For Paperwork Reduction Act Notice, see the separate instructions.

Form 990

Department of the

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

DLN: 93493089013441

2019

Open to Public Inspection

Treasu	•	nue Service	► Go to <u>www</u>	<u>r.irs.gov/Form990</u> for instructions a	and the latest info	ormation.		Inspection	
			। alendar year, or tax year	beginning 07-01-2019 , and endi	ng 06-30-2020				
		pplicable:	C Name of organization EARTHJUSTICE			D Employer	identif	ication number	
		change	E/M/MBGS/TGE			94-173046	55		
	ime ch itial ret	-	Doing business as						
☐ Fin	al returi	n/terminated				E Telephone r	umher		
		d return on pending	Number and street (or P.O. 50 CALIFORNIA STREET SUI	box if mail is not delivered to street address) TE 500	Room/suite		(415) 217-2000		
ш Ар	рисаск	on pending	City or town, state or provin	ce, country, and ZIP or foreign postal code		(415) 217	-2000		
			SAN FRANCÍSCO, CA 9411:			G Gross recei	pts \$ 14	47,410,184	
			F Name and address of p	rincipal officer:	H(a) Is	this a group retur	n for		
			ABIGAIL DILLEN 50 CALIFORNIA STREET S	SUITE 500		ıbordinates?		□Yes ☑ No	
			SAN FRANCISCO, CA 941			re all subordinates cluded?		☐ Yes ☐No	
I Ta	x-exen	mpt status:	✓ 501(c)(3) □ 501(c)	() ◀ (insert no.) ☐ 4947(a)(1) or ☐	-	"No," attach a list	. (see	instructions)	
J W	ebsit	e:► WW	/W.EARTHJUSTICE.ORG		H(c) G	roup exemption nu	ımber	>	
					l Year of f	formation: 1970 M	l State	of legal domicile: CA	
K Fori	m of or	rganization:	: 🗹 Corporation 🗌 Trust [□ Association □ Other Other	2 rear 511	omiddon. 1970	State	or regar dormene. Cr	
Pa	art I	Sum	mary			L			
				ssion or most significant activities:	TEME AND COMP	AT CLIMATE CHANG	с г		
ce	-	WEUSET	HE POWER OF THE LAW TO	PROTECT HEALTH, PRESERVE ECOSYS	TEMS, AND COMBA	AT CLIMATE CHAN	GE.		
Tan L	-								
Activities & Governance		CL 1.11:			1.6	250/ 6:1			
Ŝ				tion discontinued its operations or dispo overning body (Part VI, line 1a)		25% of its net asse	ets. 3	30	
≈ 5	1		•	bers of the governing body (Part VI, line			4	30	
nes	1		· -	d in calendar year 2019 (Part V, line 2a	-		5	484	
₽ E	6	Total nun	nber of volunteers (estimat	e if necessary)			6	38	
Ac	7a	Total unr		7a	(
	b	Net unrel	lated business taxable incor	ne from Form 990-T, line 39			7b	C	
						Prior Year		Current Year	
σį	8	8 Contributions and grants (Part VIII, line 1h)						139,020,689	
Ravenue	1	9 Program service revenue (Part VIII, line 2g)					9	5,850,03	
Ŗ	1		•	n (A), lines 3, 4, and 7d)	3,369,255	+			
	1			, lines 5, 6d, 8c, 9c, 10c, and 11e)		165,242		75,670	
	+			11 (must equal Part VIII, column (A), lin	ne 12)	102,807,555	+	146,974,68	
	1		, ,	art IX, column (A), lines 1–3)		310,000	1	1,025,00	
	1	·	paid to or for members (Pa			E0 13E 66/	2	62,822,20	
Ses	1	•		yee benefits (Part IX, column (A), lines (, column (A), line 11e)	5-10)	50,135,666 289,007	+	62,823,20 ₋ 826,66	
Expenses	Ι.		raising expenses (Part IX, colun	* * * * * * * * * * * * * * * * * * * *	•	209,007	' 	020,000	
ă	1			, lines 11a–11d, 11f–24e)		27,710,804	1	31,974,92	
	1	·		ust equal Part IX, column (A), line 25)	•	78,445,477	+	96,649,80	
	1		·	e 18 from line 12		24,362,078	+	50,324,88	
<u>र</u> र			<u> </u>		Beginr	ning of Current Yea	-	End of Year	
Net Assets or Fund Balances									
Ass I Ba	1		` ' '		•	183,615,035	+	246,573,74	
¥ 5	1		ilities (Part X, line 26) . cs or fund balances. Subtrac	t line 31 from line 30		13,613,385	+	22,937,57	
	art II		ature Block	t ille 21 from line 20		170,001,650	1	223,636,16	
				e examined this return, including accom	panying schedules	and statements, a	and to	the best of my	
	ledge (nowle		f, it is true, correct, and co	mplete. Declaration of preparer (other	than officer) is base	ed on all information	on of v	vhich preparer has	
uny n		l.							
		*****	* ure of officer			2021-03-22 Date			
Sign		Julian	ure or officer			Date			
Here	5		SCHWARTZ VP FINANCE r print name and title						
		17	rint/Type preparer's name	Preparer's signature	Date	□ PTI	N		
Paid	d		, Type property a name	Spa. of a signature	2021-03-22		189994	1	
						Firm's EIN ► 81-42	34542		
	On	<u> </u>	irm's address > 4200 BOHANNA	ON DRIVE SHITE 250		Phono :- (CEO) CE	. 6000		
	. .	⊦ ر…	irm's address ► 4200 BOHANNO			Phone no. (650) 855	0080-0		
			MENLO PARK, O						
May t	ne IR	S discuss	this return with the prepar	er shown above? (see instructions) .			- I ∨ I Y	′es □No	

Cat. No. 11282Y

Form **990** (2019)

Form	990 (2	(019)					Page 2
Pa	irt III	Statement of	Program Service	e Accomplis	hments		
		Check if Schedul	e O contains a respo	onse or note to a	any line in this Part III		🗆
1	Briefly	describe the orga	anization's mission:				
						E POWER OF LAW AND THE STREI ENERGY TO PROMOTE A HEALTH	
2		_	· -		vices during the year w	hich were not listed on	☐ Yes ☑ No
			new services on Sch				
3		•			changes in how it cond	ucts, any program	
	servic	es?	changes on Schedu		-		☐ Yes ☑ No
4	Section	on 501(c)(3) and 5		ons are required	to report the amount	largest program services, as mea of grants and allocations to others	
4a	(Code:	dditional Data) (Expenses \$	52,033,825	including grants of \$	953,000) (Revenue \$	5,850,038)
4b	(Code:	dditional Data) (Expenses \$	23,004,525	including grants of \$	72,000) (Revenue \$)
4c	(Code:) (Expenses \$		including grants of \$) (Revenue \$)
4d		program services	(Describe in Schedi	ule O.) uding grants of	<u> </u>) (Revenue \$)
4-	· ·	program service		75,038,3	<u> </u>) (Revenue p	
4e	TOLAI	program service	e expenses F	/3,036,3	J0		Form 990 (2019)

Par	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 2	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 3	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D.</i> Part 92	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 2	11a	Yes	
	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 2	11b	Yes	
	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		No
	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 2	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
	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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12h		No
13	Is the organization a school described in section $170(b)(1)(A)(ii)$? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	-1.5
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
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		No
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		No
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	Yes	
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	Yes	
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	

m s	990 (2019)			Pag
art	Checklist of Required Schedules (continued)			-
			Yes	No
	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		No
	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	Yes	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L,</i> Part I	25b		No
	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		No
	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? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes,"</i> complete Schedule L, Part IV	28a		N:
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		N
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🔧	29	Yes	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		N
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		N ₁
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		N
	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	Yes	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
	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		N
	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		N
	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		N
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
li	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		V	<u> </u>
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 229		Yes	N
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

1c

-01111	290 (2019)			Page 5
Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
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			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	4a		No
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	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		No
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).			
	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	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	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	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No

	990 (2019)			Page 0
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to i	ines
Se	ction A. Governing Body and Management		V	
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 30		Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 30			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt	104		110
	status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AL , AR , CA , FL , GA , HI , IL , KS , KY , N , NH , NJ , NM , NC , ND , NY , OR , PA , S WI			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: ▶JASON SCHWARTZ VP FINANCE 50 CALIFORNIA STREET SUITE 500 SAN FRANCISCO, CA 94111 (415) 217-2000			

