelated trade or bus-  |                            |                           |                      |                    |                     |           |
|      | iness under section 513   |                            |                           |                      |                    |                     |           |
| 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   |                            |                           |                      |                    |                     |           |
| 6    | Total. Add lines 1 through 5  |                            |                           |                      |                    |                     |           |
|      | 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.)                           |                            |                           |                      |                    |                     |           |
|      | ction B. Total Support  |                            |                           |                      |                    |                     |           |
| Cale | endar year (or fiscal year beginning in) 🖊                                | (a) 2017                   | <b>(b)</b> 2018           | (c) 2019             | (d) 2020           | (e) 2021            | (f) Total |
| 9    | Amounts from line 6   |                            |                           |                      |                    |                     |           |
|      | Gross income from interest,   |                            |                           |                      |                    |                     |           |
|      | dividends, payments received on   |                            |                           |                      |                    |                     |           |
|      | securities loans, rents, royalties, and income from similar sources       |                            |                           |                      |                    |                     |           |
| ŀ    | Unrelated business taxable income   |                            |                           |                      |                    |                     |           |
|      | (less section 511 taxes) from businesses                                  |                            |                           |                      |                    |                     |           |
|      | acquired after June 30, 1975  |                            |                           |                      |                    |                     |           |
|      | Add lines 10a and 10b   |                            |                           |                      |                    |                     |           |
|      | Net income from unrelated business  |                            |                           |                      |                    |                     |           |
|      | activities not included on line 10b,                                      |                            |                           |                      |                    |                     |           |
|      | whether or not the business is regularly carried on                       |                            |                           |                      |                    |                     |           |
| 12   | Other income. Do not include gain   |                            |                           |                      |                    |                     |           |
|      | or loss from the sale of capital assets (Explain in Part VI.)             |                            |                           |                      |                    |                     |           |
| 13   | Total support. (Add lines 9, 10c, 11, and 12.)                            |                            |                           |                      |                    |                     |           |
| 14   | First 5 years. If the Form 990 is for th                                  | e organization's f         | irst, second, third,      | fourth, or fifth tax | year as a section  | 501(c)(3) organizat | tion,     |
|      | check this box and stop here  |                            |                           |                      |                    |                     |           |
| Se   | ction C. Computation of Publi   | c Support Pe               | ercentage                 |                      |                    |                     |           |
| 15   | Public support percentage for 2021 (li                                    | ne 8, column (f),          | divided by line 13,       | column (f))          |                    | 15                  | %         |
|      | Public support percentage from 2020                                       |                            |                           |                      |                    | 16                  | %         |
|      | ction D. Computation of Inves   |                            |                           |                      |                    |                     |           |
|      | Investment income percentage for 20                                       |                            |                           |                      |                    | 17                  | %         |
|      | Investment income percentage from 2                                       |                            |                           |                      |                    | 18                  | %         |
| 19   | a 33 1/3% support tests - 2021. If the                                    | organization did r         | not check the box         | on line 14, and line | e 15 is more than  | 33 1/3%, and line   | 17 is not |
|      | more than 33 1/3%, check this box ar                                      | nd <b>stop here.</b> The   | organization qual         | fies as a publicly s | supported organiz  | ation               | ▶□        |
| ł    | 33 1/3% support tests - 2020. If the                                      | •                          |                           |                      | •                  | •                   |           |
|      | line 18 is not more than 33 1/3%, che                                     | ck this box and <b>s</b> t | <b>top here.</b> The orga | nization qualifies   | as a publicly supp | orted organization  | ▶∐        |
| 20   | Private foundation. If the organization                                   | n did not check a          | box on line 14 19         | a or 19b check t     | his box and see in | structions          |           |

### Schedule A (Form 990) 2021

#### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **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 line 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   |     |    |
|      |     |    |
| 3b   |     |    |
|      |     |    |
| 3с   |     |    |
|      |     |    |
| 4a   |     |    |
| 41   |     |    |
| 4b   |     |    |
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| 4c   |     |    |
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| - Ou |     |    |
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| 9b   |     |    |
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| 9с   |     |    |
|      |     |    |
| 10a  |     |    |
| 10h  |     |    |
| 10b  |     |    |

