| | - | | Extended to May 15, 1 Return of Organization Exempt I | | ncome Tay | OMB No. 1545-0047 | | | | | |
|--------------------------------|---------------------------|---------------------------------|---|--------------|---|----------------------------|--|--|--|--|--|
| For | " g | 90 | Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue | | | 2022 | | | | | |
| 1 011 | | ••• | Do not enter social security numbers on this form a | - | | Open to Public | | | | | |
| Depa Interi | rtment nal Reve | of the Treasury enue Service | Go to www.irs.gov/Form990 for instructions and t | - | | Inspection | | | | | |
| _ | | | ar year, or tax year beginning $ { m JUL}1,2022$ and | ending J | UN 30, 2023 | | | | | | |
| B | heck if pplicab | le: | organization | | D Employer identificat | ion number | | | | | |
| | Addre | | ustice | | | | | | | | |
| | Name | ge Doing bu | isiness as | | 94-2589423 | 3 | | | | | |
| | Initial return | Number | | Room/suite | E Telephone number | | | | | | |
| | Final return termir | n | | 27400 | (415) 834- | | | | | | |
| | ated Amen | City or to | own, state or province, country, and ZIP or foreign postal code | | G Gross receipts \$ | 3,230,183. | | | | | |
| | _return | a ban | Francisco, CA 94104 | | H(a) Is this a group retu | | | | | | |
| | tion pendi | | nd address of principal officer:Phil Hwang as C above | | for subordinates? | | | | | | |
| | | empt status: | | or 527 | H(b) Are all subordinates inclu | | | | | | |
| | Ax-ex Nebsi | | one justice.org (3) | | If "No," attach a list H(c) Group exemption n | | | | | | |
| | | f organization: | | I Vear | of formation: 1979 M S | | | | | | |
| _ | art I | | | | | | | | | | |
| | 1 | | e the organization's mission or most significant activities: Stre | ngthen | the legal se | ervices | | | | | |
| nce n | | | s expertise and capacity to advand | | | | | | | | |
| Activities & Governance | 2 | | | | | | | | | | |
| ove | 3 | | | | | | | | | | |
| Ğ | 4 | Number of ind | 4 | 15 | | | | | | | |
| es S | 5 | | of individuals employed in calendar year 2022 (Part V, line 2a) | | 19 | | | | | | |
| viti | 6 | Total number of | of volunteers (estimate if necessary) | | 151 | | | | | | |
| Acti | 7a | 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 | Current Year | | | | | |
| ne | 8 | | and grants (Part VIII, line 1h) | | 3,219,685. | 2,804,639. | | | | | |
| Revenue | 9 | | ce revenue (Part VIII, line 2g) | | 258,949. | 230,482. | | | | | |
| Be | 10 | | come (Part VIII, column (A), lines 3, 4, and 7d) | | 1,628. | 9,423. | | | | | |
| | 11 | | (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 58,127. 3,538,389. | 139,793. | | | | | |
| | 12 | | - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | <u> </u> | 3,184,337. | | | | | |
| | 13 | | nilar amounts paid (Part IX, column (A), lines 1-3) | | 0. | 0. | | | | | |
| | 14 | | o or for members (Part IX, column (A), line 4) | | 1,658,512. | 1,928,324. | | | | | |
| Expenses | 15 | Salaries, other | compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) 267, 8 | ······ | 0. | 0. | | | | | |
| ben | l lua | Total fundraisi | and assing lees (Part IX, column (A), line (11e) 25 267.8 | 63. | | | | | | | |
| Ă | 17 | | es (Part IX, column (A), lines 11a-11d, 11f-24e) | | 936,371. | 851,084. | | | | | |
| | 18 | | s. Add lines 13-17 (must equal Part IX, column (A), line 25) | | 2,594,883. | 2,779,408. | | | | | |
| | 19 | | expenses. Subtract line 18 from line 12 | | 943,506. | 404,929. | | | | | |
| or | | | | Be | ginning of Current Year | End of Year | | | | | |
| Net Assets or Fund Balances | 20 | Total assets (F | Part X, line 16) | | 3,200,276. | 3,871,073. | | | | | |
| dBa | 21 | | (Part X, line 26) | | 438,862. | 704,730. | | | | | |
| Fun | 22 | | fund balances. Subtract line 21 from line 20 | | 2,761,414. | 3,166,343. | | | | | |
| Pa | art II | Signature | Block | | | | | | | | |
| Und | er pena | alties of perjury, l | declare that I have examined this return, including accompanying schedule | s and statem | ents, and to the best of my ki | nowledge and belief, it is | | | | | |

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

| Sign | Signature of off | icer | | | Date |
|-------------|------------------|------------------------------------|------------------------------------|--------------------------|-------------------------|
| | | ang, CEO | | | |
| | Type or print na | me and title | | | |
| | Print/Type prep | arer's name | Preparer's signature | Date | Check PTIN |
| Paid | Sean E. | Cain, CPA | | | self-employed P01612986 |
| Preparer | Firm's name | Harrington Group, | | | Firm's EIN 95-4557617 |
| Use Only | Firm's address | 2698 Mataro Stree | t | | |
| | | Pasadena, CA 9110 | | Phone no. (626) 403-6801 | |
| May the I | RS discuss this | return with the preparer shown abo | ove? See instructions | | X Yes No |
| 232001 12-1 | 13-22 LHA F | or Paperwork Reduction Act Notic | ce, see the separate instructions. | | Form 990 (2022) |

| Form | 990 (2022) OneJustice | 94-2589423 Page | e 2 |
|------|--|----------------------------|------------|
| Pa | rt III Statement of Program Service Accomplishments | 0 | |
| | Check if Schedule O contains a response or note to any line in this Part III | [] | Х |
| 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? | Yes X | ٩N |
| | 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 | ٩٥ |
| | 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 r | | |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other | s, the total expenses, and | |
| | revenue, if any, for each program service reported. | 102 675 | |
| 4a | (Code:)(Expenses 1,305,646. including grants of \$) (Revenue) (Revenue | \$ 103,075 | •) |
| | During Fiscal Year 22-23, OneJustice brought together mo | re than 60 | |
| | legal aid organizations, law firms and corporations to a | | <u></u> |
| | needs, highlight successful pro bono models, and strateg | | 9 |
| | effective management and strategic deployment of volunte | | |
| | OneJustice's annual Pro Bono Conference, webinars, and s | | |
| | meetings throughout the year covered topics, such as cen | | |
| | anti-racism in pro bono work, developing volunteer oppor | | |
| | consumer law projects, and engaging retired and retiring | | |
| | volunteers. The law firms and corporations supported by | | |
| | contributed a majority of the hours donated to legal aid | programs | |
| | throughout California. | | |
| 4b | | s <u>126,807</u> | •) |
| | Healthy Nonprofits Program: | | |
| | During Fiscal Year 22-23, OneJustice provided training, | | |
| | consultations to over 100 legal services organizations t | | |
| | than 600,000 individuals per year, with the goal of optim | mizing their | |
| | performance and community impact. OneJustice completed the thirteenth year of its Executiv | - Fellowshin | |
| | program, an intensive 10-month program on nonprofit lead | | |
| | management. OneJustice trained leaders from 28 legal ser | | |
| | organizations in California, Alaska, Illinois, New Hamps | hire. New | |
| | Jersey, and Washington State. OneJustice also provided s | | |
| | consulting to legal aid organizations on management issu | | |
| | facilitated the sharing of best practices through a lead | | • |
| 4c | (Code:) (Expenses \$ including grants of \$) (Revenue | \$ |) |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 44 | Other program services (Describe on Schedule O.) | | |
| τu | (Expenses \$ including grants of \$) (Revenue \$ |) | |
| 4e | Total program service expenses 2,179,122. | / | |
| | | Form 990 (20 |)22) |
| | See Schedule O for Continuation(s |) | |

See Schedule O for Continuation(s)

| | 000 | $\langle 0 0 0 0 \rangle$ |
|------|-----|---------------------------|
| Form | 990 | (2022) |

Form 990 (2022) 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 | |
| • | If "Yes," complete Schedule A | 1 2 | X | <u> </u> |
| 2 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | 2 | 21 | <u> </u> |
| 3 | | 3 | | x |
| 4 | public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | 5 | | |
| 7 | 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 | · · | | |
| Ū | similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III | 5 | | x |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | | |
| | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | _ | | v |
| - | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | | | v |
| ~ | Schedule D, Part III | 8 | | X |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for | | | |
| | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? | 9 | | x |
| 10 | If "Yes," complete Schedule D, Part IV | 9 | | - 23 |
| 10 | or in quasi endowments? If "Yes," complete Schedule D, Part V | 10 | | x |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, | 10 | | |
| •• | as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | |
| - | Part VI | 11a | х | |
| b | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | Х |
| с | Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | X |
| d | Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in | | | |
| | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | X |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | Х | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | X | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | v | |
| | Schedule D, Parts XI and XII | 12a | Х | |
| D | Was the organization included in consolidated, independent audited financial statements for the tax year? | 106 | | x |
| 12 | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b 13 | | X |
| 13 14a | | 14a | | X |
| | Did the organization maintain an office, employees, or agents outside of the United States? | ITU | | |
| ~ | 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 | | x |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any | | | |
| | foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | | | |
| | or for foreign individuals? 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," | | | |
| | complete Schedule G, Part III | 19 | | X |
| | Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> | 20a | | X |
| | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | | v |
| | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | X |

| Form | 990 | (2022) |
|------|-----|--------|
| | 330 | (2022) |

 Form 990 (2022)
 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 | |
| 24 a | 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 | | | x |
| | Schedule K. If "No," go to line 25a | 24a | | |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| C | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | 04- | | |
| | any tax-exempt bonds? I Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24c 24d | | |
| | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | 24u | | |
| 254 | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | x |
| h | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | ZJa | | |
| N | 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 | | x |
| 26 | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current | | | |
| | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| | 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 | | | | |
| | "Yes," complete Schedule L, Part IV | 2 8a | | X |
| | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV | 28b | | X |
| С | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f | | | 37 |
| | "Yes," complete Schedule L, Part IV | 28c | | X |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | x |
| 04 | contributions? If "Yes," complete Schedule M | 30 | | X |
| 31 32 | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> | 31 | | |
| 32 | | 32 | | x |
| 33 | Schedule N, Part II | 52 | | |
| 00 | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | x |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | |
| ~ • | Part V, line 1 | 34 | | x |
| 35 a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | Х |
| | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | | | |
| | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | | | |
| | If "Yes," complete Schedule R, Part V, line 2 | 36 | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | X |
| 38 | Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? | | 37 | |
| Pa | Note: All Form 990 filers are required to complete Schedule O | 38 | Х | |
| Pa | rt V Statements Regarding Other IRS Filings and Tax Compliance | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | <u></u> | | |
| 1. | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 40 | | Yes | No |
| la b | | | | |
| - - | : Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | |
| _ | (gambling) winnings to prize winners? | 1c | Х | |