 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. Isist all of the organization's current key employees, if any. See instructions for definition of "key employee." List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organizations. List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable 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 \$100,000 of reportable compensation from the organizations. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) Name and title (B) Average hours per week (list any hours per week (list any hours per week (list any hours below dotted line) (C) Name and title (D) Reportable compensation from the organization and any officer and a director/trustee) (D) Reportable compensation from the organization of the organization of the organization from th	Form 990 (2019)											Pag	ge 7
As Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear. ■ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0 - in columns (D), (E), and (F) if no compensation was paid. ■ List all of the organization's current key employees, if any. See instructions for definition of "key employee." ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations for the order in which to list the persons above. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ (B) Name and title ■ (C) Position (do not check more than spendal properties of the organization of other organization of the organization o			Truste	es, I	Key	En	nploy	ees	, Highest Comp	ensated Employ	yees,		
La Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear. 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 furrent key employees, if no. See instructions for definition of "key employee." List all of the organization's furrent key employees, if any. See instructions for definition of "key employee." List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 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 organization and any related organization or any current officer, director, or trustee. (A) Name and title A Reportable compensation from the organization or any related organization or any new powers of the organization or any new powers or trustees or trustees that received, in the capacity as a former director, or trustee. (B) A Reportable compensation or trustee of the organization or trustee. (C) (B) A Reportable compensation or from the organization or end to the compensation organization organizat	Check if Schedule O contains a	response or no	te to an	y line	in t	his	Part VI	١.				. [
■ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. ■ List all of the organization's current key employees, if any. See instructions for definition of "key employee." ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization, more than \$10,000 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 for the order in which to list the persons above. □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ (A) Name and title ■ (B) Average hours per week (list any hours for related organizations below dotted line) ■ (C) Reportable compensation from the organization from the organization of the organization has not officer and a director/trustee) ■ (D) Reportable compensation from the organization organization organization (W-2/1099-MISC) ■ (F) Estimated organization organizations (W-2/1099-MISC) ■ (F) Estimated organizations (W-2/1099-MISC) ■ (F) Estimated organization organizations (W-2/1099-MISC) ■ (F) Estimated organizations (W-2/1099-MISC) ■ (F) Estimated organization organization organization organization organization organization organization orga	Section A. Officers, Directors, Tru	istees, Key E	mploy	ees,	an	d H	lighe	st C	Compensated En	nployees			
■ List all of the organization's current key employees, if any. See instructions for definition of "key employee." ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations. ■ List all of the organization's former officers, key employees, or 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. Sie instructions for the order in which to list the persons above. □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization organization from the organization of related organizations below dotted line) ■ Check this box if neither the organization below dotted line) ■ Check this box if neither the organization or any related organization of from the organization of from the organization of the compensation from the organization and related organizations below dotted line) ■ Check this box if neither the organization or any related organization organization organization organization organization organization organization	year.		•						, ,		-	n's ta	Κ
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who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. ■ List all of the organization from the organization and any related organizations. ■ List all of the organization from the organization and any related organization, more than \$10,000 of reportable compensation from the organization, more than \$10,000 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 organizations. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization organization (W-2/1099-MISC) ■ Check this box if neither the organization nor any related organization organization nor any related organization organization organization (W-2/1099-MISC) ■ Check this box if neither the organization nor any related organization nor any related organization nor any related organization nor any neithe													
■ 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 instructions for the order in which to list the persons above. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) Name and title (B) Average hours per week (list any hours below dotted line) (C) (D) (E) Reportable compensation from the organization (do not check more than one box, unless person is both an officer and a director/trustee) (C) (D) (E) Reportable compensation from the organization (W-2/1099-MISC) (W-2/1099-MISC) MISC) MISC) (F) Estimated amount of other compensation from the organization and related organizations organizations.													
Average hours per week (list any hours for related organizations) below dotted line) Continue to the person of the order in which to list the persons above. Continue to the order in which to list the persons above.	of reportable compensation from the organiz	ation and any re	elated o	rgani	zatio	ons.			. ,	·	·		
(A) Name and title (B) Average hours per week (list any hours for related organizations below dotted line) (B) Average hours per week (list any hours for related organizations below dotted line) (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (B) Average hours per week (list any hours for related organization (W-2/1099-MISC) (B) Reportable compensation from the organizations (W-2/1099-MISC) MISC) (F) Estimated amount of other compensation from the organization and related organizations organizations)	organization, more than \$10,000 of reportab	le compensatio	n from t								Э		
Name and title Average hours per week (list any hours for related organizations below dotted line) Name and title Average hours per week (list any hours for related organizations below dotted line) Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer	Check this box if neither the organizatio	n nor any relate	d organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee.			
it steed		Average hours per week (list any hours	than o is b	ne bo oth a direct	o no ox, u n of or/t	t che inles ficer	s pers	on	Reportable compensation from the organization	e (E) (F) Reportable Estimate on compensation amount of o from related compensat			
See Additional Data Table		organizations below dotted	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		` '	rel	ated	
	See Additional Data Table												
													—
													—

Form 990 (2019)	Page 8								
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)									
hours per week (list is both an officer and a any hours of the list is lightly and the lightly	(F) stimated unt of other npensation rom the nization and								
organizations 응립 등 울 호 길 MISC) MISC) MISC)	related anizations								
See Additional Data Table									
1b Sub-Total									
c Total from continuation sheets to Part VII, Section A ▶	502.052								
d Total (add lines 1b and 1c)	502,653								
Y	es No								
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	No								
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	es								
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	No								
Section B. Independent Contractors									
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.									
	(C) mpensation								
MAL WARWICK ASSOCIATES DIRECT MAIL CONSULTING	2,522,592								
2650 9TH ST STE 103 BERKELEY, CA 94710 COVINGTON & BURLING LLP	400 020								
COVINGTON & BURLING LLP ONE CITYCENTER 850 TENTH STREET N ONE CITYCENTER 850 TENTH STREET N	490,020								
IMAGE X INC REPRODUCTION & PRINTING	446,130								
5990 STONERIDGE DRIVE SUITE 112	1 p-								
PLEASANTON, CA 94588 BLACKBAUD INC ENTERPRISE CRM SUBSCRIPTION	363,504								
2000 DANIEL ISLAND DRIVE CHARLESTON SC 29492									
CHARLESTON, SC 29492 FUTERRA SUSTAINABILITY COMM CAMPAIGN DEVELOPMENT	351,528								
3RD FLOOR 39 TABERNACLE STREET LONDON EC2A 4AA UK									
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 42	- 000 (3010)								

		(2019)	- 6 5							Page 9
Part	VIII				a respo	nse or note to anv	line in this Part VIII			🗆
		5.1331K II 54.133			<u> </u>	,	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
4	1:	a Federated campa	igns	5	1a			revenue		512 - 514
ants		b Membership dues	s .		1 b					
Contributions, Gifts, Grants and Other Similar Amounts		c Fundraising even	ts .		1c	418,959				
		d Related organiza			1d					
		e Government grants			1e					
ioi		f All other contributio and similar amounts	ns, ç s not	gifts, grants, included	1f	138,601,730				
tributio Other		above g Noncash contribution	ns in	ncluded in		<u></u>				
Contr.		lines 1a - 1f:\$			1 g	9,092,398				
<u>ٽ ج</u>		h Total. Add lines	1a-1	.f		•	139,020,689			
	٦-	COURT AWARDS				Business Code	5,490,186	5,490,186		
ē						541100				
Program Service Revenue	b	CLIENT COST RECOV	ERIE	S		541100	359,852	359,852		
⊕ ⊕										
rvic	C	·								
Š	d	I								
grar	e	•								
Ĕ	١.									
		All other program Total. Add lines 2				5,850,038				
	_	Investment income					1			
	5	similar amounts). Income from invest				•		9		2,174,619
				it of tax-exe		_				
				(i) Re	al	(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental	6b				1			
	c	expenses Rental income	00				-			
		or (loss)	6 c							
	'	d Net rental income	or	(i) Secu	· ·	(ii) Other	1			
	7a	Gross amount	_			. ,	-			
		from sales of assets other than inventory	7a		286,906					
	b	Less: cost or	<u> </u>							
		other basis and sales expenses	7b		201,483	231,75	4			
	c	Gain or (loss)	7c		85,423	-231,75	4			
		d Net gain or (loss)	٠.				-146,331	1		-146,331
<u>a</u>	8a	Gross income from fu (not including \$	ındra	ising events 418,959 of						
e e		contributions reported See Part IV, line 18		line 1c).		45 700				
Rev	 	Less: direct expen			8a 8b	15,706 2,262				
Other Revenue		Net income or (los			لــــــا sing eve	ents 🕨	13,444	1		13,444
Ö	92	Gross income from	паm	ing activities						
	Ja	See Part IV, line 19			9a					
		Less: direct expen			9b					
	\ °	: Net income or (los	s) fr	rom gaming	activiti	es >	1			
	10	a Gross sales of inve								
	 -	Less: cost of good			10a 10b		-			
		Net income or (los				ory >	_			
		Miscellaneo				Business Code				
	11	La OTHER REVENUE				90009	9 62,226			62,226
	,									
		-								
		d All other revenue	•							
	•	Total. Add lines 1	1a-:	11d		•	62,226	5		
	12	2 Total revenue. S	ee ir	nstructions		• • • •	146,974,685	5,850,038	3	0 2,103,958
										Form 990 (2019)