| Par    | rt IV   Supporting Organizations (continued)   |                     |     |          |
|--------|--|---------------------|-----|----------|
|        | , (community)  |                     | Yes | No       |
| 11     | Has the organization accepted a gift or contribution from any of the following persons?  |                     |     |          |
| а      | A person who directly or indirectly controls, either alone or together with persons described on lines 11b and   |                     |     |          |
|        | 11c below, the governing body of a supported organization?   | 11a                 |     |          |
| b      | A family member of a person described on line 11a above?   | 11b                 |     |          |
| С      | A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide   |                     |     |          |
|        | detail in Part VI.   | 11c                 |     |          |
| Sec    | ction B. Type I Supporting Organizations   |                     |     |          |
|        |  |                     | Yes | No       |
| 1      | Did the governing body, members of the governing body, officers acting in their official capacity, or membership of  |                     |     |          |
|        | more supported organizations have the power to regularly appoint or elect at least a majority of the organization's or directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) | ificers,            |     |          |
|        | effectively operated, supervised, or controlled the organization's activities. If the organization had more than one sup   | ported              |     |          |
|        | organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among   |                     |     |          |
|        | 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,  |                     |     |          |
| 800    | supervised, or controlled the supporting organization.   | 2                   |     |          |
| 360    | Cition 6. Type in Supporting Organizations   |                     | Yes | No       |
| 1      | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors   |                     | 162 | NO       |
| •      | or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control  |                     |     |          |
|        | or management of the supporting organization was vested in the same persons that controlled or managed   |                     |     |          |
|        | the supported organization(s).   | 1                   |     |          |
| Sec    | ction D. All Type III Supporting Organizations   |                     |     | <u> </u> |
|        | · · · · · · · · · · · · · · · · · · ·  |                     | Yes | No       |
| 1      | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the   |                     |     |          |
|        | organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax  |                     |     |          |
|        | year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the   |                     |     |          |
|        | organization's governing documents in effect on the date of notification, to the extent not previously provided?   | 1                   |     |          |
| 2      | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported   |                     |     |          |
|        | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how   |                     |     |          |
|        | the organization maintained a close and continuous working relationship with the supported organization(s).  | 2                   |     |          |
| 3      | By reason of the relationship described on line 2, above, did the organization's supported organizations have a  |                     |     |          |
|        | significant voice in the organization's investment policies and in directing the use of the organization's   |                     |     |          |
|        | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's   |                     |     |          |
| 800    | supported organizations played in this regard.   | 3                   |     |          |
|        | ction E. Type III Functionally Integrated Supporting Organizations   |                     |     |          |
| 1      | Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions at satisfied the Activities Test. Complete line 2 below.   | ructions).          |     |          |
| a<br>b | The organization satisfied the Activities rest. Complete line 2 below.  The organization is the parent of each of its supported organizations. Complete line 3 below.  |                     |     |          |
| C      | The organization is the parent of each of its supported organizations. Complete line 3 below.  The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.                                  | itv (see instructio | ns) |          |
| 2      | Activities Test. Answer lines 2a and 2b below.   | nty (coo mondono    | Yes | No       |
|        |  |                     |     | 110      |
|        | 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 on line 2a, above, constitute activities that, but for the organization's involvement,  |                     |     |          |
|        | one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in   |                     |     |          |
|        | Part VI the reasons for the organization's position that its supported organization(s) would have engaged in   |                     |     |          |
|        | these activities but for the organization's involvement.   | 2b                  |     |          |
|        | Parent of Supported Organizations. Answer lines 3a and 3b below.   |                     |     |          |
| а      |  |                     |     |          |
|        | trustees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI.</b>   | 3a                  |     |          |
| b      | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes " describe in <b>Part VI</b> the role played by the organization in this regard    | 3h                  |     |          |
|        |  |                     |     |          |

| Pa   | rt V Type III Non-Functionally Integrated 509(a)(3) Supportir  | ng Orga     | nizations                    |                                |  |  |  |
|------|--|-------------|------------------------------|--------------------------------|--|--|--|
| 1    | Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. |             |                              |                                |  |  |  |
|      | All other Type III non-functionally integrated supporting organizations must complete Sections A through E.                                    |             |                              |                                |  |  |  |
| Sect | ion A - Adjusted Net Income  |             | (A) Prior Year               | (B) Current Year<br>(optional) |  |  |  |
| 1    | Net short-term capital gain  | 1           |                              |                                |  |  |  |
| 2    | Recoveries of prior-year distributions   | 2           |                              |                                |  |  |  |
| 3    | Other gross income (see instructions)  | 3           |                              |                                |  |  |  |
| 4    | Add lines 1 through 3.   | 4           |                              |                                |  |  |  |
| 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<br>(optional) |  |  |  |
| 1    | Aggregate fair market value of all non-exempt-use assets (see  |             |                              |                                |  |  |  |
|      | instructions for short tax year or assets held for part of year):  |             |                              |                                |  |  |  |
| 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 <b>Part VI</b> ):  |             |                              |                                |  |  |  |
| 2    | Acquisition indebtedness applicable to non-exempt-use assets   | 2           |                              |                                |  |  |  |
| 3    | Subtract line 2 from line 1d.  | 3           |                              |                                |  |  |  |
| 4    | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,  |             |                              |                                |  |  |  |
|      | see instructions).   | 4           |                              |                                |  |  |  |
| 5    | Net value of non-exempt-use assets (subtract line 4 from line 3)   | 5           |                              |                                |  |  |  |
| 6    | Multiply line 5 by 0.035.  | 6           |                              |                                |  |  |  |
| 7    | Recoveries of prior-year distributions   | 7           |                              |                                |  |  |  |
| 8    | Minimum Asset Amount (add line 7 to line 6)  | 8           |                              |                                |  |  |  |
| Sect | ion C - Distributable Amount   |             |                              | Current Year                   |  |  |  |
| 1    | Adjusted net income for prior year (from Section A, line 8, column A)  | 1           |                              |                                |  |  |  |
| 2    | Enter 0.85 of line 1.  | 2           |                              |                                |  |  |  |
| 3    | Minimum asset amount for prior year (from Section B, line 8, column A)   | 3           |                              |                                |  |  |  |
| 4    | Enter greater of line 2 or line 3.   | 4           |                              |                                |  |  |  |
| 5    | Income tax imposed in prior year   | 5           |                              |                                |  |  |  |
| 6    | Distributable Amount. Subtract line 5 from line 4, unless subject to   |             |                              |                                |  |  |  |
|      | emergency temporary reduction (see instructions).  | 6           |                              |                                |  |  |  |
| 7    | Check here if the current year is the organization's first as a non-functional   | lly integra | ated Type III supporting org | anization (see                 |  |  |  |