| Form | 990 (2022) OneJustice 94-2589 | 423 | P | age 5 | | | | | | | |
|--------|---|----------|------|--------------|--|--|--|--|--|--|--|
| Par | t V Statements Regarding Other IRS Filings and Tax Compliance (continued) | | | | | | | | | | |
| | | | Yes | No | | | | | | | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 19 | | | | | | | | | | |
| | | ~ | x | | | | | | | | |
| | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b 3a | | X | | | | | | | |
| | a Did the organization have unrelated business gross income of \$1,000 or more during the year? | | | | | | | | | | |
| | If "Yes," has it filed a Form 990-T for this year? <i>If</i> "No" to line 3b, provide an explanation on Schedule O | 3b | | | | | | | | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a | 4- | | x | | | | | | | |
| h | financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | - 23 | | | | | | | |
| D | If "Yes," enter the name of the foreign country | | | | | | | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | x | | | | | | | |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | X | | | | | | | |
| | 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 | | X | | | | | | | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | | | | | | | | | | |
| | were not tax deductible? | 6b | | | | | | | | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | | | | | | | | |
| а | 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 | | | | | | | | | | |
| | to file Form 8282? | 7c | | X | | | | | | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year 7d | | | | | | | | | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | X | | | | | | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | NT / | X | | | | | | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | N/ | | | | | | | | |
| - | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | N/ | A | | | | | | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | • | | | | | | | | | |
| • | sponsoring organization have excess business holdings at any time during the year? N/A | 8 | | | | | | | | | |
| 9 a | Sponsoring organizations maintaining donor advised funds. 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: | 0.0 | | | | | | | | | |
| | Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a | | | | | | | | | | |
| | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | | | | | | | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | | | | | | | | |
| а | Gross income from members or shareholders N/A 11a | | | | | | | | | | |
| | Gross income from other sources. (Do not net amounts due or paid to other sources against | | | | | | | | | | |
| | amounts due or received from them.) | | | | | | | | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | | | | | | | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the yearN/A 12b | | | | | | | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | | | | | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? ${ m N/A}$ | 13a | | | | | | | | | |
| | Note: See the instructions for additional information the organization must report on Schedule O. | | | | | | | | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the | | | | | | | | | | |
| | organization is licensed to issue qualified health plans | | | | | | | | | | |
| | Enter the amount of reserves on hand | 44- | | X | | | | | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | _ <u> </u> | | | | | | | |
| | If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or | 14b | | | | | | | | | |
| 15 | excess parachute payment(s) during the year? | 15 | | x | | | | | | | |
| | If "Yes," see the instructions and file Form 4720, Schedule N. | 15 | | | | | | | | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? | 16 | | x | | | | | | | |
| | If "Yes," complete Form 4720, Schedule O. | | | | | | | | | | |
| 17 | Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities | | | | | | | | | | |
| | that would result in the imposition of an excise tax under section 4951, 4952 or 4953? N/A | 17 | | | | | | | | | |
| | If "Yes," complete Form 6069. | | | | | | | | | | |

| Form | 990 (2022) OneJustice | | | -2589 | | | age 6 | | | | | |
|----------|---|----------|----------------------|------------|----------|----------|--------------|--|--|--|--|--|
| Pa | t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 th | - | | | "No" | respor | ise | | | | | |
| | to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule C | | | | | | | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part VI | | | | | | X | | | | | |
| Sec | tion A. Governing Body and Management | | | | | | | | | | | |
| | | | | 15 | | Yes | No | | | | | |
| та | Enter the number of voting members of the governing body at the end of the tax year | 1a | | 10 | | | | | | | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing | | | | | | | | | | | |
| b | body delegated broad authority to an executive committee or similar committee, explain on Schedule 0. | 416 | | 15 | | | | | | | | |
| - | Enter the number of voting members included on line 1a, above, who are independent | 1b | any other | | | | | | | | | |
| 2 | | | | | | | | | | | | |
| 3 | officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under th | o diroc | t cuponvici | | 2 | | <u>X</u> | | | | | |
| 3 | 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 | | | | 4 | | X | | | | | |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's as | | | | 5 | | X | | | | | |
| 6 | Did the organization become aware during the year of a significant diversion of the organization s as | | | | 6 | | X | | | | | |
| | Did the organization have members, stockholders, or other persons who had the power to elect or ap | | | | - | | | | | | | |
| 74 | more members of the governing body? | | | | 7a | | х | | | | | |
| h | Are any governance decisions of the organization reserved to (or subject to approval by) members, s | | | | 14 | | | | | | | |
| D | | | | | 7b | | х | | | | | |
| 8 | persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year | ar by th | e followina. | | 10 | | | | | | | |
| | The governing body? | | | | 8a | х | | | | | | |
| | | | | | 8b | X | | | | | | |
| 9 | Each committee with authority to act on behalf of the governing body? | | | | 00 | | | | | | | |
| Ŭ | organization's mailing address? If "Yes," provide the names and addresses on Schedule O | | | | 9 | | х | | | | | |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Re | | | | <u> </u> | | | | | | | |
| | | | | | | 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 | | | | | | | | | | | |
| - | and branches to ensure their operations are consistent with the organization's exempt purposes? | | | | 10b | | | | | | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing bod | | | | 11a | Х | | | | | | |
| | Describe on Schedule O the process, if any, used by the organization to review this Form 990. | , | - ···· 3 ···· | | | | | | | | | |
| | Did the organization have a written conflict of interest policy? If "No," go to line 13 | | | | 12a | Х | | | | | | |
| | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise | | | | 12b | Х | | | | | | |
| | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y | | | | | | | | | | | |
| | on Schedule O how this was done | | | | 12c | x | | | | | | |
| 13 | Did the organization have a written whistleblower policy? | | | | 13 | Х | | | | | | |
| 14 | Did the organization have a written document retention and destruction policy? | | | | 14 | Х | | | | | | |
| 15 | Did the process for determining compensation of the following persons include a review and approva | | | | | | | | | | | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | | | | | | | | | |
| а | The organization's CEO, Executive Director, or top management official | | | | 15a | Х | | | | | | |
| | Other officers or key employees of the organization | | | | 15b | | Х | | | | | |
| | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. | | | | | | | | | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger | nent w | vith a | | | | | | | | | |
| | taxable entity during the year? | | | | 16a | | Х | | | | | |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate | | | | | | | | | | | |
| | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ | nizatio | n's | | | | | | | | | |
| | exempt status with respect to such arrangements? | | | | 16b | | | | | | | |
| Sec | tion C. Disclosure | | | | | | | | | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed CA | | | | | | | | | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a | nd 990 |)-T (section | 501(c)(3) | s only |) availa | able | | | | | |
| | for public inspection. Indicate how you made these available. Check all that apply. | | | | | | | | | | | |
| | X Own website Another's website X Upon request Other (explain | on Sc | hedule O) | | | | | | | | | |
| 19 | Describe on Schedule O whether (and if so, how) the organization made its governing documents, co | onflict | of interest p | oolicy, an | d finar | ncial | | | | | | |
| | statements available to the public during the tax year. | | | | | | | | | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's bo | oks an | d records | | | | | | | | | |
| | The Organization - (415) 834-0100 | | | | | | | | | | | |
| | 548 Market Street, 27400, San Francisco, CA 94104 | | | | | | | | | | | |

| 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| | 1 | <u> </u> | | | | | | , <u>, , , , , , , , , , , , , , , , , , </u> | , | |
|-------------------------------------|-----------------------------|--------------------------------|--|---------|--------------|---------------------------------|------------|---|-------------------------------|-----------------------|
| (A) | (B) (C) Average Position | | | | | | (D) | (E) | (F) | |
| Name and title | (do not check more than one | | | | than | | Reportable | Reportable | Estimated | |
| | hours per | | box, unless personal officer and a direction officer and a direction of the second sec | | | | | compensation | compensation | amount of |
| | week (list any | for | | | | | | . from the | from related organizations | other compensation |
| | hours for | Individual trustee or director | | | | p | | organization | (W-2/1099-MISC/ | from the |
| | related | tee or | trustee | | | en sa te | | (W-2/1099-MISC/ | 1099-NEC) | organization |
| | organizations | I trus | nal tru | | oyee | ompe | | 1099-NEC) | | and related |
| | below | ividua | Institutional t | Officer | Key employee | Highest compensated employee | mer | | | organizations |
| | line) | pul | lns | Offi | Key | Hig | For | | | |
| (1) Phil Hwang | 40.00 | | | | | | | 105 616 | | c 000 |
| Chief Executive Officer | 40.00 | | | X | | | | 185,616. | 0. | 6,800. |
| (2) Gail Quan | 40.00 | | | | | | | 140 540 | | 02 420 |
| Director, Legal, Operations, People | 10.00 | | | | | Х | | 148,748. | 0. | 23,438. |
| (3) Jay Lee | 40.00 | | | | | | | 100 556 | | 44 500 |
| Program Director | 10.00 | | | | | Х | | 129,556. | 0. | 11,593. |
| (4) Amy Kaizuka | 40.00 | | | | | | | | | |
| Program Director | 10.00 | | | | | Х | | 114,756. | 0. | 26,308. |
| (5) Patrick J. Fodell | 40.00 | | | | | | | 100 100 | | 4 - 4 0 0 |
| Program Director | | | | | | Х | | 102,196. | 0. | 15,198. |
| (6) Rob Nolan | 2.00 | | | | | | | | | |
| Treasurer/Chair (Trs. 6/23) | | Х | | х | | | | 0. | 0. | 0. |
| (7) Matthew Werdegar | 2.00 | | | | | | | | | |
| Chair/Immed. Past Chair (Trs. 6/23) | | Х | | х | | | | 0. | 0. | 0. |
| (8) Rebecca Justice Lazarus | 2.00 | | | | | | | | | |
| Vice Chair, Sec. (End 5/23) | | Х | | х | | | | 0. | 0. | 0. |
| (9) Sirena Castillo | 2.00 | | | | | | | | | |
| Board Member/VC, Sec. (Trs. 6/23) | | Х | | х | | | | 0. | 0. | 0. |
| (10) Judi A. McManigal | 2.00 | | | | | | | | | _ |
| Board Member/Treasurer (Trs. 6/23) | | Х | | Х | | | | 0. | 0. | 0. |
| (11) Christian Abasto | 1.00 | | | | | | | | | |
| Board Member | | Х | | | | | | 0. | 0. | 0. |
| (12) Benjamin Adams | 1.00 | | | | | | | | | |
| Board Member | | Х | | | | | | 0. | 0. | 0. |
| (13) Jennifer Chaloemtiarana | 1.00 | | | | | | | | | |
| Board Member (End 5/23) | | Х | | | | | | 0. | 0. | 0. |
| (14) Danielle Coleman | 1.00 | | | | | | | | | |
| Board Member | | Х | | | | | | 0. | 0. | 0. |
| (15) Ethan Dettmer | 1.00 | | | | | | | | | |
| Board Member | | Х | | | | | | 0. | 0. | 0. |
| (16) Andrea Fitanides | 1.00 | | | | | | | | | |
| Board Member | | Х | | | | | | 0. | 0. | 0. |
| (17) Vanessa Frank | 1.00 | | | | | | | | | |
| Board Member | | Х | | | | | | 0. | 0. | 0. |
| | | | | | | | | | | Corm 000 (2022) |