Forr	n 990 (2019)				Page 10
Р	art IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations must c		_		ımn (A).
	Check if Schedule O contains a response or note to an	y line in this Part IX			<u>.</u>
	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 and domestic governments. See Part IV, line 21	1,025,000	1,025,000		
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	2,775,012	1,839,788	645,075	290,149
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	47,013,621	37,724,161	4,480,713	4,808,747
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	2,953,057	2,429,072	222,112	301,873
9	Other employee benefits	6,586,449	5,210,149	716,749	659,551
10	Payroll taxes	3,495,065	2,768,288	370,189	356,588
11	Fees for services (non-employees):				
ā	a Management				
ı	Legal	81,914	47,930	18,460	15,524
	Accounting	115,120	67,360	25,943	21,817
	l Lobbying				
•	Professional fundraising services. See Part IV, line 17	826,668			826,668
f	Investment management fees	112,894	28,728	7,680	76,486
9	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,022,585	2,783,756	1,111,341	127,488
12	Advertising and promotion	761,503	757,137	2,917	1,449
13	Office expenses	4,753,150	3,035,894	748,660	968,596
14	Information technology	3,429,697	2,249,836	547,165	632,696
15	Royalties				
16	Occupancy	7,016,897	5,473,520	791,566	751,811
17	Travel	2,202,214	1,517,273	417,309	267,632
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	1,837,492	1,265,988	348,196	223,308
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,253,042	976,403	142,422	134,217
23	Insurance	266,518	255,816	5,336	5,366
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a DIRECT CASE COSTS	4,041,022	4,010,946	9,334	20,742
		2	,	25 :-	,
	b OTHER CONTRACTED SERVIC	848,513	496,488	191,217	160,808
	c RESEARCH	570,286	494,712	59,584	1 5,990
	d MISCELLANEOUS	517,436	467,615	38,806	11,015
	e All other expenses	144,646	112,490	25,047	7,109
25	Total functional expenses. Add lines 1 through 24e	96,649,801	75,038,350	10,925,821	10,685,630
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
	Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Form 990 (2019)

11

12

20

Liabilities

Fund Balances

ō 29

Assets 30

27

28

31

32

33

Page 11

9,524,120

91,493,900

38.403.361

11,277,140

246,573,740

7,830,717

491,767

14,615,087

22.937.571

173,811,352

49,824,817

223,636,169

246,573,740

Form 990 (2019)

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

	Beginning of year		End of year
Cash-non-interest-bearing	8,172,376	1	16,480,106
2 Savings and temporary cash investments	 20,068,788	2	36,413,068
Pledges and grants receivable, net	26,993,730	3	39,203,510

2	Savings and temporary cash investments	20,000,700		30,413,0
3	Pledges and grants receivable, net	26,993,730	3	39,203,5
4	Accounts receivable, net	1,105,143	4	733,3
5	Loans and other 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		5	

,321 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 6 7 Notes and loans receivable, net Inventories for sale or use .

Assets Prepaid expenses and deferred charges . 2,080,005 9 3,045,214 10a Land, buildings, and equipment: cost or other 10a 16,898,411 basis. Complete Part VI of Schedule D

7,374,291

3,513,218

78,344,774

32,675,160

10,661,841

183,615,035

5,136,219

565.235

7,911,931

13.613.385

124,144,068

45,857,582

170,001,650

183,615,035

10c

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12 13

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22 23

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10b

13 Investments-program-related. See Part IV, line 11 14 Intangible assets . 15 Other assets. See Part IV, line 11 . . . 16 17 Accounts payable and accrued expenses

Investments—other securities. See Part IV, line 11 .

Investments—publicly traded securities .

b Less: accumulated depreciation

Total assets. Add lines 1 through 15 (must equal line 34) 18 Grants payable . 19 Deferred revenue . .

Tax-exempt bond liabilities . Escrow or custodial account liability. Complete Part IV of Schedule D

Loans and other payables to any current or former officer, director, trustee, key or family member of any of these persons . . .

21

22 employee, creator or founder, substantial contributor, or 35% controlled entity 23 Secured mortgages and notes payable to unrelated third parties 24

Unsecured notes and loans payable to unrelated third parties . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24).

Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 . .

26

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Net assets with donor restrictions

complete lines 29 through 33.

Total net assets or fund balances

Organizations that follow FASB ASC 958, check here ▶ complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Organizations that do not follow FASB ASC 958, check here ightharpoonup and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a

3h

No

Form 990 (2019)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 94-1730465

Name: EARTHJUSTICE

Form 990 (2019)

Form 990, Part III, Line 4a: PROVIDE FREE LEGAL REPRESENTATION, WORKING THROUGH THE COURTS ON BEHALF OF CITIZEN GROUPS, SCIENTISTS, ENVIRONMENTAL AND OTHER ORGANIZATIONS

TO ENSURE THAT GOVERNMENT AGENCIES AND PRIVATE INTERESTS FOLLOW THE LAW.

Form 990, Part III, Line 4b: PROVIDE INCREASED PUBLIC, MEDIA, AND POLICY MAKER AWARENESS OF ENVIRONMENTAL ISSUES AND THE ROLE OF LAW IN SOLVING THEM.

(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer compensation week (list from related from the

and Independent Contractors

LESLIE WILLIAMS

TRUSTEE

TRUSTEE

TRUSTEE

SECRETARY

TRUSTEE

TRUSTEE

DAVID COX

RICH RAINALDI

LORI POTTER

PETER CARSON

DOTTY BALLANTYNE

......

	any hours	and	a dir	ecto	r/tr	ustee))	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	1 ()	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations	
AJA DECOTEAU TRUSTEE	1.00	Х						0	0	0	
DIANE LEWIS TRUSTEE	1.00	Х						0	0	0	
ED LEWIS	1.00										

TRUSTEE						
DIANE LEWIS	1.00	x			0	
TRUSTEE		^			0	
ED LEWIS	1.00					
TRUSTEE		X			l "	
JANET MAUGHAN	1.00				0	
TRUSTEE		Х			o o	

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(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from related from the compensation

	any hours	and	a dir	recto	r/trد	ustee))	organization	organizations (W- 2/1099- MISC)	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)		organization and related organizations	
STEVE DAETZ TREASURER & VICE CHAIR FIN	1.00	х		х				0	0	0	
RUSSELL DAGGATT TRUSTEE	1.00	х						0	0	0	
RUTH SANTIAGO TRUSTEE	1.00	х						0	0	0	
N BRUCE DUTHU	1.00										

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RUTH SANTIAGO
TRUSTEE
N BRUCE DUTHU
VICE CHAIR AT LARGE
CARMEN G GONZALEZ

TRUSTEE

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TRUSTEE

NICOLA MINER

PAUL NEWHAGEN

VICTOR HYMES

MARCIA KUNSTEL

WINSOME MCINTOSH

......

and Independent Contractors

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list compensation from the from related and a director/trustee) any hours organization organizations from the

	ally hours	I allu			′	Organization	organizations	overnientien and		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
VAWTER BUCK PARKER TRUSTEE	1.00	X						0	0	0
PATRICIA PINEDA TRUSTEE	1.00	X						0	0	0
ANDREW REICH TRUSTEE	1.00							0	0	0
WILL ROUSH TRUSTEE	1.00							0	O	0
FERN SHEPARD	1.00						\Box		1	

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TRUSTEE
WILL ROUSH
TRUSTEE
FERN SHEPARD
CHAIR

MICHAEL SONNENFELDT

STEPHEN M UNFRIED

GREG SERRURIER

DEBRA LEKANOFF

ELIZABETH SUTHERLAND RINEY

TRUSTEE

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and Independent Contractors

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

and Independent Contractors

VICE PRESIDENT HUMAN RESOU

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SR. VICE PRESIDENT OF PROGRAMS

VICE PRESIDENT OF LITIGATION

VP OF COMMUNICATIONS AND M

VP OF LITIGATION (ENDED 9/5/2019)

SAMBHAV SANKAR

JILL TAUBER

RAY WAN

LISA GARCIA

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
						Ġ.				
ABIGAIL DILLEN	39.90									
PRESIDENT				Х				402,070	0	56,754
PRESIDENT	0.10									
JASON SCHWARTZ	39.70									
				Х				223,536	0	22,664
VP OF FINANCE; ASST. TREAS	0.30									
KENNETH MCKENZIE	39.70									
				Х				207,841	0	36,849
GENERAL COUNSEL; ASST. SEC	0.30							·		
MARGARET MARSH-HEINE	40.00									

VP OF FINANCE; ASST. TREAS	0.30						
KENNETH MCKENZIE	39.70		×			207,841	
GENERAL COUNSEL; ASST. SEC	0.30		^			207,041	
MARGARET MARSH-HEINE	40.00			Y		319,331	
VICE PRESIDENT DEVELOPMENT				^		319,331	
ANDREW CAPUTO	40.00		·	V		272 250	
				_ ^		273,259	1

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			Х			207,841	0	
GENERAL COUNSEL; ASST. SEC	0.30							
MARGARET MARSH-HEINE	40.00							
VICE PRESIDENT DEVELOPMENT	•••••			Х		319,331	0	
ANDREW CAPUTO	40.00					272.250		
VICE PRESIDENT LITIGATION				Х		273,259	U	