Schedule A (Form 990) 2021

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets 4 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 9 Distributable amount for 2021 from Section C, line 6 10 10 Line 8 amount divided by line 9 amount (i) (ii) (iii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2021 Amount for 2021 Distributable amount for 2021 from Section C, line 6 2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2021 a From 2016 **b** From 2017 **c** From 2018 **d** From 2019 e From 2020 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2021 distributable amount i Carryover from 2016 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2021 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2021 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2022. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2017 **b** Excess from 2018

Schedule A (Form 990) 2021

c Excess from 2019 d Excess from 2020 e Excess from 2021

#### SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

### **Political Campaign and Lobbying Activities**

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

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

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

OMB No. 1545-0047

2021

Open to Public

Inspection

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

• Section 501(c)(4) (5) or (6) organizations: Complete Part III

| <u>  •                                  </u> | 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 un   | der section 501(c)                                    | or is a section 527 o   | rganization.  |
| 2  | Provide a description of the organiz<br>Political campaign activity expendit<br>Volunteer hours for political campa                                  | tures   |   | ▶\$   |   |
| Pa   | art I-B Complete if the org  | ganization is exempt un   | der section 501(c)                                    | (3).  |   |
| 1  | Enter the amount of any excise tax   | incurred by the organization un   | der section 4955                                      | ▶\$   |   |
| 2  | Enter the amount of any excise tax   | incurred by organization manage   | gers under section 4955                               | ▶\$   |   |
| 3  | If the organization incurred a section   | on 4955 tax, did it file Form 4720                                      | O for this year?                                      |   | Yes No  |
| 48   | a Was a correction made?   |   |   |   | Yes No  |
|  | If "Yes," describe in Part IV.   |   |   |   |   |
| Pa   | art I-C Complete if the org  | ganization is exempt un   | der section 501(c),                                   | <u> </u>  | , , ,   |
| 1  | Enter the amount directly expended   | d by the filing organization for s                                      | ection 527 exempt func                                | tion activities > \$  |   |
| 2  | Enter the amount of the filing organ   | nization's funds contributed to o                                       | other organizations for se                            | ection 527  |   |
|  | exempt function activities   |   |   |   |   |
| 3  | Total exempt function expenditures   |   |   |   |   |
|  | line 17b   |   |   | ▶\$   |   |
| 4  | Did the filing organization file Form  |   |   |   |   |
| 5  | Enter the names, addresses and er<br>made payments. For each organiza<br>contributions received that were pr<br>political action committee (PAC). If | ation listed, enter the amount par<br>comptly and directly delivered to | aid from the filing organize a separate political org | zation's funds. Also enter th<br>anization, such as a separa        | ne amount of political  |
|  | <b>(a)</b> 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 |
|  |  |   |   |   |   |
|  |  |   |   |   |   |
|  |  |   |   |   |   |
|  |  |   |   |   |   |
|  |  |   |   |   |   |
|  |  |   |   |   |   |

#### 4-Year Averaging Period Under Section 501(h)

i If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

reporting section 4911 tax for this year?

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

| Lobbying Expenditures During 4-Year Averaging Period          |                 |                 |          |                  |            |  |  |  |  |
|---|-----------------|-----------------|----------|------------------|------------|--|--|--|--|
| Calendar year<br>(or fiscal year beginning in)                | <b>(a)</b> 2018 | <b>(b)</b> 2019 | (c) 2020 | ( <b>d)</b> 2021 | (e) Total  |  |  |  |  |
| 2a Lobbying nontaxable amount                                 | 296,359.        | 301,348.        | 265,479. | 279,744.         | 1,142,930. |  |  |  |  |
| <b>b</b> Lobbying ceiling amount (150% of line 2a, column(e)) |                 |                 |          |                  | 1,714,395. |  |  |  |  |
| c Total lobbying expenditures                                 | 33,597.         | 9,315.          | 3,853.   | 6,111.           | 52,876.    |  |  |  |  |
| <b>d</b> Grassroots nontaxable amount                         | 74,090.         | 75,337.         | 66,370.  | 69,936.          | 285,733.   |  |  |  |  |
| e Grassroots ceiling amount (150% of line 2d, column (e))     |                 |                 |          |                  | 428,600.   |  |  |  |  |
| f Grassroots lobbying expenditures                            | 1,606.          | 4,806.          | 1,975.   | 3,740.           | 12,127.    |  |  |  |  |