| Form 990 (2022) OneJustic | | | | | | | | | 94-2589 | 423 | 3 р | age 8 |
|---|-------------------|--------------------------------|-----------------------|---------|--------------|---------------------------------|--------|--------------------------|----------------------------------|--------|------------------------|--------------|
| Part VII Section A. Officers, Directors, Trus | tees, Key Em | ploy | vees | , an | d Hi | ighe | st C | Compensated Employe | es (continued) | | | |
| (A) (B) (C) (D) Name and title Average Position Reportable Re | | | | | | | | (E) | | | | |
| Name and title | Average | (do | | | | ۱ than | one | Reportable | Reportable | E | Stimate | ed |
| | hours per | | | | | is bot or/trus | | compensation | compensation | a | mount | of |
| | week (list any | | | | | | | _ from | from related | | other | |
| | hours for | lirecto | | | | | | the organization | organizations (W-2/1099-MISC/ | | mpensa from th | |
| | related | e or c | stee | | | satec | | (W-2/1099-MISC/ | 1099-NEC) | | ganizat | |
| | organizations | truste | al trus | | yee | mper | | 1099-NEC) | | | nd relat | |
| | below | Individual trustee or director | Institutional trustee | er | Key employee | est cc loyee | ler | , | | org | ganizati | ons |
| | line) | Indiv | Insti | Officer | Keye | Highest compensated employee | Former | | | | | |
| (18) David Leeb | 1.00 | | | | | | | | | | | • |
| Board Member | 1 00 | Х | | | | | | 0. | 0. | | | 0. |
| (19) Max Ochoa | 1.00 | 77 | | | | | | 0 | 0 | | | 0 |
| Board Member | 1.00 | Х | | | | <u> </u> | | 0. | 0. | | | 0. |
| (20) Kyuli Oh | 1.00 | x | | | | | | 0. | 0. | | | 0. |
| Board Member (End 5/23) (21) Cindy Panuco | 1.00 | ~ | | | | - | | 0. | 0. | | | 0. |
| Board Member | 1.00 | х | | | | | | 0. | 0. | | | 0. |
| (22) Toby Rothschild | 1.00 | Δ | | | | - | | | | | | 0. |
| Board Member | 1.00 | х | | | | | | 0. | 0. | | | 0. |
| (23) Ellen Sueda | 1.00 | 21 | | | | | | | | | | <u> </u> |
| Board Member (End 5/23) | | х | | | | | | 0. | 0. | | | Ο. |
| (24) Rachel Williams | 1.00 | | | | | | | | | | | |
| Board Member | | х | | | | | | 0. | 0. | | | 0. |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | <u> </u> | ~ |
| 1b Subtotal | | | | | | | | 680,872. | 0. | 1 | 33,3 | 37. |
| c Total from continuation sheets to Part V | | | | | | | | 0. | 0. | | <u></u> | <u> </u> |
| d Total (add lines 1b and 1c) | | | | | | | | 680,872. | | | 33,3 | 57. |
| 2 Total number of individuals (including but n compensation from the organization | ot limited to th | ose | liste | ed a | DOVe | e) wr | no r | eceived more than \$100 | ,000 of reportable | | | 5 |
| compensation norm the organization | | | | | | | | | | | Yes | No |
| 3 Did the organization list any former officer, | director truste | ee k | kev é | emn | love | e o | hic | hest compensated emi | olovee on | | | |
| line 1a? If "Yes," complete Schedule J for s | | | - | • | | | Ŭ | , | - | 3 | T | Х |
| 4 For any individual listed on line 1a, is the su | | | | | | | | | | | | |
| and related organizations greater than \$15 | | | | | | | | - | | 4 | X | |
| 5 Did any person listed on line 1a receive or a | | | | | | | | | | | | |
| rendered to the organization? If "Yes," com | plete Schedule | ə J f | or su | uch | pers | son . | | | | 5 | | Х |
| Section B. Independent Contractors | | | | | | | | | | | | |
| 1 Complete this table for your five highest co | mpensated ind | depe | ende | ent c | conti | racto | ors t | that received more than | \$100,000 of compen | sation | from | |
| the organization. Report compensation for | the calendar y | ear | endi | ng v | with | or w | ithir | n the organization's tax | year. | | | |
| (A) Name and business | addrosa | 377 | ~ *** | | | | | (B) Description of s | | | (C) ensatio | n |
| | 2001633 | INC | ONE | 2 | | | _ | Description of a | | Joinp | | |
| | | | | | | | | | | | | |
| | | | | | | | _ | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 2 Total number of independent contractors (i | ncluding but p | ot li | mit≏ | d to | tho | ise lie | ster | d above) who received n | ore than | | | |
| \$100,000 of compensation from the organi | • | | | | | 0 | | | | | | |

| | 990 t V | (2022) OneJustice | | | | 94-2589 | 423 Page |
|---|-------------------|---|--------------------|----------------------|--|--------------------------------------|--|
| a | | | | | | | |
| | | Check if Schedule O contains a response | or note to any lin | e in this Part VIII | (D) | (A) | |
| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue exclude from tax under sections 512 - 5 |
| ts | 1 : | Federated campaigns 1a | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | | Membership dues 1b | | | | | |
| | | · · · · · · · · · · · · · · · · · · · | 370,509. | | | | |
| Ā | | v | 570,505. | | | | |
| lia | | I Related organizations | 906,392. | | | | |
| Sin | | | 900,392. | | | | |
| ъ | f | All other contributions, gifts, grants, and | | | | | |
| Ð | | similar amounts not included above If | 527,738. | | | | |
| p | ç | Noncash contributions included in lines 1a-1f | 6,114. | | | | |
| an | ł | Total. Add lines 1a-1f | | 2,804,639. | | | |
| | | | Business Code | | | | |
| | 2 8 | Workshops & conference | 900099 | 126,807. | 126,807. | | |
| Revenue | ł | | 900099 | 103,675. | 103,675. | | |
| ЪС | | | | | | | |
| š | Č | | | | | | |
| Ř | | | | | | | |
| | e | | | | | | |
| | 1 | All other program service revenue | | 220 402 | | | |
| _ | ļ | Total. Add lines 2a-2f | | 230,482. | | | |
| | 3 | Investment income (including dividends, intere | st, and | | | | |
| | | other similar amounts) | | 9,423. | | | 9,42 |
| | 4 | Income from investment of tax-exempt bond p | roceeds | | | | |
| | 5 | Royalties | | | | | |
| | | (i) Real | (ii) Personal | | | | |
| | 6 a | Gross rents 6a 134,787. | | | | | |
| | | Less: rental expenses 6b 0. | | | | | |
| | | Rental income or (loss) 6c 134,787. | | | | | |
| | | | | 134,787. | | | 134,78 |
| | | Net rental income or (loss) Gross amount from sales of (i) Securities | (ii) Other | 134,707. | | | 131,70 |
| | 7 8 | | | | | | |
| | | assets other than inventory 7a | | | | | |
| | k | Less: cost or other basis | | | | | |
| | | and sales expenses 7b | | | | | |
| | C | Gain or (loss) | | | | | |
| Ĕ | | I Net gain or (loss) | | | | | |
| | 8 8 | Gross income from fundraising events (not | | | | | |
| 5 | | including \$ 370,509. of | | | | | |
| | | contributions reported on line 1c). See | | | | | |
| | | Part IV, line 18 | 45,846. | | | | |
| | ł | b Less: direct expenses 8b | 45,846. | | | | |
| | | | | 0. | | | |
| | | Gross income from gaming activities. See | | 5. | | | |
| | 5.6 | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | 10 a | Gross sales of inventory, less returns | | | | | |
| | | and allowances 10a | | | | | |
| | ł | Less: cost of goods sold 10b | | | | | |
| | 0 | Net income or (loss) from sales of inventory | | | | | |
| Ţ | | | Business Code | | | | |
| a | 11 a | Other income | 900099 | 5,006. | | | 5,00 |
| ň | t | | | | | | |
| eve | | | | | | | |
| ~ | | All other revenue | | | | | |
| ۳ | | | | | | 1 | 1 |
| Revenue | | Total. Add lines 11a-11d | | 5,006. | | | |

OneJustice

| | rt IX Statement of Functional Expense | es | | 94-25 | 89423 Page 10 |
|----|--|------------------------------|---|---|---------------------------------------|
| | ion 501(c)(3) and 501(c)(4) organizations must com | | ner organizations must co | mplete column (A). | |
| | Check if Schedule O contains a respon | se or note to any line in | this Part IX | | |
| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | | <u> </u> | · |
| | 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 | 200,967. | 157,103. | 22,925. | 20,939 |
| 6 | Compensation not included above to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 1,405,110. | 1,095,618. | 163,043. | 146,449 |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | 45,000. | 37,738. | 2,616. | 4,646 15,566 |
| 9 | Other employee benefits | 150,744. | 126,416. | 8,762. | 15,566 |
| 0 | Payroll taxes | 126,503. | 96,093. | 16,195. | 14,215 |
| 1 | Fees for services (nonemployees): | | | | |
| а | Management | | | | |
| b | Legal | | | | |
| С | Accounting | 75,145. | | 75,145. | |
| d | Lobbying | | | | |
| е | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other. (If line 11g amount exceeds 10% of line 25, | | | | |
| | column (A), amount, list line 11g expenses on Sch 0.) | 258,029. | 239,401. | 2,824. | 15,804 |
| 12 | Advertising and promotion | 415. | 139. | | 143 |
| 3 | Office expenses | 40,320. | 21,698. | 3,057. | 15,565 |
| 4 | Information technology | 49,866. | 35,831. | 11,670. | 2,365 |
| 5 | Royalties | | | | |
| 6 | Occupancy | 330,243. | 299,403. | 15,816. | 15,024 |
| 7 | Travel | 25,596. | 21,231. | 2,220. | 2,145 |
| 8 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 9 | Conferences, conventions, and meetings | 2,900. | 2,630. | | 270 |
| 0 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 2 | Depreciation, depletion, and amortization | | | | |
| 3 | Insurance | 10,889. | 8,003. | 1,807. | 1,079 |
| 4 | 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 | 14,892. | 9,238. | 1,151. | 4,503 |
| b | Training | 12,227. | 10,142. | 1,060. | 1,025 |
| с | Repairs and maintenance | 11,926. | 8,893. | 1,942. | 1,091 |
| d | Meals and entertainment | 10,416. | 7,629. | 2,027. | 760 |
| е | All other expenses | 8,220. | 1,916. | 30. | 6,274 |
| 25 | Total functional expenses. Add lines 1 through 24e | 2,779,408. | 2,179,122. | 332,423. | 267,863 |
| | laint ageta Complete this line only if the organization | | | | |