GENERAL COUNSEL; ASST. SEC	0.30		^			207,011	•	30,013
MARGARET MARSH-HEINE	40.00			Y		319,331	0	58,277
VICE PRESIDENT DEVELOPMENT				Λ.		313,331	,	30,277
ANDREW CAPUTO	40.00			~		273,259	0	59,554
VICE PRESIDENT LITIGATION				^		2/3,239	0	39,334
CHRISTA BROTHERS	40.00			<		252,462	0	48.495
				^		232,462	U	40,493

GENERAL COUNSEL; ASST. SEC	0.30				· ·		,
MARGARET MARSH-HEINE	40.00		×		319,331	0	58,277
VICE PRESIDENT DEVELOPMENT			^		313,331		30,2,,
ANDREW CAPUTO	40.00		x		273,259	0	59,554
VICE PRESIDENT LITIGATION					2,0,202		
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43,492

292,115

233,163

250,016

330,367

and Independent Contractors (A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Average Estimated than one box, unless compensation amount of other compensation

person is both an officer

from the

105,955

from related

compensation

14,020

	any hours	and	a dir	ecto	r/tr	ustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
MARTIN HAYDEN VICE PRESIDENT OF LITIGATION	39.10					Х		259,979	0	44,339
ELIZABETH MARSH ASSOCIATE VP OF DEVELOPMENT	0.90 40.00					Х		244,070	0	24,572
PATRICE SIMMS	40.00					х		247,953	0	19,394

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40.00

VICE PRESIDENT OF LITIGATION

SR VP OF OPS; ASST. (ENDED 4/23/2019)

KRISTINE STRATTON

efile GRAPHIC print - DO NOT PRO			nt - DO NOT PROCESS	As Filed Data -	DLN: 9	LN: 93493089013441		
SCHEDULE A			Dublic	Charity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047
(Form 990 or Cor				organization is a sect	ion 501(c)(3)	organization o		2019
990E	ZZ)			4947(a)(1) nonexe ▶ Attach to Form				
		the Treasury	► Go to <u>www.ir</u>	<u>s.gov/Form990</u> for i	nstructions and	the latest info	ormation.	Open to Public Inspection
Nam	l Reven e of th JUSTIC	nie Service ne organiza E	tion				Employer identific	<u> </u>
LAINII	303110	, L					94-1730465	
	rt I		for Public Charity Stat				See instructions.	
	rganız		a private foundation because	•			(4)(')	
1		•	onvention of churches, or a			, ,, ,	. ,.,	
2	Ш		scribed in section 170(b)		`	, ,		
3		·	or a cooperative hospital ser	_			-	
4		A medical r name, city,	esearch organization operat and state:	ed in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's
5		-	ation operated for the benef (iv). (Complete Part II.)	it of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local government o	r governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).	
7	✓		ation that normally receives (O(b)(1)(A)(vi). (Complete		s support from a	governmental u	init or from the gener	al public described in
8		A communi	ty trust described in sectio	n 170(b)(1)(A)(vi).	(Complete Part I	I.)		
9			ural research organization d rant college of agriculture. S					ege or university or a
10		from activit investment	ation that normally receives ties related to its exempt fur income and unrelated busin See section 509(a)(2). (Co	nctions—subject to cer ness taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross
11			ation organized and operate		r public safety. S	See section 509	(a)(4).	
12		more public	ation organized and operate ly supported organizations through 12d that describes	described in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a	
a		Type I. A so	supporting organization open n(s) the power to regularly Part IV, Sections A and B	rated, supervised, or co	ontrolled by its s	upported organiz	zation(s), typically by	
b		Type II. A manageme	supporting organization sup nt of the supporting organiz plete Part IV, Sections A	pervised or controlled i ation vested in the sar				
С		Type III f	unctionally integrated. A proganization(s) (see instruct	supporting organizatio				ted with, its
d		Type III n functionally	on-functionally integrated integrated integrated. The organization in the complete Pa	ed. A supporting organion generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar	
e		Check this	box if the organization recei or Type III non-functionally	ived a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported organizations		-		<u> </u>	
g	Provi	de the follow	ing information about the s	upported organization(s).			
	(i) N	Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1- 10 above (see instructions)) (iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
					Yes	No		
			I					
Tota			tion Act Notice, see the I					

P	art II Support Schedule for	Organizations	Described in S	Sections 170(b)(1)(A)(iv) an	d 170(b)(1)(A))(vi)
	(Complete only if you ch						ınder Part III.
	If the organization failed	to qualify unde	er the tests listed	d below, please	complete Part II	I.)	
	Section A. Public Support Calendar year		T	Т	I	T	
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") .	47,415,416	90,058,883	74,566,624	95,785,669	139,020,689	446,847,281
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to						
4 5	the organization without charge Total. Add lines 1 through 3 The portion of total contributions by	47,415,416	90,058,883	74,566,624	95,785,669	139,020,689	446,847,281
	each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column						15,881,696
6	(f) Public support. Subtract line 5 from line 4.						430,965,585
S	ection B. Total Support			<u>.</u>			
	Calendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	(or fiscal year beginning in) ► Amounts from line 4.	47,415,416	90,058,883	74,566,624	95,785,669	139,020,689	446,847,281
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	850,161	971,831	1,679,946	2,285,577	2,174,619	7,962,134
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 assets (Explain in Part VI.).	115,767	62,847	351,997	68,592	75,670	674,873
11	Total support. Add lines 7 through 10						455,484,288
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	17,965,240
13	First five years. If the Form 990 is f	_			•	· · · · · · <u>-</u>	nization,
	check this box and stop here					<u> ▶ ∟</u>	
	ection C. Computation of Publi						
	Public support percentage for 2019 (li					14	94.620 %
	Public support percentage for 2018 So					15	95.850 %
16a	33 1/3% support test—2019. If the						
b	and stop here. The organization qua 33 1/3% support test—2018. If th	ne organization dic	I not check a box o	on line 13 or 16a, a	and line 15 is 33 1,	/3% or more, check	c this
17a	box and stop here. The organization 10%-facts-and-circumstances tes is 10% or more, and if the organization part VI how the organization meets	t—2019. If the or on meets the "facts	ganization did not s-and-circumstanc	check a box on lines" test, check this	e 13, 16a, or 16b, s box and stop he	, and line 14 re. Explain	▶⊔ _
b	organization	st— 2018. If the o	rganization did no facts-and-circums	t check a box on li tances" test, check	ne 13, 16a, 16b, o this box and sto j	or 17a, and line p here.	▶□
18	supported organization Private foundation. If the organizat		box on line 13, 1	6a, 16b, 17a, or 1		and see	▶□
	instructions						▶

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)		
30	Calendar year	() 2015	(1) 2016	() 2247	(1) 2010	() 2010	(O.T.)
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.").						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
•	organization'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						
7a	Amounts included on lines 1, 2, and						
L	3 received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6.)						
Se	ection B. Total Support		1				Г
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975.						
С	Add lines 10a and 10b.						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
12	(Explain in Part VI.) Total support. (Add lines 9, 10c,						
13	11, and 12.).						
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>
	check this box and stop here						▶ ⊔
	ection C. Computation of Public S			! (6))		1 1	
15	Public support percentage for 2019 (lin		•			15	
16	Public support percentage from 2018 S	-	<u> </u>			16	
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17	
17 10	Investment income percentage for 201	-		-		17	
18 10-	331/3% support tests—2019. If the		•			18 33 1/3% and lin	e 17 is not
	more than 33 1/3%, check this box and s						
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the						
ט	not more than 33 1/3%, check this box	-			•		_
20	Private foundation. If the organization	-	-				
	ritvate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCHONS	. 📂 📖

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

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the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

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.	1

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). 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.

3a 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. 3b

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.

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a 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 4b supervised by or in connection with its supported organizations. 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

3с

10b

Schedule A (Form 990 or 990-EZ) 2019

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and 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

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported 5a amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5с Substitutions only. Was the substitution the result of an event beyond the organization's control?

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 8

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.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

9b Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9c

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. 10a

	edule A (101111 330 01 330 E2) 2013			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
		11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
2	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	2		
	organization.			
S	ection 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	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations			
_			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			
	cuments in effect on the date of notification, to the extent not previously provided?			
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 in (2), 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.			
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
•	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.	2a		
ı	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) 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? <i>Provide details in Part VI</i> .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O			. Part VIV. See			
	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). S instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E						
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (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					
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (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):	1					
а	Average monthly value of securities	1a					
b	Average monthly cash balances	1 b					
C	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
e	Discount claimed for blockage or other factors (explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt use assets	2					
3	Subtract line 2 from line 1d	3					
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by .035	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
	Section C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2	Enter 85% of line 1	2					
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4	Enter greater of line 2 or line 3	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6					

	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9	Distributable amount for 2019 from Section C, line 6	

_6	Other distributions (describe in Part VI). See instruction			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to wh details in Part VI). See instructions	sive (provide		
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019

7 Total annual distributions. Add lines 1 through 6.					
o∨ide					
10 Line 8 amount divided by Line 9 amount					
(ii) derdistributions Pre-2019	(iii) Distributable Amount for 2019				
derdistributions	Distributable				
0	vide				

8 Distributions to attentive supported organizations to widetails in Part VI). See instructions			
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016			
d From 2017			

e From 2018. f Total of lines 3a through e

instructions)

See instructions.

e Excess from 2019.