Schedule C (Form 990) 2021

Yes

No

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

| For ea | ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description   | (a)             |             | (k         | o)      |
|--------|--|-----------------|-------------|------------|---------|
| of the | lobbying activity.   | Yes             | No          | Amo        | ount    |
| 1      | During the year, did the filing organization attempt to influence foreign, national, state, or   |                 |             |            |         |
|        | local legislation, including any attempt to influence public opinion on a legislative matter   |                 |             |            |         |
|        | or referendum, through the use of:   |                 |             |            |         |
| а      | Volunteers?  |                 |             |            |         |
| b      | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?   |                 |             |            |         |
|        | Media advertisements?  |                 |             |            |         |
|        | Mailings to members, legislators, or the public?   |                 |             |            |         |
|        | Publications, or published or broadcast statements?  |                 |             |            |         |
|        | Grants to other organizations for lobbying purposes?   |                 |             |            |         |
|        | Direct contact with legislators, their staffs, government officials, or a legislative body?  |                 |             |            |         |
|        | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  |                 |             |            |         |
|        | Other activities?  |                 |             |            |         |
|        | Total. Add lines 1c through 1i  Did the patinities in line 1 course the averagination to be not described in section 501(a)(2)?  |                 |             |            |         |
|        | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  |                 |             |            |         |
|        | If "Yes," enter the amount of any tax incurred under section 4912  |                 |             |            |         |
|        | If "Yes," enter the amount of any tax incurred by organization managers under section 4912  If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? |                 |             |            |         |
|        | EIII-A Complete if the organization is exempt under section 501(c)(4), section   | on 501(c)(      | 5). or se   | ection     |         |
| - 0.11 | 501(c)(6).   | (.)(            | <b>-</b> ,, |            |         |
|        |  |                 |             | Yes        | No      |
| 1      | Were substantially all (90% or more) dues received nondeductible by members?   |                 | 1           |            |         |
| 2      | Did the organization make only in-house lobbying expenditures of \$2,000 or less?  |                 |             |            |         |
| 3      | Did the organization agree to carry over lobbying and political campaign activity expenditures from the  |                 |             |            |         |
|        | t III-B Complete if the organization is exempt under section 501(c)(4), section  |                 |             | ection     |         |
|        | 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."   | "No" OR         | (b) Part    | III-A, lin | e 3, is |
| 1      | Dues, assessments and similar amounts from members   |                 | 1           |            |         |
|        | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic  |                 |             |            |         |
| _      | expenses for which the section 527(f) tax was paid).   | , ui            |             |            |         |
| а      | Current year   |                 | 2a          |            |         |
|        | Carryover from last year   |                 |             |            |         |
|        | Total  |                 | l _         |            |         |
|        | 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 exc   |                 |             |            |         |
|        | does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and  |                 |             |            |         |
|        | expenditure next year?   |                 | 4           |            |         |
| 5      | Taxable amount of lobbying and political expenditures. See instructions  |                 | 5           |            |         |
| Par    | IV Supplemental Information  |                 |             |            |         |
| Provi  | de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group   | list); Part II- | A, lines 1  | and 2 (See |         |
| instru | ctions); and Part II-B, line 1. Also, complete this part for any additional information.   |                 |             |            |         |
|        |  |                 |             |            |         |
|        |  |                 |             |            |         |
|        |  |                 |             |            |         |
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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

| Pai | t I Organizations Maintaining Donor Advise   | ed Funds or Other Similar Fund              | s or Accounts          | Complete if the            |
|-----|--|---|------------------------|----------------------------|
|     | organization answered "Yes" on Form 990, Part IV, lir  | ne 6.                                       |                        |                            |
|     |  | (a) Donor advised funds                     | (b) Funds ar           | nd 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   |   | sed 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  | advisors in writing that grant funds can be | used only              |                            |
|     | for charitable purposes and not for the benefit of the donor of  | or donor advisor, or for any other purpose  | conferring             |                            |
|     | impermissible private benefit?   |   |                        | Yes No                     |
| Pai | t II Conservation Easements. Complete if the org   | ganization answered "Yes" on Form 990,      | Part IV, line 7.       |                            |
| 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)                         | f a historically impo  | ortant land area           |
|     | Protection of natural habitat  | Preservation of                             | f a certified historic | structure                  |
|     | Preservation of open space   |   |                        |                            |
| 2   | Complete lines 2a through 2d if the organization held a quali  | fied conservation contribution in the form  |                        |                            |
|     | day of the tax year.   |   |                        | at the End of the Tax Year |
| а   | Total number of conservation easements   |   | 2a                     |                            |
| b   | Total acreage restricted by conservation easements   |   | 2b                     |                            |
|     | Number of conservation easements on a certified historic str   |   |                        |                            |
| d   | Number of conservation easements included in (c) acquired  |   |                        |                            |
|     | listed in the National Register  |   |                        |                            |
| 3   | Number of conservation easements modified, transferred, re   | leased, extinguished, or terminated by th   | e organization dur     | ing the tax                |
|     | year ▶   |   |                        |                            |
| 4   | Number of states where property subject to conservation ea   |   |                        |                            |
| 5   | Does the organization have a written policy regarding the pe   |   |                        |                            |
|     | violations, and enforcement of the conservation easements in   |   |                        |                            |
| 6   | Staff and volunteer hours devoted to monitoring, inspecting,   | handling of violations, and enforcing cor   | servation easeme       | nts during the year        |
| _   | <u> </u>   |   |                        |                            |
| 7   | Amount of expenses incurred in monitoring, inspecting, hand  | dling of violations, and enforcing conserva | ation easements d      | uring the year             |
| _   | <b>&gt;</b> \$   |   | . (, ) ( () ()         |                            |
| 8   | Does each conservation easement reported on line 2(d) above  |   |                        |                            |
| •   | and section 170(h)(4)(B)(ii)?  |   |                        | L Yes L No                 |
| 9   | In Part XIII, describe how the organization reports conservat  | ·   |                        |                            |
|     | balance sheet, and include, if applicable, the text of the foot  | note to the organization's financial staten | nents that describe    | es the                     |
| Pai | organization's accounting for conservation easements.  † III   Organizations Maintaining Collections o | f Δrt Historical Treasures or C             | ther Similar A         | .ssets                     |
| . u | Complete if the organization answered "Yes" on Form  |   | outer curiniar 7       | 100010.                    |
| 12  | If the organization elected, as permitted under FASB ASC 95  |   | and halance sheet      | works                      |
| ıa  | of art, historical treasures, or other similar assets held for pul                                     |   |                        |                            |
|     | service, provide in Part XIII the text of the footnote to its fina                                     |   |                        | 10                         |
| h   | If the organization elected, as permitted under FASB ASC 95  |   |                        | rke of                     |
|     | art, historical treasures, or other similar assets held for public                                     |   |                        |                            |
|     | provide the following amounts relating to these items:   | combiner, education, or rescarer in fair    | riciance of public     | oci vice,                  |
|     |  |   | • •                    |                            |
|     | (i) Revenue included on Form 990, Part VIII, line 1  |   | ·                      |                            |
| 2   | (ii) Assets included in Form 990, Part X   |   |                        |                            |
| ~   | the following amounts required to be reported under FASB A   |   | ai gairi, piovide      |                            |
| •   | Revenue included on Form 990, Part VIII, line 1  |   | ▶ \$                   |                            |
| a   | Assets included in Form 900 Part Y   |   |                        |                            |