25 Total functional expenses. Add lines 1 through 24e
 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ______ if following SOP 98-2 (ASC 958-720)

OneJustice Part X Balance Sheet

| | | Check if Schedule O contains a response or no | te to an | line in this Part Y | | | |
|-----------------------------|----|--|------------|---------------------|--------------------------|----------|--------------------------------------|
| | | Offect in Schedule O contains a response of ho | ie iu all | | (A) | | (B) |
| | | | | | (A) Beginning of year | | End of year |
| | 1 | Cash - non-interest-bearing | | | 740,204. | 1 | 539,361. |
| | 2 | Savings and temporary cash investments | 1,296,667. | 2 | 1,661,132. | | |
| | 3 | Pledges and grants receivable, net | | | 752,211. | 3 | 1,152,453. |
| | 4 | Accounts receivable, net | | | 380,450. | 4 | 278,180. |
| | 5 | Loans and other receivables from any current o | | | | - | |
| | ľ | trustee, key employee, creator or founder, subs | | | | | |
| | | controlled entity or family member of any of the | | | | 5 | |
| | 6 | Loans and other receivables from other disqual | | | | Ŭ | |
| | | under section 4958(f)(1)), and persons describe | | | | 6 | |
| s | 7 | Notes and loans receivable, net | | | | 7 | |
| Assets | 8 | Inventories for sale or use | | | | 8 | |
| As | 9 | Prepaid expenses and deferred charges | | | 23,042. | 9 | 46,407. |
| | | Land, buildings, and equipment: cost or other | I I | | - , - | | - , - |
| | | basis. Complete Part VI of Schedule D | 10a | 16,847. | | | |
| | Ь | Less: accumulated depreciation | | 16,847. | 0. | 10c | 0. |
| | 11 | Investments - publicly traded securities | | | | 11 | ` |
| | 12 | Investments - other securities. See Part IV, line | | | | 12 | |
| | 13 | Investments - program-related. See Part IV, line | | | | 13 | |
| | 14 | Intangible assets | | | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | 7,702. | 15 | 193,540. | |
| | 16 | Total assets. Add lines 1 through 15 (must equ | 3,200,276. | 16 | 3,871,073. | | |
| | 17 | Accounts payable and accrued expenses | 336,871. | 17 | 409,784. | | |
| | 18 | Grants payable | | | - | 18 | |
| | 19 | Deferred revenue | | | 101,991. | 19 | 106,050. |
| | 20 | Tax-exempt bond liabilities | | | | 20 | |
| | 21 | Escrow or custodial account liability. Complete | | | | 21 | |
| S | 22 | Loans and other payables to any current or forr | | | | | |
| litie | | trustee, key employee, creator or founder, subs | | | | | |
| Liabilities | | controlled entity or family member of any of the | | | | 22 | |
| | 23 | Secured mortgages and notes payable to unrel | ated thi | d parties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelate | d third | parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, pa | | | | | |
| | | parties, and other liabilities not included on line | s 17-24) | Complete Part X | | | |
| | | of Schedule D | | | 0. | 25 | 188,896. |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 438,862. | 26 | 704,730. |
| s | | Organizations that follow FASB ASC 958, che | eck her | | | | |
| JCe | | and complete lines 27, 28, 32, and 33. | | | | | |
| alar | 27 | Net assets without donor restrictions | | | 1,047,336. | 27 | 1,131,814. |
| Ë | 28 | Net assets with donor restrictions | | | 1,714,078. | 28 | 2,034,529. |
| ů | | Organizations that do not follow FASB ASC 9 | 958, che | ck here | | | |
| Net Assets or Fund Balances | | and complete lines 29 through 33. | | | | | |
| its (| 29 | Capital stock or trust principal, or current funds | | | | 29 | |
| sse | 30 | Paid-in or capital surplus, or land, building, or ea | | | | 30 | |
| žА | 31 | Retained earnings, endowment, accumulated in | | | | 31 | |
| Ň | 32 | Total net assets or fund balances | | | 2,761,414. | 32 | 3,166,343. |
| | 33 | Total liabilities and net assets/fund balances | | | 3,200,276. | 33 | 3,871,073. Form 990 (2022) |

Form **990** (2022)

| Form | 1 990 (2022) OneJustice | 94-258 | 9423 | Pa | ge 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 | Total revenue (must equal Part VIII, column (A), line 12) | | 3,18 | | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 2,77 | | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | | 29. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 2,76: | 1,4 | 14. |
| 5 | Net unrealized gains (losses) on investments | 5 | | | |
| 6 | Donated services and use of facilities | 6 | | | |
| 7 | Investment expenses | 7 | | | |
| 8 | Prior period adjustments | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | | | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, | | | | |
| | column (B)) | 10 | 3,16 | 6,3 | 43. |
| Pa | rt XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul | e O. | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed | d on a | | | |
| | separate basis, consolidated basis, or both: | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | X | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat | e basis, | | | |
| | consolidated basis, or both: | | | | |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| с | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | e audit, | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | 2c | Х | |
| | If the organization changed either its oversight process or selection process during the tax year, explain on Scl | nedule O. | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the | | | | |
| | Uniform Guidance, 2 C.F.R. Part 200, Subpart F? | | 3a | | X |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ | | | | |
| | or audits, explain why on Schedule O and describe any steps taken to undergo such audits | | 3b | | |

Form **990** (2022)

| SCHEDULE A |
|------------|
|------------|

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

| OMB No. 1545-0047 |
|------------------------------|
| 2022 |
| Open to Public Inspection |

| Employer | ide | entification | number |
|----------|-----|--------------|------------|
| <u>م</u> | 4 | 0004 | ^ ^ |

| | | | ustice | | | | | | 4-2589423 | | | |
|------|-------|--|--------------------------|--|-------------------------------------|---------------------------------|-----------------|---------------|----------------------------|--|--|--|
| Ра | rt I | Reason for Public | Charity Status. | (All organizations must c | omplete th | nis part.) S | See instructior | IS. | | | | |
| The | organ | ization is not a private found | lation because it is: (| For lines 1 through 12, o | heck only | one box.) | | | | | | |
| 1 | | A church, convention of ch | urches, or associatio | on of churches described | d in sectio | n 170(b)(| 1)(A)(i). | | | | | |
| 2 | | A school described in sect | ion 170(b)(1)(A)(ii). (/ | Attach Schedule E (Forn | n 990).) | | | | | | | |
| 3 | | A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). | | | | | | | | | | |
| 4 | | A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, | | | | | | | | | | |
| | | city, and state: | | | | | | | | | | |
| 5 | | An organization operated for the benefit of a college or university owned or operated by a governmental unit described in | | | | | | | | | | |
| | | section 170(b)(1)(A)(iv). (Complete Part II.) | | | | | | | | | | |
| 6 | | A federal, state, or local go | - | | | | | | | | | |
| 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). (C | | | | | | | | | | |
| 8 | | A community trust describe | | | | | | | | | | |
| 9 | | An agricultural research org | | | | - | | - | - | | | |
| | | or university or a non-land-o | grant college of agric | ulture (see instructions). | Enter the | name, cit | y, and state o | f the colleg | e or | | | |
| | | university: | | | | | | | | | | |
| 10 | | An organization that norma | | | | | | | | | | |
| | | activities related to its exen | | - | | | | | - | | | |
| | | income and unrelated busin | | (less section 511 tax) fr | om busine | sses acqu | lired by the or | ganization | after June 30, 1975. | | | |
| | | See section 509(a)(2). (Con | . , | | (-h. 0 | | 20(-)(4) | | | | | |
| 11 | | An organization organized a | • | , . | | | | | numpered of one or | | | |
| 12 | | An organization organized a | • | | • | | - | • | | | | |
| | | more publicly supported or | | | | | | | | | | |
| 2 | | lines 12a through 12d that Type I. A supporting orga | | | | | | | aivina | | | |
| а | L | the supported organization | - | - | • | - | | | | | | |
| | | organization. You must o | | | a majority (| | | | apporting | | | |
| b | | Type II. A supporting org | - | | tion with it | s support | ed organizatio | on(s) by ha | vina | | | |
| | | control or management o | - | | | | - | | - | | | |
| | | organization(s). You mus | | | | | | igo ino oup | portou | | | |
| с | | Type III functionally inte | | | in connec | tion with. | and functiona | llv integrate | ed with. | | | |
| | | its supported organizatio | | | | | | ., | , | | | |
| d | | Type III non-functionally | | | | | | rted organi | zation(s) | | | |
| | | that is not functionally int | | | | | | - | | | | |
| | | requirement (see instruct | ions). You must con | nplete Part IV, Sections | A and D, | and Part | v. | | | | | |
| е | | Check this box if the orga | anization received a v | written determination fro | om the IRS | that it is a | а Туре I, Туре | II, Type III | | | | |
| | | functionally integrated, or | r Type III non-functio | nally integrated support | ing organi: | zation. | | | | | | |
| f | Ente | er the number of supported o | organizations | | | | | | | | | |
| g | | vide the following information | | | | <u> </u> | | | | | | |
| | (| i) Name of supported | (ii) EIN | (iii) Type of organization (described on lines 1-10 | (iv) Is the orga in your governi | nization listed ng document? | (v) Amount of | - | (vi) Amount of other | | | |
| | | organization | | above (see instructions)) | Yes | No | support (see ir | istructions) | support (see instructions) | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
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| Tota | | | | | | | | | | | | |