\$

g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7:

a Applied to underdistributions of prior years **b** Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2020. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2015.

b Excess from 2016. c Excess from 2017. **d** Excess from 2018.

Schedule A (Form 990 or 990-EZ) (2019)

Schedule A (Form 990 or 990-EZ) 2019 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D. lines 5, 6, and 8; and Part V. Section E. lines 2, 5, and 6. Also complete this part for any additional information. (See instructions). **Facts And Circumstances Test** 990 Schedule A, Supplemental Information Return Reference Explanation SCHEDULE A. PART II, LINE 10. MISCELLANEOUS - 2015 AMOUNT: \$ 97.592. 2016 AMOUNT: \$ 62.847. 2017 AMOUNT: \$ 351.997. 2018 EXPLANATION OF OTHER AMOUNT: \$ 68,592. 2019 AMOUNT: \$ 62,226. MAILING LIST RENTAL - 2015 AMOUNT: \$ 18,175. NET

FUNDRAISING INCOME - 2019 AMOUNT: \$ 13,444.

INCOME:

Section 527 organizations: Complete Part I-A only.

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

Political Campaign and Lobbying Activities

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

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

OMB No. 1545-0047

DLN: 93493089013441

Open to Public

Department of the Treasury Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

EZ)

SCHEDULE C (Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

• S • S f the Pro	Section 501(c)(3) organizations that Section 501(c)(3) organizations that		ection 501(h)): Co der section 501(h	omplete Part II-A. Do not co)): Complete Part II-B. Do	omplete Part II-B. not complete Part II-A.
	me of the organization	ations. Complete Fart III.		Employer ider	ntification number
EAR	THJUSTICE			04.1720465	
Par	t I-A Complete if the organ	nization is exempt under sectio	n 501(c) or is	94-1730465 a section 527 organi	zation.
1		ization's direct and indirect political cam			
2		itures (see instructions)			\$
3		aign activities (see instructions)			
Par	t I-B Complete if the organ	nization is exempt under sectio	n 501(c)(3).		
1	Enter the amount of any excise ta	x incurred by the organization under se	ction 4955	>	\$
2	Enter the amount of any excise ta	ix incurred by organization managers ur	der section 4955	>	\$
3	If the organization incurred a sect	ion 4955 tax, did it file Form 4720 for t	his year?		Yes No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV.				
Par	t I-C Complete if the organ	nization is exempt under sectio	n 501(c), exce	ept section 501(c)(3)).
1	Enter the amount directly expend	ed by the filing organization for section	527 exempt funct	ion activities 🕨	\$
2		anization's funds contributed to other or			\$
3	Total exempt function expenditure	es. Add lines 1 and 2. Enter here and on	Form 1120-POL,	line 17b ▶	\$
4	Did the filing organization file For	m 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments. For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere se (PAC). If additional space is needed,	unt paid from the ed to a separate p	filing organization's funds olitical organization, such	ch the filing . Also enter the amount
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
1					
2					
3					
1					
5					
5					
or P	aperwork Reduction Act Notice, see t	the instructions for Form 990 or 990-EZ.	Cat.	No. 500845 Schedule C (Form 990 or 990-EZ) 2019

250,000

261.878

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Grassroots ceiling amount

250,000

218,367

250,000

235,546

250,000

239,016 Schedule C (Form 990 or 990-EZ) 2019

1,000,000

1.500.000

Return Reference

Form 5768 (election under section 501(h)). For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying		(a)		(b)	
activity.				Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	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				
a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
•					
	tIII-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), o	r secti	on	
	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), o	r secti	on Ye	s N
art			r secti		s N
art	501(c)(6).		r secti	Ye	s N
Part	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?		E	1 Ye	s N
Part	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?		 [Ye 1 2 3	
art	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?	 (5), o	 r secti	Ye 1 2 3 on 501	
art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TITI-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part	 (5), o	 r secti	Ye 1 2 3 on 501	
art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TITI-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	(5), o	 r secti	Ye 1 2 3 on 501	
art	Were substantially all (90% or more) dues received nondeductible by members?	(5), o III-A	 r secti	Ye 1 2 3 on 501	
art	Were substantially all (90% or more) dues received nondeductible by members?	(5), o III-A 1 2a 2b	 r secti	Ye 1 2 3 on 501	
art art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total	(5), o III-A 1 2a 2b 2c	 r secti	Ye 1 2 3 on 501	
art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? EIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	(5), o III-A 1 2a 2b	 r secti	Ye 1 2 3 on 501	
Part	Were substantially all (90% or more) dues received nondeductible by members?	(5), o III-A 1 2a 2b 2c 3	 r secti	Ye 1 2 3 on 501	
art arb c	Were substantially all (90% or more) dues received nondeductible by members?	(5), o III-A 1 2a 2b 2c	 r secti	Ye 1 2 3 on 501	

Explanation

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

DLN: 93493089013441

Schedule D (Form 990) 2019

Cat. No. 52283D

2019

OMB No. 1545-0047

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.

Open to Public

Department of the Treasury

(Form 990)

tern	al Revenue Service	► Go to <u>www.irs.gov/Forn</u>	<u>າ990</u> for instructior	ns and the latest infor	mation.	Ins	spection
	me of the organ THJUSTICE	ization			Employer ide	entification	number
В-	or a Compani	tions Maintaining Bonon Advi		Cimila . F da .	94-1730465		
ė	rt I Organi: Comple	zations Maintaining Donor Advi te if the organization answered "Ye	sea runas or Otr es" on Form 990. P	i er Similar Funds o art IV. line 6.	F Accounts.		
				advised funds	(b) Fund	ls and other	accounts
L	Total number at	end of year					
2	Aggregate value	of contributions to (during year)					
3	Aggregate value	of grants from (during year)					
1	Aggregate value	at end of year					
5		ation inform all donors and donor adviso roperty, subject to the organization's ex				_	Yes 🗆 No
5	charitable purpo	ation inform all grantees, donors, and donses and not for the benefit of the donor	r or donor advisor, or	for any other purpose of	be used only for conferring imper	r rmissible	Yes 🗌 No
Par		vation Easements. te if the organization answered "Ye	es" on Form 990, P	art IV, line 7.			
L	Purpose(s) of co	onservation easements held by the orga	nization (check all tha	at apply).			
	☐ Preservation	on of land for public use (e.g., recreation	n or education)	Preservation of an	historically imp	ortant land a	area
	☐ Protection	of natural habitat	!	Preservation of a d	certified historic	structure	
	☐ Preservation	on of open space					
2		2a through 2d if the organization held a e last day of the tax year.	qualified conservatio	n contribution in the for		ation at the End o	of the Year
а	Total number of	conservation easements			2a		
b	Total acreage re	stricted by conservation easements			2b		
С	Number of conse	ervation easements on a certified histori	ic structure included i	n (a)	2c		
d		ervation easements included in (c) acquin the National Register	ired after 7/25/06, ar	nd not on a historic	2d		
3	Number of constax year ►	ervation easements modified, transferre	ed, released, extingui	shed, or terminated by	the organization	n during the	
1	Number of state	es where property subject to conservation	on easement is locate	d ▶			
5	Does the organi and enforcemen	zation have a written policy regarding that of the conservation easements it hold:	he periodic monitorings?	g, inspection, handling ·	of violations,	☐ Yes	□ No
5	Staff and volunt	eer hours devoted to monitoring, inspec	cting, handling of viol	ations, and enforcing co	onservation ease	ements durin	ng the year
7	Amount of expe	enses incurred in monitoring, inspecting,	handling of violation	s, and enforcing conser	vation easement	ts during the	e year
3		ervation easement reported on line 2(d)			70(h)(4)(B)(i)	☐ Yes	□ No
9	balance sheet, a	scribe how the organization reports cons and include, if applicable, the text of the	footnote to the orga				
ar	t IIII Organi	n's accounting for conservation easemen zations Maintaining Collections	of Art, Historica		er Similar As	sets.	
La		te if the organization answered "Ye ion elected, as permitted under SFAS 11			atement and hal	ance sheet "	works of
La	art, historical tre	easures, or other similar assets held for XIII, the text of the footnote to its finar	public exhibition, edu	ucation, or research in f			
b	historical treasu	ion elected, as permitted under SFAS 11 ires, or other similar assets held for pub nts relating to these items:					
(i) Revenue includ	led on Form 990, Part VIII, line 1			▶\$		
		in Form 990, Part X					
2	If the organizati	ion received or held works of art, histori nts required to be reported under SFAS	ical treasures, or othe	er similar assets for fina		de the	
а	Revenue include	ed on Form 990, Part VIII, line 1			> \$		
b	Assets included	in Form 990, Part X			▶\$		