(i) Unrelated organizations

(ii) Related organizations

(iii) Related organizations

3a(ii)

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

3b

4 Describe in Part XIII the intended uses of the organization's endowment funds.

#### Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property                               | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land   |                                      |                                 |                              |                |
| <b>b</b> Buildings                                    |                                      |                                 |                              |                |
| c Leasehold improvements                              |                                      |                                 |                              |                |
| d Equipment   |                                      | 16,847.                         | 16,847.                      | 0.             |
| e Other   |                                      |                                 |                              |                |
| Total. Add lines 1a through 1e. (Column (d) must equa | 0.                                   |                                 |                              |                |

Schedule D (Form 990) 2021

| Schedule D (Form 990) 2021 OneJustice                                |                                 | 94  | -2589423 <sub>Page</sub> : |
|--|---------------------------------|---|----------------------------|
| Part VII Investments - Other Securities.                             |                                 |   |                            |
| Complete if the organization answered "Yes"                          | on Form 990, Part IV, line      |   |                            |
| (a) Description of security or category (including name of security) | (b) Book value                  | (c) Method of valuation: Cost or end              | I-of-year market value     |
| (1) Financial derivatives  |                                 |   |                            |
| (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 end              | I-of-year market value     |
| (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" of                       | on Form 990 Part IV line        | 11d See Form 990 Part X line 15                   |                            |
|  | Description                     | 114. 666 1 6111 666, 1 4117, 1116 16.             | (b) Book value             |
|  |                                 |   | (-7                        |
| <u>(1)</u> (2)   |                                 |   |                            |
| (3)  |                                 |   |                            |
|  |                                 |   |                            |
| (4)  |                                 |   |                            |
| (5)  |                                 |   |                            |
| <u>(6)</u>   |                                 |   |                            |
| (7)  |                                 |   |                            |
| (8)  |                                 |   |                            |
| (9)<br>Total. (Column (b) must equal Form 990, Part X, col. (B) line | 15)                             |   |                            |
| Part X Other Liabilities.  | 10.)                            |   |                            |
| Complete if the organization answered "Yes" of                       | on Form 990 Part IV line        | 11e or 11f See Form 990 Part X line 25            |                            |
| (a) December of link like  | 5111 O1111 550, 1 art 1V, 11110 | 1716 OF 1711. GCC 1 OF 1715 350, 1 art X, 1116 25 | (b) Book value             |
|  |                                 |   | (b) Book value             |
| (1) Federal income taxes   |                                 |   |                            |
| (2)  |                                 |   |                            |
| (3)  |                                 |   |                            |
| (4)  |                                 |   |                            |
| (5)  |                                 |   |                            |
| (6)  |                                 |   |                            |
|  |                                 |   |                            |
| (8)  |                                 |   |                            |
| (9)  |                                 |   |                            |
| Total. (Column (b) 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 Schedule D (Form 990) 2021 Part XI Reconciliation of Revenue per Audited Financial State

| rai | neconciliation of nevertide per Addited Financial S                      | tatements with  | nevellue pei n | eturi | 1.         |
|-----|--|-----------------|----------------|-------|------------|
|     | 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     | 3,612,117. |
| 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              | 73,728.        |       |            |
| С   | Recoveries of prior year grants  | 2c              |                |       |            |
| d   | Other (Describe in Part XIII.)   | 2d              |                |       |            |
| е   | Add lines 2a through 2d  |                 |                | 2e    | 73,728.    |
| 3   | Subtract line 2e from line 1   |                 |                | 3     | 3,538,389. |
| 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              |                |       |            |
|     | Add lines 4a and 4b  |                 |                | 4c    | 0.         |
| 5   |  | 2.)             |                | 5     | 3,538,389. |
| Pa  | rt XII Reconciliation of Expenses per Audited Financial S                | Statements With | Expenses per   | Retu  | rn.        |
|     | Complete if the organization answered "Yes" on Form 990, Part IV,        | line 12a.       |                |       |            |
| 1   | Total expenses and losses per audited financial statements               |                 |                | 1     | 2,668,611. |
| 2   | Amounts included on line 1 but not on Form 990, Part IX, line 25:        |                 |                |       |            |
| а   | Donated services and use of facilities                                   | 2a              | 73,728.        |       |            |
| b   | Prior year adjustments   | 2b              |                |       |            |
| С   | Other losses   | 2c              |                |       |            |
| d   | Other (Describe in Part XIII.)   | 2d              |                |       |            |
| е   | Add lines 2a through 2d  |                 |                | 2e    | 73,728.    |
| 3   | Subtract line 2e from line 1   |                 |                | 3     | 2,594,883. |
| 4   | Amounts included on Form 990, Part IX, line 25, but not on line 1:       |                 |                |       |            |
| а   | Investment expenses not included on Form 990, Part VIII, line 7b         | 4a              |                |       |            |
| b   | Other (Describe in Part XIII.)   | 4b              |                |       |            |
| _   | Add lines 4s and 4h  |                 |                | 4-    | 0          |

#### Part XIII Supplemental Information.

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

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. One Justice's returns are subject to examination by federal and state taxing authorities, generally for three and four years, respectively, after they are filed.