Schedule A (Form 990) 2022

OneJustice

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

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

| Sec | ction A. Public Support | | | | | | | | | |
|----------|---|-----------------|----------------------|-----------------------|--------------------|--------------------|--------------------------|--|--|--|
| Cale | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total | | | |
| 1 | Gifts, grants, contributions, and | | | | | | | | | |
| | membership fees received. (Do not | | | | | | | | | |
| | include any "unusual grants.") | 1,698,184. | 2,485,151. | 2,418,595. | 3,219,685. | 2,804,639. | 12,626,254. | | | |
| 2 | Tax revenues levied for the organ- | | | | | | | | | |
| | ization's benefit and either paid to | | | | | | | | | |
| | or expended on its behalf | | | | | | | | | |
| 3 | The value of services or facilities | | | | | | | | | |
| | furnished by a governmental unit to | | | | | | | | | |
| | the organization without charge | | | | | | | | | |
| 4 | Total. Add lines 1 through 3 | 1,698,184. | 2,485,151. | 2,418,595. | 3,219,685. | 2,804,639. | 12,626,254. | | | |
| | 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, | | | | | | | | | |
| | L | | | | | | | | | |
| 6 | Public support. Subtract line 5 from line 4. | | | | | | 12,626,254. | | | |
| _ | tion B. Total Support | | | | | | 12,020,234. | | | |
| | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total | | | |
| | Amounts from line 4 | 1,698,184. | 2,485,151. | 2,418,595. | 3,219,685. | 2,804,639. | 12,626,254. | | | |
| 8 | Gross income from interest, | _,020,2011 | | ,, | •,===,==• | _, | | | | |
| 0 | | | | | | | | | | |
| | dividends, payments received on | | | | | | | | | |
| | securities loans, rents, royalties, | 783. | 3,742. | 47,079. | 58,682. | 144,210. | 254,496. | | | |
| ~ | and income from similar sources | /05. | 5,742. | <u> </u> | 50,002. | 111,210. | 234,490. | | | |
| 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 | ED 043 | | 1 072 | F 006 | 60 441 | | | |
| | assets (Explain in Part VI.) | 1,519. | 52,843. | | 1,073. | 5,006. | - | | | |
| | Total support. Add lines 7 through 10 | | | | | 1 | 12,941,191. ,611,889. | | | |
| | Gross receipts from related activities, | , | , | | | | ,011,009. | | | |
| 13 | First 5 years. If the Form 990 is for th | - | st, second, third, f | ourth, or fifth tax y | ear as a section t | 501(c)(3) | | | | |
| <u> </u> | organization, check this box and stop | | | | | | | | | |
| - | tion C. Computation of Public | | | (7) | | | 97.57 % | | | |
| | Public support percentage for 2022 (I | | | | | 14 | 00 85 | | | |
| | Public support percentage from 2021 | | | | | 15 | | | | |
| 16a | 33 1/3% support test - 2022. If the c | - | | | | | | | | |
| | stop here. The organization qualifies | | | | | | | | | |
| b | 33 1/3% support test - 2021. If the c | | | | | | | | | |
| | and stop here. The organization quali | | | | | | | | | |
| 17a | 7a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, | | | | | | | | | |
| | and if the organization meets the fact | | | - | - | VI how the organiz | ation | | | |
| | meets the facts-and-circumstances te | • | • • | <i>,</i> | • | | | | | |
| b | 10% -facts-and-circumstances test | - | | | | | 10% or | | | |
| | more, and if the organization meets th | | | | | | | | | |
| | organization meets the facts-and-circu | | - | | | | | | | |
| 18 | 8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | | | | | | | | | |

Schedule A (Form 990) 2022

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 | | | | | | | |
|------|--|---|-------------------|---------------------|-------------------|----------------|---------------------|--|
| Cale | endar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | 2 (f) Total | |
| 1 | Gifts, grants, contributions, and | | | | | | | |
| | membership fees received. (Do not | | | | | | | |
| | include any "unusual grants.") | | | | | | | |
| 2 | Gross receipts from admissions, | | | | | | | |
| | merchandise sold or services 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 | | | | | | | |
| k | 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 | | | | | | | |
| ć | 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) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | 2 (f) Total | |
| | Amounts from line 6 | | | | | | | |
| | Gross income from interest, | | | | | | | |
| | dividends, payments received on | | | | | | | |
| | securities loans, rents, royalties, and income from similar sources | | | | | | | |
| k | Unrelated business taxable income | | | | | | | |
| | (less section 511 taxes) from businesses | | | | | | | |
| | acquired after June 30, 1975 | | | | | | | |
| c | 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 | | | | | | | |
| 13 | assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | | |
| | First 5 years. If the Form 990 is for th | Le organization's f | irst second third | fourth or fifth tax | vear as a section | 501(c)(3) orga | I | |
| •• | check this box and stop here | - | | | - | | | |
| Se | ction C. Computation of Publ | | | | | | | |
| | Public support percentage for 2022 (| | | column (f)) | | 15 | % | |
| 16 | Public support percentage from 2021 | | | | | 16 | % | |
| Se | ction D. Computation of Inve | | | | | • | | |
| 17 | - | | | | | 17 | % | |
| 18 | | nt income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) 17 nt income percentage from 2021 Schedule A, Part III, line 17 18 | | | | | | |
| | a 33 1/3% support tests - 2022. If the | | | | | | // l line 17 is not | |
| | more than 33 1/3%, check this box a | - | | | | | | |
| ł | 33 1/3% support tests - 2021. If the | | | | | | | |
| • | line 18 is not more than 33 $1/3\%$, che | • | | | | | | |
| 20 | | | | | | | | |
| _ | | | , | , | | | | |

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

| Schedule A | | | |
|------------|--------|------|---------------------------|
| Part IV | Suppor | ting | Organizations (continued) |

| | | | Yes | No |
|-----|---|-----|-----|----|
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described on lines 11b and | | | |
| | 11c below, the governing body of a supported organization? | 11a | | |
| b | A family member of a person described on line 11a above? | 11b | | |
| с | A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide | | | |
| | detail in Part VI. | 11c | | |
| Sec | tion 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 one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported | | | |
| | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in | | | |
| | Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, | | | |
| | supervised, or controlled the supporting organization. | 2 | | |
| Sec | tion C. Type II Supporting Organizations | - | - | |
| | | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors | | | |

| - | ······································ | | |
|---|---|---|--|
| | or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control | | |
| | or management of the supporting organization was vested in the same persons that controlled or managed | | |
| | the supported organization(s). | 1 | |

|--|

| | | | 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 | | | |
| | supported organizations played in this regard. | 3 | | |

Section 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).
- a L The organization satisfied the Activities Test. Complete line 2 below.
- **b** _____ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- c L The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

| Pa | Type in Non-Functionally integrated 509(a)(5) Supportin | ig Orga | inizations | | | | | | |
|--------|---|-------------|-----------------------------|--------------------------------|--|--|--|--|--|
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifyir | ng trust or | n Nov. 20, 1970 (explain in | Part VI). See instructions. | | | | | |
| | All other Type III non-functionally integrated supporting organizations must complete Sections A through E. | | | | | | | | |
| Sec | ion A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) | | | | | |
| 1 | Net short-term capital gain | 1 | | | | | | | |
| 2 | Recoveries of prior-year distributions | 2 | | | | | | | |
| 3 | Other gross income (see instructions) | 3 | | | | | | | |
| 4 | Add lines 1 through 3. | 4 | | | | | | | |
| 5 | Depreciation and depletion | 5 | | | | | | | |
| 6 | Portion of operating expenses paid or incurred for production or | | | | | | | | |
| | collection of gross income or for management, conservation, or | | | | | | | | |
| | maintenance of property held for production of income (see instructions) | 6 | | | | | | | |
| 7 | Other expenses (see instructions) | 7 | | | | | | | |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | | | | | | | |
| Sec | ion B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) | | | | | |
| 1 | Aggregate fair market value of all non-exempt-use assets (see | | | | | | | | |
| | instructions for short tax year or assets held for part of year): | | | | | | | | |
| а | Average monthly value of securities | 1a | | | | | | | |
| b | Average monthly cash balances | 1b | | | | | | | |
| с | Fair market value of other non-exempt-use assets | 1c | | | | | | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | | | | | | |
| е | Discount claimed for blockage or other factors | | | | | | | | |
| | (explain in detail in Part VI): | | | | | | | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | | | | | | |
| 3 | Subtract line 2 from line 1d. | 3 | | | | | | | |
| 4 | Cash deemed held for exempt use. Enter 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 | | | | | | | |
| Sec | 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 | | | | | | | |
| | | | | | | | | | |
| | Income tax imposed in prior year | 5 | | | | | | | |
| 5 6 | | 5 | | | | | | | |

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2022

 Schedule A (Form 990) 2022
 OneJustice

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

Part VI. See instructions.

and 4c. 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020 d Excess from 2021 e Excess from 2022

7 Excess distributions carryover to 2023. Add lines 3j

| <u>Sch</u> e | dule A (Form 990) 2022 OneJustice | | | 94 | 4-2589423 _{Pa} |
|--------------|--|-------------------------------|---------------------------------------|------|--|
| Pa | rt V Type III Non-Functionally Integrated 509 | (a)(3) Supporting Orga | anizations _{(continu} | ued) | |
| Sect | ion D - Distributions | | | | Current Year |
| 1 | Amounts paid to supported organizations to accomplish exe | empt purposes | | 1 | |
| 2 | Amounts paid to perform activity that directly furthers exemption | pt purposes of supported | | | |
| | organizations, in excess of income from activity | | | 2 | |
| 3 | Administrative expenses paid to accomplish exempt purpos | es of supported organization | s | 3 | |
| 4 | Amounts paid to acquire exempt-use assets | | | 4 | |
| 5 | Qualified set-aside amounts (prior IRS approval required - pro | ovide details in Part VI) | | 5 | |
| 6 | Other distributions (describe in Part VI). See instructions. | | | 6 | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | 7 | |
| 8 | Distributions to attentive supported organizations to which t | he organization is responsive |) | | |
| | (provide details in Part VI). See instructions. | | | 8 | |
| 9 | Distributable amount for 2022 from Section C, line 6 | | | 9 | |
| 10 | Line 8 amount divided by line 9 amount | | | 10 | |
| Sect | ion E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistribution Pre-2022 | ns | (iii) Distributable Amount for 202 |
| 1 | Distributable amount for 2022 from Section C, line 6 | | | | |
| 2 | Underdistributions, if any, for years prior to 2022 (reason- | | | | |
| | able cause required - explain in Part VI). See instructions. | | | | |
| 3 | Excess distributions carryover, if any, to 2022 | | | | |
| а | From 2017 | | | | |
| b | From 2018 | | | | |
| с | From 2019 | | | | |
| d | From 2020 | | | | |
| е | From 2021 | | | | |
| f | Total of lines 3a through 3e | | | | |
| g | Applied to underdistributions of prior years | | | | |
| h | Applied to 2022 distributable amount | | | | |
| i | Carryover from 2017 not applied (see instructions) | | | | |
| j | Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | | |
| 4 | Distributions for 2022 from Section D, | | | | |
| | line 7: \$ | | | | |
| а | Applied to underdistributions of prior years | | | _ | |
| b | Applied to 2022 distributable amount | | | | |
| с | Remainder. Subtract lines 4a and 4b from line 4. | | | | |
| 5 | Remaining underdistributions for years prior to 2022, if | | | | |
| | any. Subtract lines 3g and 4a from line 2. For result greater | | | | |
| | than zero, explain in Part VI. See instructions. | | | | |
| 6 | Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in</i> | | | | |