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

d Equipment

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

Sche	edule D	(Form 990) 2019								Page 2
Pai	t III	Organizations M	aintaining Col	lections of Art,	Histori	cal Tre	easure	s, or Other	Similar Assets	(continued)
3		g the organization's acq s (check all that apply):		n, and other records	, check a	any of th	ne follow	ving that are a	significant use of i	ts collection
а		Public exhibition			d		Loan or	exchange prog	rams	
b		Scholarly research			e		Other			
С		Preservation for future	e generations							
4	Provi Part	ide a description of the XIII.	organization's col	lections and explain	how the	y furthe	er the or	ganization's ex	kempt purpose in	
5		ng the year, did the org ts to be sold to raise fui								es 🗌 No
Pa	rt IV	Escrow and Cust Complete if the or X, line 21.			rm 990	, Part I	V, line	9, or reporte	d an amount on	Form 990, Part
1a		e organization an agent ded on Form 990, Part							_	es 🗹 No
b	If "Y	es," explain the arrange	ement in Part XIII	and complete the fo	ollowina	table:			Amount	
c		nning balance						1c		
d	_	tions during the year .						1d		
е	Distr	ibutions during the yea	r					1e		
f	Endir	ng balance						1f		
2a	Did t	the organization include	an amount on Fo	rm 990, Part X, line	21, for	escrow (or custo	dial account lia	bility? 🔽 Y	es 🗆 No
b		es," explain the arrange								
	art V	Endowment Fun		· oned in the c	, хртатта ст			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		Complete if the or	ganization ansv							
				(a) Current year	(b) P	rior year		Two years back	(d) Three years back	
	_	ning of year balance .		1,907,937		1,853,9	959	1,792,823	1,666,509	1,696,836
		butions		71,742		123,1	143	128,598	192,703	34,619
		vestment earnings, gair	•	71,712		123,1	13	120,030	152,700	31,013
	Other	s or scholarships expenditures for faciliti		71,678		69,1	165	67,462	66,389	64,946
f		nistrative expenses .						<u> </u>		
		f year balance		1,908,001		1,907,9	937	1,853,959	1,792,823	1,666,509
2		ide the estimated perce	entage of the curre		line 1				, ,	<u>'</u>
- ء		d designated or quasi-e	-	0 %	· (IIIIC 19	g, coluin	III (U)) II	icia as.		
b		nanent endowment >	100.000 %							
c	_	porarily restricted endo		1 %						
٠		percentages on lines 2a	***************************************							
3а	Are t	there endowment funds nization by:			tion that	t are hel	d and a	dministered fo	r the	Yes No
	(i) u	ınrelated organizations						•	[3	Ba(i) No
		related organizations							3	Ba(ii) No
		es" on 3a(ii), are the re	-							3b
4		ribe in Part XIII the inte			wment f	runas.				
Рð	rt VI	Land, Buildings, Complete if the or			rm 990	. Part ī	V. line	11a. See For	m 990. Part X I	ine 10.
	Descr	ription of property	(a) Cost or oth	ner basis (b) Cos		basis (ot		c) Accumulated of		(d) Book value
		· · · ·	(investme	ent)						
1 a	Land					232	,880			232,880
	Buildir					475	,112		183,126	291,986
		hold improvements				9,421	,660		2,725,523	6,696,137

6,768,759

2,303,117

9,524,120

4,465,642

Part VII	Complete if the organization answered "Yes" on F	orm 990, Part IV, lin	e 11b.See Form 990,	Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Metho	d of valuation: -year market value
(1) Financia				year market value
	held equity interests			
(A) OTHER S	SECURITIES	38,403,361		F
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
-	n (b) must equal Form 990, Part X, col. (B) line 12.)	38,403,361		
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on F	orm 990. Part IV. lin	e 11c. See Form 990.	Part X. line 13.
	(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)				
	n (b) must equal Form 990, Part X, col.(B) line 13.)		>	
Part IX	Other Assets.		•	
	Complete if the organization answered 'Yes' on Fo		e 11d. See Form 990, Pa	(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col.(B) line 15.)			<u> </u>
Part X	Other Liabilities.			•
1.	Complete if the organization answered 'Yes' on Fo (a) Description of lia		e 11e or 11f.See Form	(b) Book
	income taxes	-		value
(2) SPLIT IN	TEREST GIFT AGREEMENTS			5,652,847
	ED COMPENSATION LIABILITY			825,327
(4) DEFERRE (5)	ED RENT AND LEASE INCENTIVE LIABILITIES			8,136,913
(6)				
(7)				
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col.(B) line 25.) or uncertain tax positions. In Part XIII, provide the text of	the footnote to the ora		14,615,087 ments that reports the organization's li
	x positions under FIN 48 (ASC 740). Check here if the tex			

2

1

2

C

d

е 3

b

Part XIII

See Additional Data Table

4

5

а

Schedule D (Form 990) 2019

Page 4

7,496,841

-2,262

146,976,947

146,974,685

100,839,269

4,189,468

96,649,801

96.649.801

Schedule D (Form 990) 2019

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

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Donated services and use of facilities b

e Subtract line **2e** from line **1**

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Net unrealized gains (losses) on investments

Amounts included on Form 990, Part VIII, line 12, but not on line 1:

3 4

Add lines **4a** and **4b**

b C 5

Part XII

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Subtract line 2e from line 1

Add lines **4a** and **4b**

Supplemental Information

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Donated services and use of facilities . .

Prior year adjustments

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Return Reference

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Total expenses and losses per audited financial statements

Investment expenses not included on Form 990, Part VIII, line 7b .

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

4a 4b

2a

2b

2c

2d

4a 4b

Explanation

2a

-2,262

4,187,206

2,262

2e

3

4c

5

3,221,383

4c

2e

3

chedule D (Forn	n 990) 2019	Page 5
Part XIII	Supplemental Info	rmation (continued)
Retur	n Reference	Explanation

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 94-1730465

Name: EARTHJUSTICE

Supplemental Information

PART IV, LINE 2B:

Return Reference Explanation

AS A LAW FIRM, WE ARE REQUIRED TO HOLD MONEY RECEIVED FOR THE BENEFIT OF CLIENTS IN STATE-SPECIFIC ATTORNEY CLIENT TRUST ACCOUNTS, UNTIL THE FUNDS ARE APPROPRIATELY IDENTIFIED AND EITHER REFUNDED TO THE CLIENTS OR TRANSFERRED INTO OPERATING FUNDS. AS OF 6/30/20, THE TOT AL BALANCE IN OUR CLIENT TRUST FUND ACCOUNTS TOTALED \$491,767.

Supplemental Information	
Return Reference	Explanation
	THE ENDOWMENT FUNDS ARE SEPARATED INTO FOUR CATEGORIES, EACH BASED ON A DIFFERENT SPENDING RESTRICTION, AS STIPULATED BY THE DONOR. A PORTION OF ENDOWMENT FUNDS ARE USED EACH YEAR TO SUPPORT ORGANIZATIONAL EXPENSES IN ACCORDANCE WITH THE SPENDING RESTRICTIONS ASSOCIATED WITH EACH OF THE FOUR CATEGORIES.

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	CHANGE IN VALUE OF SPLIT-INTEREST GIFT AGREEMENTS 88,252.

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	DIRECT EXPENSES FOR FUNDRAISING EVENTS INCLUDED ON FORM 990, PART VIII, LN 8 -2,262.

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Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	DIRECT EXPENSES FOR FUNDRAISING EVENTS INCLUDED ON FORM 990, PART VIII, LN 8 2,262.

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efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493089013441 OMB No. 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2019 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** EARTHJUSTICE 94-1730465 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance 2 outside the United States. Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) 3 (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (such as, program service, describe for and investments region and independent fundraising, program specific type of in the region contractors in the services, investments, grants service(s) in the region region to recipients located in the region) See Add'l Data 887.019 3a Sub-total . b Total from continuation sheets to Part I . . . 887,019 c Totals (add lines 3a and 3b)

	uplicated if addit	(c) Number of		(a) Mannay of as -1-	(f) Amount of	(a) Decembring	(h) Math
ype of grant or assistance	(b) Region	recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other

Sched	dule F (Form 990) 2019		Page 4
Par	Toreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
		☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign		
	Corporations. (see Instructions for Form 5471)	Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships		
	(see Instructions for Form 8865)	☐Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713; don't file with Form 990)	☐Yes	✓ No

Schedule F	(Form 990) 2019	Page 5
Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); and Part III, column (c) (estimated number of recipients), as applicable any additional information. See instructions. 990 Schedule F, Supplemental Information		method); Part III (accounting
	Return Reference	Explanation
PART III AC	CCOUNTING METHOD:	

Additional Data

EAST ASIA AND THE PACIFIC

EUROPE (INCLUDING ICELAND

AND GREENLAND)

Software ID: Software Version:

EIN: 94-1730465 Name: EARTHJUSTICE

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of	(c) Number of	(d) Activities co
	offices in the	employees or	in region (by ty
	region	agents in	fundraising, p
		region	services, gra

1 PROGRAM SERVICES

1 PROGRAM SERVICES

conducted ype) (i.e., program i, grants to

recipients located in the region)