2,594,883

| Schedule D | (Form 990) 2021                   | OneJustice          |  | 94-2589423 | Page 5 |
|------------|-----------------------------------|---------------------|--|------------|--------|
| Part XIII  | (Form 990) 2021 Supplemental Info | rmation (continued) |  |            |        |
|            |                                   |                     |  |            |        |
|            |                                   |                     |  |            |        |
|            |                                   |                     |  |            |        |
|            |                                   |                     |  |            |        |
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#### SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Inspection

2021
Open to Public

Name of the organization OneJustice Employer identification number 94-2589423

| Oneoust   | 106  |                   |                                   |                          | 74 2303                                 | 443                 |
|---|--|-------------------|-----------------------------------|--------------------------|---|---------------------|
| Part I Fundraising Activities required to complete this par | <ul> <li>Complete if the organization answet.</li> </ul> | ered "Y           | 'es" oı                           | n Form 990, Part IV,     | line 17. Form 990-E2                    | I filers are not    |
| 1 Indicate whether the organization rais                    |  | ng acti           | vities                            | Check all that apply     |   |                     |
| a Mail solicitations  | · · —  | -                 |                                   | overnment grants         | •                                       |                     |
|   |  |                   |                                   |                          |   |                     |
| <b>b</b> Internet and email solicitations                   |  |                   |                                   | nment grants             |   |                     |
| c Phone solicitations                                       | g L Special  | fundra            | aising                            | events                   |   |                     |
| d In-person solicitations                                   |  |                   |                                   |                          |   |                     |
| 2 a Did the organization have a written of                  | or oral agreement with any individual                    | (inclu            | ding o                            | fficers, directors, trus | stees, or                               |                     |
| key employees listed in Form 990, P                         | art VII) or entity in connection with p                  | rofess            | ional f                           | undraising services?     | Yes                                     | L No                |
| <b>b</b> If "Yes," list the 10 highest paid indi-           | viduals or entities (fundraisers) pursu                  | uant to           | agree                             | ements under which       | the fundraiser is to b                  | oe .                |
| compensated at least \$5,000 by the                         | organization.  |                   |                                   |                          |   |                     |
|   | 3  |                   |                                   |                          |   |                     |
| (2) Nigrana and address of the dividence                    |  | (iii)             | Did                               | (in ) Our en un entre te | (v) Amount paid                         | (vi) Amount paid    |
| (i) Name and address of individual                          | (ii) Activity  | have c            | Did<br>aiser<br>ustody<br>trol of | (iv) Gross receipts      | to (or retained by) fundraiser          | to (or retained by) |
| or entity (fundraiser)                                      |  | or cor<br>contrib | trol of utions?                   | from activity            | listed in col. (i)                      | organization        |
|   |  | V                 | NI.                               |                          | • |                     |
|   |  | Yes               | No                                |                          |   |                     |
|   |  |                   |                                   |                          |   |                     |
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| Total   |  |                   |                                   |                          |   |                     |
| 3 List all states in which the organization                 | on is registered or licensed to solicit                  | contrib           | outions                           | s or has been notified   | d it is exempt from re                  | egistration         |
| or licensing.   |  |                   |                                   |                          |   |                     |
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OneJustice 94-2589423 Page 2 Schedule G (Form 990) 2021 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (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 519,947. 519,947. 1 Gross receipts 416,960. 416,960. 2 Less: Contributions 102,987. 102,987. 3 Gross income (line 1 minus line 2) ...... 4 Cash prizes 5 Noncash prizes Direct Expenses 3,889. 3,889. 6 Rent/facility costs 62,094. 62,094. 7 Food and beverages 13,817. 13,817. 8 Entertainment 23,187. 9 Other direct expenses 23,187. 102,987. 10 Direct expense summary. Add lines 4 through 9 in column (d) 0. 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? No **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 | edule G (Form 990) 2021           | OneJustice   | 94-2                          | 589         | 423    | Page 3        |
|-----|-----------------------------------|--|-------------------------------|-------------|--------|---------------|
|     |                                   | ming activities with nonmembers?   |                               |             | Yes    | No No         |
| 12  |                                   | ficiary or trustee of a trust, or a member of a partnership o  |                               |             |        |               |
|     |                                   |  |                               | Ш,          | Yes    | ∟ No          |
|     | Indicate the percentage of gamin  |  |                               | ا ءمدا      |        | 0/            |
|     |                                   |  |                               | 13a<br>13b  |        | <u>%</u><br>% |
|     |                                   | person who prepares the organization's gaming/special e  |                               | ISD         |        | 70            |
|     |                                   | porcon mo properco no organization o gening, opecial c   |                               |             |        |               |
|     | Address >                         |  |                               |             |        |               |
| 15  | Does the organization have a cor  | ract with a third party from whom the organization receives  | s gaming revenue?             |             | Yes    | ☐ No          |
| ı   |                                   | ng revenue received by the organization > \$   | and the amount                |             |        |               |
|     | of gaming revenue retained by th  | third party >\$  |                               |             |        |               |
| •   | If "Yes," enter name and address  | of the third party:  |                               |             |        |               |
|     | Name >                            |  |                               |             |        |               |
|     |                                   |  |                               |             |        |               |
| 16  | Gaming manager information:       |  |                               |             |        |               |
|     | Name ►                            |  |                               |             |        |               |
|     |                                   |  |                               |             |        |               |
|     | Gaming manager compensation       | <b>\$</b>  |                               |             |        |               |
|     | Description of services provided  | <b>-</b>   |                               |             |        |               |
|     |                                   |  |                               |             |        |               |
|     | Director/officer                  | Employee Independent contractor  |                               |             |        |               |
| 17  | Mandatory distributions:          |  |                               |             |        |               |
|     | •                                 | state law to make charitable distributions from the gaming   | proceeds to                   |             |        |               |
|     | retain the state gaming license?  |  |                               |             | Yes    | ☐ No          |
| ı   |                                   | equired under state law to be distributed to other exempt  | organizations or spent in the |             |        |               |
|     | organization's own exempt activit |  |                               |             |        |               |
| Pä  |                                   | <b>nation.</b> Provide the explanations required by Part I, line applicable. Also provide any additional information. See in |                               | rt III, Iir | nes 9, | 9b, 10b,      |
|     |                                   |  |                               |             |        |               |
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| Schedule G | G (Form 990)                    | OneJustice          |  | 94-2589423 | Page 4 |
|------------|---------------------------------|---------------------|--|------------|--------|
| Part IV    | G (Form 990)  Supplemental Info | rmation (continued) |  |            |        |
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#### **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.