Schedule A (Form 990) 2022

| Schedule A | (Form 990) 2022 | OneJustice | 94-2589423 Page 8 |
|------------|--|---|---|
| Part VI | Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D, | mation. Provide the explanations required by Part II, line 10; Part II, line 17a or , 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additio | r 17b; Part III, line 12; and 2; Part IV, Section C, /, Section B, line 1e; Part V, |
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| SCHEDULE C | OMB No. 1545-0047 | | | | | | |
|--|--|--|--|---|--|--|--|
| (Form 990) | 2022 | | | | | | |
| | 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. | | | | | | |
| Department of the Treasury Internal Revenue Service | epartment of the Treasury | | | | | | |
| Section 501(c)(3) org Section 501(c) (other Section 527 organization | ganizations: Com r than section 50 ations: Complete | n Form 990, Part IV, line 3, or For nplete Parts I-A and B. Do not com D1(c)(3)) organizations: Complete F e Part I-A only. In Form 990, Part IV, line 4, or For | plete Part I-C. Parts I-A and C below. | Do not complete Part I- | В. | | |
| Section 501(c)(3) org | anizations that | have filed Form 5768 (election unc have NOT filed Form 5768 (electio | ler section 501(h)): Co | omplete Part II-A. Do not | complete Part II-B. | | |
| | | n Form 990, Part IV, line 5 (Proxy | | | | | |
| Tax) (See separate inst | | | | | | | |
| | , or (6) organizat | tions: Complete Part III. | | | | | |
| Name of organization | OneJust | ice | | Em | ployer identification number 94-2589423 | | |
| Part I-A Comple | | anization is exempt unde | r section 501(c) | or is a section 527 | | | |
| | | , | | | <u> </u> | | |
| 1 Provide a description | on of the organiz | ation's direct and indirect political | campaign activities ir | n Part IV. | | | |
| | | ures | | | \$ | | |
| 3 Volunteer hours for | political campai | gn activities | | | | | |
| Ded D. Osmal | | | | 0) | | | |
| - | | anization is exempt unde | . , , | | | | |
| | | incurred by the organization unde incurred by organization manager | | | | | |
| | | n 4955 tax, did it file Form 4720 fo | | | | | |
| | | | | | | | |
| b If "Yes," describe in | | | | | | | |
| | | janization is exempt unde | r section 501(c), | except section 50 | 1(c)(3). | | |
| 1 Enter the amount d | irectly expended | d by the filing organization for sect | ion 527 exempt funct | ion activities | \$ | | |
| | | ization's funds contributed to othe | - | | | | |
| | | | | | \$ | | |
| | - | . Add lines 1 and 2. Enter here and | | | • | | |
| | | 1100 DOL for this year? | | | | | |
| | | 1120-POL for this year? | | | | | |
| made payments. Fo | or each organiza ved that were pr | tion listed, enter the amount paid omptly and directly delivered to a additional space is needed, provid | from the filing organiz separate political orga | ation's funds. Also enter anization, such as a sepa | the amount of political | | |
| (a) Name | 3 | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter -0 | contributions received and | | |
| | | | | | | | |
| | | | | | | | |
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| | | | | | | | |

| | OneJustic | | | 94-2 | 589423 Page 2 | | | | | |
|--|---|---|---------------------------|---|---------------------------------------|--|--|--|--|--|
| Part II-A Complete if the org | janization is e | xempt under section | on 501(c)(3) and fil | ed Form 5768 (el | ection under | | | | | |
| section 501(h)). | | | | | | | | | | |
| | - | affiliated group (and list i | n Part IV each affiliated | group member's nam | e, address, EIN, | | | | | |
| | expenses, and share of excess lobbying expenditures). | | | | | | | | | |
| B Check if the filing organiza | tion checked box | A and "limited control" pr | ovisions apply. | | | | | | | |
| | ts on Lobbying E ditures" means a | xpenditures mounts paid or incurred |) | (a) Filing organization's totals | (b) Affiliated group totals | | | | | |
| 1a Total lobbying expenditures to influ | uence public opin | on (grassroots lobbving) | | 5,385. | | | | | | |
| b Total lobbying expenditures to influ | | | | 8,010. | | | | | | |
| c Total lobbying expenditures (add li | | | | 13,395. | | | | | | |
| d Other exempt purpose expenditure | | | | 2,766,013. | | | | | | |
| e Total exempt purpose expenditure | | | | 2,779,408. | | | | | | |
| f Lobbying nontaxable amount. Ente | | | | 288,970. | | | | | | |
| If the amount on line 1e, column (a) o | | lobbying nontaxable am | | | | | | | | |
| Not over \$500,000 | | of the amount on line 1e | | | | | | | | |
| Over \$500,000 but not over \$1,000 | 0,000 \$10 | 0,000 plus 15% of the ex | cess over \$500,000. | | | | | | | |
| Over \$1,000,000 but not over \$1,5 | | 5,000 plus 10% of the ex | cess over \$1,000,000. | | | | | | | |
| Over \$1,500,000 but not over \$17, | | 5,000 plus 5% of the exce | | | | | | | | |
| Over \$17,000,000 | \$1,0 | 00,000. | | | | | | | | |
| | | , | | | | | | | | |
| g Grassroots nontaxable amount (er | ter 25% of line 11 | | | 72,243. | | | | | | |
| h Subtract line 1g from line 1a. If zer | o or less, enter -0 | | | 0. | | | | | | |
| i Subtract line 1f from line 1c. If zero | o or less, enter -0- | | | 0. | | | | | | |
| j If there is an amount other than ze | ro on either line 1 | n or line 1i, did the organiz | ation file Form 4720 | | | | | | | |
| reporting section 4911 tax for this | year? | | | | Yes No | | | | | |
| (Some organizations the second s | hat made a secti | Averaging Period Under on 501(h) election do not parate instructions for li | have to complete all | of the five columns b | elow. | | | | | |
| | Lobbying E | penditures During 4-Ye | ar Averaging Period | | | | | | | |
| Calendar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) Total | | | | | |
| 2a Lobbying nontaxable amount | 301,34 | 8. 265,479. | 279,744. | 288,970. | 1,135,541. | | | | | |
| b Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | 1,703,312. | | | | | |
| c Total lobbying expenditures | 9,31 | 5. 3,853. | 6,111. | 13,395. | 32,674. | | | | | |
| d Grassroots nontaxable amount | 75,33 | 7. 66,370. | 69,936. | 72,243. | 283,886. | | | | | |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 425,829. | | | | | |
| f Grassroots lobbying expenditures | 4,80 | 6. 1,975. | 3,740. | 5,385. | 15,906. | | | | | |

Schedule C (Form 990) 2022

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

| For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description | | (a) | |) |
|---|-----------|-----------|-------|---------|
| of the lobbying activity. | Yes | No | Amo | ount |
| During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? | | | | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | | |
| c Media advertisements? | | | | |
| d Mailings to members, legislators, or the public? | | | | |
| e Publications, or published or broadcast statements? | | | | |
| f Grants to other organizations for lobbying purposes? | | | | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | | |
| i Other activities? | | | | |
| j Total. Add lines 1c through 1i | | | | |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | | |
| b If "Yes," enter the amount of any tax incurred under section 4912 | | | | |
| c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | | |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | - | | |
| Part III-A Complete if the organization is exempt under section 501(c)(4), section | n 501(c)(| 5), or se | ction | |
| 501(c)(6). | | | | |
| | | | Yes | No |
| 1 Were substantially all (90% or more) dues received nondeductible by members? | | | | |
| 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 th | | | | |
| Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." | | | | e 3, is |
| 1 Dues, assessments and similar amounts from members | | 1 | | |
| 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic | | | | |
| expenses for which the section 527(f) tax was paid). | | | | |
| a Current year | | 2a | | |
| b Carryover from last year | | 2b | | |
| c Total | | 2c | | |
| 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | | 3 | | |
| 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc | ess | | | |
| does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p | olitical | | | |
| expenditures next year? | | | | |
| 5 Taxable amount of lobbying and political expenditures. See instructions | | 5 | | |
| Part IV Supplemental Information | | | | |

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Department of the Treasury Internal Revenue Service

| (Form 9 | 90) |
|---------|-----|
|---------|-----|

232051 09-01-22

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

Employer identification number

| Nam | e of the organization OneJustice | | | Employer identification number 94-2589423 |
|-----|---|--|---------------------------------------|--|
| Par | | d Funds or Othe | er Similar Funds | |
| | organization answered "Yes" on Form 990, Part IV, lin | | | |
| | j | (a) Donor adv | /ised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | () | | () |
| 2 | Aggregate value of contributions to (during year) | | | |
| 3 | Aggregate value of grants from (during year) | | | |
| 4 | Aggregate value of grains norm (during year) | | | |
| 5 | Did the organization inform all donors and donor advisors in v | writing that the assets | s held in donor advise | d funds |
| 5 | are the organization's property, subject to the organization's | - | | |
| 6 | Did the organization inform all grantees, donors, and donor a | | | |
| U | for charitable purposes and not for the benefit of the donor o | - | - | - |
| | | | | |
| Par | t II Conservation Easements. Complete if the org | anization answered ' | "Yes" on Form 990 P; | |
| 1 | Purpose(s) of conservation easements held by the organizati | | | |
| • | Preservation of land for public use (for example, recrea | · · · · · | | historically important land area |
| | Protection of natural habitat | [| | certified historic structure |
| | Preservation of open space | | | |
| 2 | Complete lines 2a through 2d if the organization held a qualif | ied conservation con | tribution in the form o | f a conservation easement on the last |
| - | day of the tax year. | | | Held at the End of the Tax Year |
| а | Total number of conservation easements | | | 2a |
| b | | | | |
| c | Number of conservation easements on a certified historic stru | | | |
| | Number of conservation easements included in (c) acquired a | | | |
| | historic structure listed in the National Register | • | | 2d |
| 3 | Number of conservation easements modified, transferred, rel | | | |
| - | year | , eaced, example of the second s | | |
| 4 | Number of states where property subject to conservation eas | sement is located | | |
| 5 | Does the organization have a written policy regarding the per | | pection, handling of | |
| | violations, and enforcement of the conservation easements it | | · · · · · · · · · · · · · · · · · · · | Yes No |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, | | | |
| | | 0 | , 0 | с , |
| 7 | Amount of expenses incurred in monitoring, inspecting, hand | lling of violations, and | d enforcing conservati | on easements during the year |
| | | | | |
| 8 | Does each conservation easement reported on line 2(d) abov | e satisfy the requiren | nents of section 170(h | n)(4)(B)(i) |
| | and section 170(h)(4)(B)(ii)? | | | |
| 9 | In Part XIII, describe how the organization reports conservation | | | |
| | balance sheet, and include, if applicable, the text of the footr | note to the organization | on's financial statemer | nts that describes the |
| | organization's accounting for conservation easements. | | | |
| Par | t III Organizations Maintaining Collections of | • | Treasures, or Otl | her Similar Assets. |
| | Complete if the organization answered "Yes" on Form | 990, Part IV, line 8. | | |
| 1a | If the organization elected, as permitted under FASB ASC 95 | | | |
| | of art, historical treasures, or other similar assets held for pub | | | • |
| | service, provide in Part XIII the text of the footnote to its finar | | | |
| b | If the organization elected, as permitted under FASB ASC 95 | | | |
| | art, historical treasures, or other similar assets held for public | exhibition, educatior | n, or research in furthe | erance of public service, |
| | provide the following amounts relating to these items: | | | |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | | |
| | | | | |
| 2 | If the organization received or held works of art, historical treater | | | gain, provide |
| | the following amounts required to be reported under FASB A | | | |
| | Revenue included on Form 990, Part VIII, line 1 | | | |
| | Assets included in Form 990, Part X | | | |
| LHA | For Paperwork Reduction Act Notice, see the Instructions | s for Form 990. | | Schedule D (Form 990) 2022 |