(e) If activity listed in (d) is a program service, describe specific type of

service(s) in region

TRANSLATION SERVICES

ADVOCACY AT UN

(f) Total expenditures

for region

15,321

32,422

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region agents in fundraising, program describe specific type of region services, grants to service(s) in region region recipients located in the region) . IPROGRAM SERVICES 34,360 NORTH AMERICAN RESEARCH SERVICES AND (INCLUDING CANADA AND EXPERT DECLARATION MEXICO, BUT NOT THE UNITED STATES) SOUTH AMERICA 1 PROGRAM SERVICES **ICLEAN ENERGY** 1.950 CONSULTING

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (d) Activities conducted (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of region agents in fundraising, program service(s) in region region services, grants to recipients located in the region) 1 IPROGRAM SERVICES 802,966 SOUTH ASIA IENERGY DEVELOPMENT AND RESOURCE IADVOCACY

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493089013441

OMB No. 1545-0047

Supplemental Information Regarding Fundraising or Gaming Activities

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE G

(Form 990 or 990-EZ)

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

Employer identification number Name of the organization **EARTHJUSTICE** 94-1730465 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. ✓ Mail solicitations e ✓ Solicitation of non-government grants ✓ Internet and email solicitations Solicitation of government grants ✓ Phone solicitations ✓ Special fundraising events ✓ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Ves □ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (iii) Did (ii) Activity (iv) Gross receipts (v) Amount paid to (vi) Amount paid to fundraiser have or entity (fundraiser) from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No DIRECT MAIL MAL WARWICK ASSOCIATES CONSULTANT 2550 NINTH ST STE 103 No 7,171,563 3,032,934 4,138,629 BERKELEY, CA 94710 TELEMARKETING DONOR SERVICES GROUP LLC 1200 WILSHIRE BLVD SUITE Nο 4,389 13,709 -9,320 650 LOS ANGELES, CA 90017

licensing. AL, AK, AZ, CA, CT, FL, GA, HI, IL, KS, KY, LA, MD, MA, ME, MI, MN, MS, NH, NJ, NM, NY, NC, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, MO, CO,

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or

7,175,952

Cat. No. 50083H

3,046,643

Schedule G (Form 990 or 990-EZ) 2019

4,129,309

DE, ID, IN, IA, MT, NE, NV, ND, SD, TX, VT, GU, DC, AR

	dule G (Form 990 or 990-EZ) 2019 rt III Fundraising Events. Comple	to if the organization a	answered "Ves" on For	m 990 Part IV line 19	Page 2
Га	than \$15,000 of fundraising egross receipts greater than \$5	vent contributions and			
	gross receipes greater than \$5	(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col. (a) through
		PAUL SIMON PRIVATE CONCERT EVENT (event type)	(event type)	(total number)	col. (c))
Revenue					
	1 Gross receipts	434,665			434,665
	2 Less: Contributions	418,959			418,959
	3 Gross income (line 1 minus line 2)	15,706			15,706
	4 Cash prizes				
ş	5 Noncash prizes				
ense	6 Rent/facility costs				
Direct Expenses	7 Food and beverages				
rect	8 Entertainment				
۵	10 Direct expense summary. Add lines 4 t	2,262		<u> </u>	2,262
	11 Net income summary. Subtract line 10	-			2,262
Pai	t III Gaming. Complete if the orga		s" on Form 990, Part I	V, line 19, or reported	
Revenue	on Form 990-EZ, line 6a.	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Re	1 Gross revenue				
ses	2 Cash prizes				
<u>8</u>	3 Noncash prizes				
Direct Expense	4 Rent/facility costs				
ă	5 Other direct expenses				
		☐ Yes%	☐ Yes %	☐ Yes %	
	6 Volunteer labor	□ No	□ No	□ No	
	7 Direct expense summary. Add lines 2 t	hrough 5 in column (d)		•	
	8 Net gaming income summary. Subtract	line 7 from line 1, colum	n (d)	•	
9 a	Enter the state(s) in which the organization Is the organization licensed to conduct ga				 □ Yes □ No
b	If "No," explain:				
10a					
				,	∐ Yes
b	ii les, explain.				

	dule G (Form 990 or 990-EZ) 2019					ŀ	age 3				
11	Does the organization conduct gaming				☐ Yes	□ No					
12	Is the organization a grantor, benefici formed to administer charitable gamin		member of a partnership or other entity		☐ Yes	□No					
13	Indicate the percentage of gaming ac	tivity conducted in:									
а	The organization's facility			13a			%				
b	An outside facility			13b			%				
14	Enter the name and address of the pe	Enter the name and address of the person who prepares the organization's gaming/special events books and records:									
	Name •										
	Address										
15a	Does the organization have a contract revenue?	• •	n the organization receives gaming		□Yes	□No					
b	If "Yes," enter the amount of gaming revenue received by the organization \(\brace \) \$ and the amount of gaming revenue retained by the third party \(\brace \) \$										
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:										
а	Is the organization required under sta	the organization required under state law to make charitable distributions from the gaming proceeds to tain the state gaming license?									
b	·	Enter the amount of distributions required under state law distributed to other exempt organizations or spent									
	in the organization's own exempt acti		•	- /:::>	- d (.)	- d D- 1					
Pal			ons required by Part I, line 2b, columns cable. Also provide any additional infor				s				
	Return Reference		Explanation								
PAR1	I. LINE 2(B)(V)	THE ORGANIZATION PAID \$	217,150 FOR A RETAINER AND \$2,815,784	THE ORGANIZATION PAID \$217,150 FOR A RETAINER AND \$2,815,784 FOR MAILINGS.							

Schedule G (Form 990 or 990-EZ) 2019

DLN: 93493089013441 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I OMB No. 1545-0047 **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ► Attach to Form 990. Department of the Inspection ► Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization **Employer identification number** EARTHJUSTICE 94-1730465 Part I **General Information on Grants and Assistance**

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

that received more than \$5,000. Part II can be duplicated if additional space is needed.

1

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient

✓ Yes

GRANTS AND/OR ASSISTANCE ARE PROVIDED TO OTHER ORGANIZATIONS FOR PURPOSES RELATED TO COMMON INTEREST AND ENDEAVORS ON PARTICULAR

ENVIRONMENTAL ISSUES. THOSE PURPOSES ARE CONSISTENT WITH THE MISSION OF EARTHJUSTICE AND THE RESTRICTIONS ON 501(C)(3) ORGANIZATIONS. WHETHER OR NOT THE RECIPIENT IS A 501(C)(3) ORGANIZATION. THE RECIPIENTS' USE OF FUNDS IS MONITORED AS PART OF EARTHJUSTICE'S INVOLVEMENT IN

Schedule I (Form 990) 2019

(5) (6)

(7)

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Explanation

THE ISSUES OF SHARED INTEREST.

Return Reference

SCHEDULE I PART I LINE 2

Additional Data

EARTHJUSTICE ACTION

NO 700

500 NEW JERSEY AVENUE NW

WASHINGTON, DC 200012066 HARAMBEE HOUSE INC

1115 HABERSHAM STREET

SAVANNAH, GA 31401

Software ID: Software Version:

82-1981944

58-2219332

EIN: 94-1730465

Name: EARTHJUSTICE

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation
organization		if applicable	grant	cash	(book, FMV, appraisal,

organization	if applicable	grant	cash	(book, FMV, appraisal,	ı
or government			assistance	other)	ı
					ı

or yarnization	l abblicable	l Alant	Lasii	[(DOOK, FINV, applaisa
or government			assistance	other)

501(C)(4)

501(C)(3)

organization	if applicable	grant	cash	(book, FMV, appraisal
or government			assistance	other)
		l .		1

Form 990,Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.	
(a) Name and address of organization	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash	(f) Method of valuation (book, FMV, appraisal,	

TT	Cunnta and Other	Naciatawaa ta Dama	atia Overniustian	a and Damastic C	

130,000

55,000

GRANT TO SUPPORT THE MISSION OF EARTHJUSTICE ACTION

TO SUPPORT EFFORTS

ENVIRONMENT JUSTICE IN THE SOUTHEAST.