Open to Public Inspection

94-2589423

Internal Revenue Service Name of the organization

OneJustice

Department of the Treasury

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

Employer identification number

OMB No. 1545-0047

| 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.   |    |     |    |
|    | X Compensation committee   |    |     |    |
|    | 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 |     | Х  |
| 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 |     | Х  |
|    | 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:   |    |     |    |
| а  | 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:   |    |     |    |
| а  | The organization?  | 6a |     | X  |
|    | 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       |    |     |    |
|    | not described on lines 5 and 6? If "Yes," describe in Part III   | 7  | Х   |    |
| 8  | Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject 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  |     | 1  |

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

Schedule J (Form 990) 2021

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

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

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

|                                     |             | (B) Breakdown of W       | J-2 and/or 1099-MISo<br>compensation      | C and/or 1099-NEC                         | (C) Retirement and other deferred | (D) Nontaxable benefits | (E) Total of columns<br>(B)(i)-(D) | in column (B)                             |
|-------------------------------------|-------------|--------------------------|---|---|-----------------------------------|-------------------------|------------------------------------|---|
| (A) Name and Title                  |             | (i) Base<br>compensation | (ii) Bonus &<br>incentive<br>compensation | (iii) Other<br>reportable<br>compensation | compensation                      |                         |                                    | reported as deferred<br>on prior Form 990 |
| (1) Phil Hwang                      | (i)         | 176,156.                 | 2,000.                                    | 0.  | 2,000.                            | 1,447.                  | 181,603.                           | 0.  |
| CEO                                 | (ii)        | 0.                       | 0.  | 0.  | 0.                                | 0.                      | 0.                                 | 0.  |
| (2) Gail Quan                       | (i)         | 131,354.                 | 2,000.                                    | 0.  | 2,000.                            | 19,659.                 | 155,013.                           | 0.  |
| Director, Legal, Operations, People | (ii)        | 0.                       | 0.  | 0.  | 0.                                | 0.                      | 0.                                 | 0.  |
|                                     | (i)         |                          |   |   |                                   |                         |                                    |   |
|                                     | (ii)        |                          |   |   |                                   |                         |                                    |   |
|                                     | (i)         |                          |   |   |                                   |                         |                                    |   |
|                                     | (ii)        |                          |   |   |                                   |                         |                                    |   |
|                                     | (i)         |                          |   |   |                                   |                         |                                    |   |
|                                     | (ii)        |                          |   |   |                                   |                         |                                    |   |
|                                     | (i)         |                          |   |   |                                   |                         |                                    |   |
|                                     | (ii)        |                          |   |   |                                   |                         |                                    |   |
|                                     | (i)         |                          |   |   |                                   |                         |                                    |   |
|                                     | (ii)        |                          |   |   |                                   |                         |                                    |   |
|                                     | (i)         |                          |   |   |                                   |                         |                                    |   |
|                                     | (ii)        |                          |   |   |                                   |                         |                                    |   |
|                                     | (i)<br>(ii) |                          |   |   |                                   |                         |                                    |   |
|                                     | (i)         |                          |   |   |                                   |                         |                                    |   |
|                                     | (ii)        |                          |   |   |                                   |                         |                                    |   |
|                                     | (i)         |                          |   |   |                                   |                         |                                    |   |
|                                     | (ii)        |                          |   |   |                                   |                         |                                    |   |
|                                     | (i)         |                          |   |   |                                   |                         |                                    |   |
|                                     | (ii)        |                          |   |   |                                   |                         |                                    |   |
|                                     | (i)         |                          |   |   |                                   |                         |                                    |   |
|                                     | (ii)        |                          |   |   |                                   |                         |                                    |   |
|                                     | (i)         |                          |   |   |                                   |                         |                                    |   |
|                                     | (ii)        |                          |   |   |                                   |                         |                                    |   |
|                                     | (i)         |                          |   |   |                                   |                         |                                    |   |
|                                     | (ii)        |                          |   |   |                                   |                         |                                    |   |
|                                     | (i)         |                          |   |   |                                   |                         |                                    |   |
|                                     | (ii)        |                          |   |   |                                   |                         |                                    |   |