| _ | dule D (Form 990) 2022 OneJust | | | | | | | | | B Page 2 |
|---------|--|--|------------|----------------|---------------------|------------|--------------------------|-----------|-------------------|------------|
| Par | t III Organizations Maintaining C | ollections of A | rt, His | torical Tr | easures, | or Othe | er Similaı | r Asse | ts (contin | ued) |
| 3 | Using the organization's acquisition, accessi | on, and other record | ls, chec | k any of the | following that | at make s | significant u | se of its | | |
| | collection items (check all that apply): | | | | | | | | | |
| а | Public exhibition | d | | Loan or exc | hange progra | am | | | | |
| b | Scholarly research | е | • | Other | | | | | | |
| С | Preservation for future generations | | | | | | | | | |
| 4 | Provide a description of the organization's co | ollections and explai | n how tł | ney further t | he organizati | ion's exe | mpt purpos | e in Par | t XIII. | |
| 5 | During the year, did the organization solicit o | | | | | | | | - | |
| | to be sold to raise funds rather than to be ma | | | | | | | | Yes | No No |
| Par | t IV Escrow and Custodial Arran | | ete if the | organizatio | n answered | "Yes" on | Form 990, | Part IV, | line 9, or | |
| | reported an amount on Form 990, Par | | | | | | | | | |
| 1a | Is the organization an agent, trustee, custodi | | | | | | | | ٦., | <u> </u> |
| | on Form 990, Part X? | | | | | | | L | Yes | └── No |
| b | If "Yes," explain the arrangement in Part XIII | and complete the fo | llowing | table: | | | | | Amount | |
| | | | | | | | | | Amount | |
| | Beginning balance | | | | | | | | | |
| | Additions during the year | | | | | | | | | |
| | Distributions during the year | | | | | | | | | |
| t 20 | Ending balance Did the organization include an amount on Fe | | | | | | | | Yes | No |
| | If "Yes," explain the arrangement in Part XIII. | | | | | | | | | |
| Par | | | | | | | | | | |
| | | (a) Current year | | Prior year | | | (d) Three yea | ars back | (e) Four | years back |
| 1a | Beginning of year balance | () | . , | , , | | | () | | () | |
| | Contributions | | | | | | | | | |
| | Net investment earnings, gains, and losses | | | | | | | | | |
| | Grants or scholarships | | | | | | | | | |
| | Other expenditures for facilities | | | | | | | | | |
| | and programs | | | | | | | | | |
| f | Administrative expenses | | | | | | | | | |
| | End of year balance | | | | | | | | | |
| 2 | Provide the estimated percentage of the curr | rent year end baland | e (line 1 | g, column (a | a)) held as: | | | | | |
| а | Board designated or quasi-endowment | | % | | | | | | | |
| b | Permanent endowment | % | | | | | | | | |
| с | Term endowment | % | | | | | | | | |
| | The percentages on lines 2a, 2b, and 2c sho | uld equal 100%. | | | | | | | | |
| 3a | Are there endowment funds not in the posse | ssion of the organiz | ation tha | at are held a | nd administe | ered for t | he | | _ | |
| | organization by: | | | | | | | | | Yes No |
| | (i) Unrelated organizations | | | | | | | | 3a(i) | |
| | (ii) Related organizations | | | | | | | | | |
| b | If "Yes" on line 3a(ii), are the related organization | | | | | | | | 3b | |
| 4 | Describe in Part XIII the intended uses of the | | owment | funds. | | | | | | |
| Par | t VI Land, Buildings, and Equipm | | | | | | | | | |
| | Complete if the organization answered | | | | | | | | | |
| | Description of property | (a) Cost or o basis (investr | | • • | or other (other) | | ccumulated preciation | | (d) Book | value |
| 1a | Land | | | | | | | | | |
| | Buildings | | | | | | | | | |
| С | Leasehold improvements | | | | <u> </u> | | 10.00 | _ | | |
| | Equipment | | | 1 | 6,847. | | 16,84 | 7. | | 0. |
| | Other | | | | | | | | | |
| Tota | . Add lines 1a through 1e. (Column (d) must e | qual Form 990, Part | X, colur | nn (B), line 1 | 10c.) | | | | | 0. |

Schedule D (Form 990) 2022

| Complete if the organization answered "Yes" | on Form 990, Part IV, line | e 11b. See Form 990, Part X, line 12. | |
|--|-----------------------------|--|-----------------------|
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end | -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" | | | |
| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end | -of-year market value |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) | | | |
| Part IX Other Assets. | an Farma 000 Davit IV/ line | 11d Cas Farm 000 Dart V line 15 | |
| Complete if the organization answered "Yes" | Description | 11d. See Form 990, Part X, line 15. | (b) Book value |
| | Description | | (D) DOOK VAIUE |
| <u>(1)</u> | | | |
| (2) | | | |
| (3) | | | |
| <u>(4)</u> | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line | e 15) | | |
| Part X Other Liabilities. | <i>5</i> 70. <i>j</i> | ····· | |
| Complete if the organization answered "Yes" | on Form 990. Part IV. line | a 11e or 11f. See Form 990. Part X. line 25. | |
| 1. (a) Description of liability | , , , | , , | (b) Book value |
| (1) Federal income taxes | | | |
| (2) Lease liability - operati | ng leases | | 188,896. |
| (3) | | | · · · |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line | e 25.) | | 188,896. |

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

| Sche | edule D (Form 990) 2022 OneJustice | | | 94- | 2589423 Page 4 |
|------|--|------------|----------------|------|----------------|
| Pa | t XI Reconciliation of Revenue per Audited Financial State | ments With | | | |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 1 | l2a. | | | |
| 1 | Total revenue, gains, and other support per audited financial statements | | | 1 | 3,197,337. |
| 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 | 13,000. | | |
| с | Recoveries of prior year grants | 2c | | | |
| d | Other (Describe in Part XIII.) | 2d | | | |
| е | Add lines 2a through 2d | | | 2e | 13,000. |
| 3 | Subtract line 2e from line 1 | | | 3 | 3,184,337. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | |
| b | Other (Describe in Part XIII.) | 4b | | | _ |
| С | Add lines 4a and 4b | | | 4c | 0. |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | | | 5 | 3,184,337. |
| Pa | rt XII Reconciliation of Expenses per Audited Financial State | | n Expenses per | Retu | ırn. |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 1 | | | | 0 00 400 |
| 1 | Total expenses and losses per audited financial statements | | | 1 | 2,792,408. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | 12 000 | | |
| а | Donated services and use of facilities | | 13,000. | | |
| b | Prior year adjustments | | | | |
| С | Other losses | | | | |
| d | Other (Describe in Part XIII.) | | | | 10.000 |
| е | Add lines 2a through 2d | | | 2e | 13,000. |
| 3 | Subtract line 2e from line 1 | | | 3 | 2,779,408. |
| 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 | | | | |
| b | Other (Describe in Part XIII.) | 4b | | | • |
| С | Add lines 4a and 4b | | | 4c | 0. |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | | | 5 | 2,779,408. |
| Pa | rt XIII Supplemental Information. | | | | |

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

Part X, Line 2:

OneJustice is exempt from taxation under Internal Revenue Code Section

501(c)(3) and California Revenue and Taxation Code Section 23701d.

Generally accepted accounting principles provide accounting and disclosure

guidance about positions taken by an organization in its tax returns that

might be uncertain. Management has considered its tax positions and

believes that all of the positions taken by OneJustice in its federal and

state exempt organization tax returns are more likely than not to be

sustained upon examination. OneJustice's returns are subject to

examination by federal and state taxing authorities, generally for three

and four years, respectively, after they are filed.

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| SCHEDULE G | Suppleme | ental Information Regardin | g Fun | drais | ing or Gaming | Acti | vities | OMB No. 1545-0047 |
|---|---|--|---|--|---|---------|--|--------------------------------|
| (Form 990) | | e organization answered "Yes" o organization entered more than \$ | | | | or 19 | , or if the | 2022 |
| Department of the Treasury | | Attach to Form 990 |) or For | m 990 | -EZ. | | | Open to Public |
| Internal Revenue Service | | o www.irs.gov/Form990 for instr | uctions | and t | he latest informatio | n. | | Inspection |
| Name of the organization | OneJust | ice | | | | | Employer 94-258 | identification number २९४२२ |
| Part I Fundrais | | Complete if the organization answ | wered "\ | (es" 0 | n Form 990 Part IV | line 1 | | |
| | complete this par | | | 103 0 | in on 550, 1 art 10, | | 7.10111000 | |
| a Mail solicitat b Internet and c Phone solicitat d In-person so 2 a Did the organization key employees list b If "Yes," list the 10 | ions email solicitations tations licitations in have a written o ed in Form 990, P highest paid indiv | s f Solicit g Speci or oral agreement with any individu Part VII) or entity in connection with viduals or entities (fundraisers) pur | tation of tation of al fundra nal (inclu | non-g gover aising ding c sional | overnment grants nment grants events fficers, directors, tru: fundraising services? | stees | ์ <u></u> เ | fes No to be |
| compensated at le | ast \$5,000 by the | organization. | | | | | | |
| (i) Name and address or entity (func | | (ii) Activity | fùnd have c or cor | Did raiser custody ntrol of outions? | (iv) Gross receipts from activity | tò (o | Amount pai or retained b fundraiser ted in col. (i) | by) to (or retained by) |
| | | | Yes | No | - | | | |
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| Total | | • | | | | | | |
| | ch the organizatic | on is registered or licensed to solici | it contril | oution | s or has been notified | d it is | exempt fror | n registration |
| | | | | | | | | |
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| | | of fundraising event contributions and gro | oss income on Form 990 |)-EZ, lines 1 and 6b. List | events with gross recei | pts greater than \$5,000. |
|-----------------|--------|--|---------------------------------------|----------------------------|--------------------------|---|
| | | | (a)Event#1 Opening Doors to Jus | (b) Event #2 | (c) Other events None | (d) Total events (add col. (a) through |
| | | | (event type) | (event type) | (total number) | col. (c)) |
| nue | | | (| (| (| <u> </u> |
| Revenue | 1 | Gross receipts | 416,355. | | | 416,355. |
| | 2 | Less: Contributions | 370,509. | | | 370,509. |
| | 3 | Gross income (line 1 minus line 2) | 45,846. | | | 45,846. |
| | 4 | Cash prizes | | | | |
| Se | 5 | Noncash prizes | | | | |
| xpense | 6 | Rent/facility costs | 14,365. | | | 14,365. |
| Direct Expenses | 7 | Food and beverages | 25,653. | | | 25,653. |
| | 8 | Entertainment | 2,500. 3,328. | | | 2,500. |
| | 9 | Other direct expenses | 3,328. | | | 2,500. 3,328. |
| | 10 | Direct expense summary. Add lines 4 through | n 9 in column (d) | | | 45,846. |
| | | Net income summary. Subtract line 10 from li | | | | 0. |
| Pa | ırt | Gaming. Complete if the organization a \$15,000 on Form 990-EZ, line 6a. | answered "Yes" on Form | 1990, Part IV, line 19, or | reported more than | |
| | | \$13,000 011 0111 330-L2; inte da. | | (b) Pull tabs/instant | | (d) Total gaming (add |
| Revenue | | | (a) Bingo | bingo/progressive bingo | (c) Other gaming | col. (a) through col. (c)) |
| ñ | 1 | Gross revenue | | | | |
| ses | 2 | Cash prizes | | | | |
| Direct Expenses | 3 | Noncash prizes | | | | |
| Direct | 4 | Rent/facility costs | | | | |
| | 5 | Other direct expenses | | | | |
| | Ť | | Yes % | Yes % | Yes % | |
| | 6 | Volunteer labor | No | No | No | |
| | 7 | Direct expense summary. Add lines 2 through | n 5 in column (d) | | | |
| | 8 | Net gaming income summary. Subtract line 7 | í from line 1, column (d) | | | |
| | | | | | | |
| | | ter the state(s) in which the organization condu | | | | |
| | | the organization licensed to conduct gaming a | ctivities in each of these | states? | | L Yes L No |
| b |) If " | No," explain: | | | | |
| | | | | | | |
| | | ere any of the organization's gaming licenses re Yes," explain: | | | year? | Yes No |
| | | | | | | |
| | | | | | | |
| 2320 | 82 1 |)-27-22 | | | Sche | edule G (Form 990) 2022 |

Schedule G (Form 990) 2022

OneJustice

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

94-2589423 Page 2

| Sch | nedule G (Form 990) 2022 | OneJustice | | 94-2 | 589 | 423 | Page 3 |
|-----|------------------------------------|------------------------------|---|------------------|-----------|--------|----------|
| 11 | Does the organization conduct g | aming activities with nonr | members? | | | Yes | No |
| 12 | | | ust, or a member of a partnership or other entity for | | | | |
| | to administer charitable gaming? | | · · · · · · · · · · · · · · · · · · · | | | Yes | No No |
| 13 | Indicate the percentage of gamin | | | | | | |
| | | | | | 13a | | % |
| | | | | | 13b | | % |
| | | | the organization's gaming/special events books an | | | | |
| | | | | | | | |
| | | | | | | | |
| 15a | a Does the organization have a cor | ntract with a third party fr | om whom the organization receives gaming revenu | ıe? | | Yes | 🗌 No |
| | | | | | | | |
| k | | | | the amount | | | |
| | of gaming revenue retained by th | | | | | | |
| C | c If "Yes," enter name and address | of the third party: | | | | | |
| | Name | | | | | | |
| | Address | | | | | | |
| 16 | Gaming manager information: | | | | | | |
| | Name | | | | | | |
| | Gaming manager compensation | \$ | | | | | |
| | | | _ | | | | |
| | Description of services provided | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Director/officer | Employee | Independent contractor | | | | |
| 17 | Mandatory distributions: | | | | | | |
| á | - | r state law to make chari | table distributions from the gaming proceeds to | | | | |
| | | | | | | Yes | 🗌 No |
| ł | | | to be distributed to other exempt organizations or | | | | |
| | organization's own exempt activi | | \$ | | | | |
| Pa | | | planations required by Part I, line 2b, columns (iii) | and (v); and Par | t III, li | nes 9, | 9b, 10b, |
| | 15b, 15c, 16, and 17b, as | s applicable. Also provide | e any additional information. See instructions. | | | | |
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| sc | HEDULE J | Compensation Information | O | MB No. ⁻ | 1545-00 | 47 |
|--------|--|--|----------------|---------------------|----------|-------|
| (Fo | rm 990) | For certain Officers, Directors, Trustees, Key Employees, and Highest | | 20 | 22 |) |
| | | Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23. | | | | |
| | rtment of the Treasury | Attach to Form 990. | | pen to Inspe | Publ | ic |
| - | al Revenue Service ne of the organization | Go to www.irs.gov/Form990 for instructions and the latest information. | Employer ident | | | nhor |
| INCI | le of the organization | OneJustice | 94-258 | | | libel |
| Pa | rt I Question | s Regarding Compensation | J4 200 | 942 | <u> </u> | |
| | | | | | Yes | No |
| 1a | Check the appropri | ate box(es) if the organization provided any of the following to or for a person listed on Forn | ו 990, | | | |
| | | line 1a. Complete Part III to provide any relevant information regarding these items. | - | | | |
| | First-class or c | harter travel Housing allowance or residence for perso | onal use | | | |
| | Travel for com | panions Payments for business use of personal re | sidence | | | |
| | Tax indemnific | ation and gross-up payments Health or social club dues or initiation fee | S | | | |
| | Discretionary s | spending account Personal services (such as maid, chauffe | ur, chef) | | | |
| | | | | | | |
| b | | on line 1a are checked, did the organization follow a written policy regarding payment or | | | | |
| | | provision of all of the expenses described above? If "No," complete Part III to explain | | 1b | | |
| 2 | • | n require substantiation prior to reimbursing or allowing expenses incurred by all directors, | | - | | |
| | trustees, and office | rs, including the CEO/Executive Director, regarding the items checked on line 1a? | | 2 | | |
| • | la dia sta subista di Ara | | _ | | | |
| 3 | | ny, of the following the organization used to establish the compensation of the organization | | | | |
| | | ector. Check all that apply. Do not check any boxes for methods used by a related organizat | | | | |
| | X Compensation | ation of the CEO/Executive Director, but explain in Part III. | | | | |
| | | | | | | |
| | | | ommittoo | | | |
| | | ther organizations $\begin{tabular}{c} X \\ Approval by the board or compensation of the board or compensation $ | Johnnittee | | | |
| 4 | During the year, did | I any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing | | | | |
| | organization or a re | | | | | |
| а | Receive a severand | e payment or change-of-control payment? | | 4a | | Х |
| b | Participate in or rec | eive payment from a supplemental nonqualified retirement plan? | | 4b | | Х |
| с | Participate in or rec | eive payment from an equity-based compensation arrangement? | | 4c | | Х |
| | If "Yes" to any of lir | nes 4a-c, list the persons and provide the applicable amounts for each item in Part III. | | | | |
| | | | | | | |
| _ | | c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. | | | | |
| 5 | | on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati | on | | | |
| | contingent on the r | | | _ | | v |
| a | ine organization? | | | 5a | | X |
| a | | ation? | | 5b | | Λ |
| 6 | | or 5b, describe in Part III. on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati | on | | | |
| 6 | | | | | | |
| а | contingent on the n | - | | 6a | | Х |
| a b | Any related organiz | ation? | | 6b | | X |
| U | | ation? | | 00 | | |
| 7 | | on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment | S | | | |
| ' | - | nes 5 and 6? If "Yes," describe in Part III | | 7 | х | |
| 8 | | reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to | | | | |
| 5 | | ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III | | 8 | | х |
| 9 | | id the organization also follow the rebuttable presumption procedure described in | | | | |
| 3 | | 1 53.4958-6(c)? | | 9 | | |
| | | aduction Act Notice, see the Instructions for Form 990 | Schedule | - | n 000 | 2022 |

 $\mathsf{LHA} \ \ \mathbf{For} \ \mathbf{Paperwork} \ \mathbf{Reduction} \ \mathbf{Act} \ \mathbf{Notice}, \ \mathbf{see} \ \mathbf{the} \ \mathbf{Instructions} \ \mathbf{for} \ \mathbf{Form} \ \mathbf{990}.$

Schedule J (Form 990) 2022

94-2589423

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 | /-2 and/or 1099-MIS compensation | C and/or 1099-NEC | (C) Retirement and other deferred | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) |
|-------------------------------------|------|--------------------------|---|---|-----------------------------------|-------------------------|------------------------------------|---|
| (A) Name and Title | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | compensation | | | reported as deferred on prior Form 990 |
| (1) Phil Hwang | (i) | 180,616. | 5,000. | 0. | 3,000. | 3,800. | 192,416. | 0. |
| Chief Executive Officer | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (2) Gail Quan | (i) | 145,748. | 3,000. | 0. | 3,000. | 20,438. | 172,186. | 0. |
| Director, Legal, Operations, People | (ii) | 0. | 0. | 0. | 0. | 0. | | 0. |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
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| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Part I, Line 7:

Phil Hwang and Gail Quan received a performance based bonus resulting from

CY 22.

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization



OneJustice

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 increase the community's awareness of legal clinics, recruit and train volunteers, and manage and evaluate legal clinics. 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 strengthened the skills and expertise of more than 10,000 volunteers. OneJustice launched a training program for volunteers who have recently joined or are interested in joining the boards of legal aid organizations. Training topics included: alignment with organizational mission, vision, and theory of change; advancing diversity, equity, and inclusion; board governance and recruitment; and financial oversight. Form 990, Part III, Line 4b, Program Service Accomplishments: OneJustice launched a training program for legal services organizations to expand the availability of consumer debt legal services and maximize the impact of these services. In addition, OneJustice offered LHA For Paperwork Reduction Act Notice. see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2022

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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 supported public policies that increase access to legal

services for low-income Californians. OneJustice advocated on state and

federal bills that would impact low-income Californians. 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 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, 202212 10-28-22

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| | |

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 CEO's pay continues to abide by market standards.

Form 990, Part VI, Section C, Line 19: OneJustice provides the financial information from its annual audit and the Form 990 to the public online at www.onejustice.org. OneJustice also states on the website that it will share the conflict of interest policy, whistleblower policy, audit and Form 990 directly with anyone who submits an email request for the documents. OneJustice also provides its Form 990, audit, and financial information to GuideStar; OneJustice has also earned the Gold GuideStar Exchange Seal in recognition of its commitment to transparency.