| Schedule J (Form 990) 2021           | OneJustice                             |                                      |  | 94-2589423  | Page 3 |
|--------------------------------------|--|--------------------------------------|--|---|--------|
| Part III Supplemental Informatio     |  |                                      |  |   |        |
| 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. Als | so complete this part for any additional informat | ion.   |
|                                      |  |                                      |  |   |        |
|                                      |  |                                      |  |   |        |
| Part I, Line 7:                      |  |                                      |  |   |        |
|                                      |  |                                      |  |   |        |
| Phil Hwang and Gai                   | 1 Quan received a                      | performance based                    | d bonus resulting                      | from  |        |
| CY 21.                               |  |                                      |  |   |        |
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#### SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

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.

Open to Public Attach to Form 990 or Form 990-EZ. Inspection ► Go to www.irs.gov/Form990 for the latest information.

Name of the organization

OneJustice

**Employer identification number** 94-2589423

OMB No. 1545-0047

Form 990, Part III, Line 4a, Program Service Accomplishments: OneJustice also offered resources, training and consulting on best practices and innovative uses of technology to expand pro bono services to underserved communities. For example, OneJustice's Remote Clinic Toolkit, developed in 2020 to help legal services organizations pivot to a remote service model, has been shared with over 120 legal services organizations across 25 states. OneJustice also partnered with rural legal aid organizations in California to develop a streamlined pro bono clinic service delivery model, with the goal of better accessing and serving client communities and engaging remote volunteers. One Justice also provided support to legal services programs with their remote legal clinic models, including projects offering legal services to domestic violence survivors, rural and underserved communities, immigrants fleeing persecution, and small business owners and entrepreneurs in the Inland Empire. Through its Pro Bono Training Institute, OneJustice trained over 2,000 individuals from law firms, legal aid organizations, law schools, and universities on critical legal topics, including housing, asylum, and disaster relief. Since its inception, the Pro Bono Training Institute has published 169 training modules spanning 28 topics and have been accessed by more than 10,000 volunteer attorneys, law students, and legal aid staff.

Form 990, Part III, Line 4b, Program Service Accomplishments: largest legal aid organizations, assisting leaders statewide with management issues and sharing of best practices. In addition,

Schedule O (Form 990) 2021 Page **2** 

Name of the organization
OneJustice

Employer identification number 94-2589423

OneJustice offered programming to legal services organizations across

California on essential topics, such as effective data practices in

homelessness prevention, program evaluation, budgeting and financial

management, advancing equity in board leadership, and leadership

succession planning.

OneJustice co-led a California statewide working group to develop a new legal resource to help families who were unable to pay rent during COVID and had to defend themselves in small claims court. This new toolkit includes sample forms and materials in 12 different languages.

Legal services organizations used the toolkit to expand services for low-income families. OneJustice also created the Small Claims

CourtWatch project, with the goal of training pro bono attorneys, law students and legal aid attorneys to gather information on how Small Claims Courts administered new COVID-19 rental debt laws and procedures so families would be better prepared.

OneJustice supported public policies that increase access to legal services for low-income Californians. OneJustice advocated on state and federal bills that would impact immigrant and low-income Californians who had been hit particularly hard by the pandemic and natural disasters. In addition, OneJustice advocated for the importance of legal aid with legislators.

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

Schedule O (Form 990) 2021 Page **2** 

Name of the organization

OneJustice

Employer identification number
94-2589423

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 the Director's 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.

Form 990, Part VI, Section B, Line 15a:

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

Schedule O (Form 990) 2021 Page 2

| Name of the organization OneJustice                    | Employer identification number 94-2589423 |
|--|---|
| CEO's pay continues to abide by market standards.      |   |
| Form 990, Part VI, Section C, Line 19:                 |   |
| OneJustice provides the financial information from its | s annual audit and the                    |
| Form 990 to the public online at www.onejustice.org.   | OneJustice also state:                    |
| on the website that it will share the conflict of inte | erest policy,                             |
| whistleblower policy, audit and Form 990 directly with | n anyone who submits                      |
| an email request for the documents. OneJustice also pr | rovides its Form 990,                     |
| audit, and financial information to GuideStar; OneJust | tice has also earned                      |
| the Gold GuideStar Exchange Seal in recognition of its | s commitment to                           |
| transparency.  |   |
|  |   |
| Form 990, Part IX, Line 11g, Other Fees:               |   |
| Contracted services:                                   |   |
| Program service expenses                               | 25,415                                    |
| Management and general expenses                        | 11,040                                    |
| Fundraising expenses                                   | 30,618                                    |
| Total expenses   | 67,073                                    |
| Program consulting:                                    |   |
| Program service expenses                               | 268,066                                   |
| Management and general expenses                        | 0   |
| Fundraising expenses                                   | 0   |
| Total expenses   | 268,066                                   |
|  |   |