TO ADVANCE LOCAL

(h) Purpose of grant

or assistance

(g) Description of

non-cash assistance

if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) PARTNERSHIP PROJECT INC 52-2192070 501(C)(3) 250,000 TO SUPPORT EFFORTS PO BOX 65826 TO ADVANCE THE WASHINGTON, DC 20035 IENVIRONMENTAL LILICATION PERCONAGE OF

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

ORGANIZATIONS

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(b) EIN

(a) Name and address of

					THE EQUITABLE AND JUST NATIONAL CLIMATE PLATFORM.
SOCIAL & ENVIRONMENTAL ENTREPRENEURS 23532 CALABASAS ROAD SUITE A CALABASAS, CA 91302	95-4116679	501(C)(3)	200,000		TO PROMOTE THE SUSTAINABILITY AND CAPACITY BUILDING OF RECIPIENT GRASSROOTS ENVIRONMENTAL JUSTICE

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) GRASSROOTS INTERNATIONAL 04-2791159 501(C)(3) 50,000 IGRANT TO SUPPORT

(d) Amount of cash

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

THE ODGANIZATION'S

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(b) EIN

(a) Name and address of

170 BOVICTON STREET ATL

FLOOR BOSTON, MA 02130					SUSTAINABILITY AND CAPACITY BUILDING
CENTER FOR EARTH ENERGY & DEMOCRACY 4511 34TH AVE S SUITE A MINNEAPOLIS, MN 55406	45-2580349	501(C)(3)	100,000		TO SUPPORT THE WORK OF ADVANCING JUST CLIMATE POLICY, INCLUDING LEADERSHIP IN

IDEVELOPING AND ADVANCING HISTORIC CLIMATE POLICY AT THE JUST CLIMATE FORUM.

organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) NATIONAL BLACK CAUCUS OF 52-1218832 501(C)(3) 50,000 TO FURTHER ITS WORK

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

STATE LEGISLATORS 444 NORTH CAPITOL STREET NW SUITE 622 WASHINGTON, DC 20001					IN ENVIRONMENTAL JUSTICE AND CLIMATE JUSTICE.
ASOCIACIN INTERAMERICANA PARA LA DEFENSA DEL	94-3292116	501(C)(3)	125,000		TO SUPPORT STOPPING FOSSIL FUELS IN LATIN

AMBIENTE (AIDA) IAMERICA 50 CALIFORNIA STREET SUITE 500

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

SAN FRANCISCO, CA 94111

(b) EIN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 95-1667177 501(C)(3) 65.000l INATIONAL OCCIDENTAL COLLEGE 1600 CAMPUS ROAD IENVIRONMENTAL LOS ANGELES, CA 90041 POLICY ACT (NEPA) ICAMPAIGN FOR IMOVING FORWARD

NETWORK.

efil	e GRAPHIC pi	int - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49308	39013	441
Sch	nedule J	Co	ompensati	ion Information	0	MB No.	1545-(0047
(For	m 990)	For certain Office		rustees, Key Employees, and Hig	hest			
		Complete if the org	Compensa Janization answ	ited Employees ered "Yes" on Form 990, Part IV,	, line 23.	20)
D			▶ Attach	to Form 990. instructions and the latest inform		Openi		
-	tment of the Treasury al Revenue Service	P Go to <u>www.ns.go</u>	101	mistractions and the latest miori	nation.		ectio	
	ne of the organiza THJUSTICE	ation			Employer identifica	tion nu	ımber	
					94-1730465			
Pa	rt I Questi	ons Regarding Compensa	tion					
1 a				the following to or for a person lister			Yes	No_
		,	III to provide an	y relevant information regarding thes				
		s or charter travel companions		Housing allowance or residence for payments for business use of person	•			
		nification and gross-up payment	s \Box	Health or social club dues or initiation				
		nary spending account		Personal services (e.g., maid, chauf				
				e 11 11				
b				follow a written policy regarding pay: ve? If "No," complete Part III to expl		1b		
2				or allowing expenses incurred by all		2		
	directors, truste	es, officers, including the CEO/E	xecutive Director	r, regarding the items checked on Lir	ne la?			
3				d to establish the compensation of the	ne			
				not check any boxes for methods CEO/Executive Director, but explain i	n Part III.			
	☐ Compens	ation committee	П	Written employment contract				
		ent compensation consultant	☑	Compensation survey or study				
	☐ Form 990	of other organizations	\checkmark	Approval by the board or compensa	tion committee			
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the fi	iling organization or a			
а	Receive a sever	ance payment or change-of-con	trol payment? .			4a	Yes	
b	Participate in, o	r receive payment from, a suppl	emental nonquali	ified retirement plan?		4b		No
С			,	nsation arrangement?		4c		No
	ir res to any o	or lines 4a-c, list the persons and	d provide the app	licable amounts for each item in Part	III.			
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.				
5		ed on Form 990, Part VII, Sectio ontingent on the revenues of:		the organization pay or accrue any				
а	The organization	1?				5a		No
b		anization?				5b		No
6		ed on Form 990, Part VII, Sectio ontingent on the net earnings of		the organization pay or accrue any				
а	The organization	1?				6a		No
b	, -					6b		No
7	· ·	6a or 6b, describe in Part III.	n A line to did a	the organization provide any nonfixed	d			
7	payments not d	escribed in lines 5 and 6? If "Yes	s," describe in Pa	the organization provide any nonfixed rt III	u 	7	Yes	
8	subject to the ir	nitial contract exception describe	d in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," de		8		No
9	If "Yes" on line	8, did the organization also follo	w the rebuttable	presumption procedure described in	Regulations section	9		110
For F	Paperwork Redu	iction Act Notice, see the Ins	tructions for Fo	orm 990. Cat. No. 5	50053T Schedule	(Form	990)	2019

Schedule J (Form 990) 2019

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

(A) Name and Title		(B) Brea	kdown of W-2 and/o compensation	or 1099-MISC	and other	(D) Nontaxable benefits	columns	Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on pric Form 990
See Additional Data Table								

Schedule J (Form 990) 2019	Page 3						
Part III Supplemental Information							
Provide the information, explanation, or	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.						
Return Reference	Explanation						
l l	SEVERANCE WAS PAID TO LISA GARCIA IN THE AMOUNT OF \$130,290 UPON HER TERMINATION ON 09/05/2019. THE AMOUNT WAS REPORTED ON PART II, COLUMN B(III).						
	ONE-TIME PERFORMANCE BONUSES AND THE AMOUNTS SHOWN IN PART II, COLUMN B(II) WERE PAID IN CALENDAR YEAR 2019. THE PERFORMANCE BONUSES WERE APPROVED BY THE PRESIDENT. NO BONUSES WERE MADE CONTINGENT ON REVENUES OR NET INCOME OF THE ORGANIZATION.						

Schedule 1 (Form 990) 2019

Software ID:

Software Version:

EIN: 94-1730465

Name: EARTHJUSTICE

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in (A) Name and Title other deferred benefits (B)(i)-(D) column (B) (i) Base Compensation (ii) (iii) reported as deferred on compensation Bonus & incentive Other reportable prior Form 990 compensation compensation 1ABIGAIL DILLEN 402,070 25,200 31,554 458,824 PRESIDENT 1JASON SCHWARTZ (i) 212,536 11,000 22,663 246,200 VP OF FINANCE; ASST. 2KENNETH MCKENZIE 207,841 20,961 15,888 244,690 GENERAL COUNSEL; ASST.

3MARGARET MARSH-HEINE VICE PRESIDENT	(i)	319,331	0	0	28,000	30,277	377,608	0
DEVELOPMENT	(ii)	0	0	0	0	0	0	0
4ANDREW CAPUTO VICE PRESIDENT	(i)	268,759	4,500	0	28,000	31,554	332,813	0
LITIGATION	(ii)	0	0	0	0	0	0	0
5CHRISTA BROTHERS VICE PRESIDENT HUMAN	(i)	242,382	0	10,080	25,967	22,528	300,957	0
RESOU	(ii)	0	0	0	0	0	0	0
6 SAMBHAV SANKAR SR. VICE PRESIDENT OF	(i)	282,115	10,000	0	0	0	292,115	0
PROGRAMS	(ii)	0	0	0	0	0	0	0
7 JILL TAUBER VICE PRESIDENT OF	(i)	233,163	0	0	23,566	9,793	266,522	0
LITIGATION	(ii)	0	0	0	0	0	0	0
8 RAY WAN VP OF COMMUNICATIONS	(i)	250,016	0	0	24,996	15,888	290,900	0
AND M	(ii)	0	0	0	0	0	0	0
9 LISA GARCIA VP OF LITIGATION (ENDED	(i)	200,077	0	130,290	20,847	22,645	373,859	0
9/5/2019)	(ii)	0	0	0	0	0	0	0
10 MARTIN HAYDEN VICE PRESIDENT OF	(i)	254,979	5,000	o	26,534	17,805	304,318	0
LITIGATION	(ii)	0	0	0	0	0	0	0
11ELIZABETH MARSH ASSOCIATE VP OF	(i)	215,070	10,000	19,000	24,572	0	268,642	0
DEVELOPMENT	(ii)	0	0	0	0	0	0	0
12PATRICE SIMMS VICE PRESIDENT OF	(i)	247,953	0	0	19,394	0	267,347	0
LITIGATION	(ii)	0	0	0	0	0	0	0
13KRISTINE STRATTON SR VP OF OPS; ASST.	(i)	105,955	0	0	10,665	3,355	119,975	0
(ENDED 4/23/2019	(ii)	0	0	0	0	0	0	0

DLN: 93493089013441 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number EARTHJUSTICE** 94-1730465 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art-Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles **7** Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . Χ 258 9,092,398 FMV 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . Real estate—Other . . . 18 Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ (___ 26 Other ▶ (______) 27 Other ▶ (______) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Yes **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2019)	Page 2					
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.						
Return Reference	Explanation					
PART I, COLUMN (B):	THE AMOUNT ABOVE REFLECTS THE NUMBER OF CONTRIBUTIONS.					
·	SECURITIES BROKERS WILL SELL STOCK GIFTS ON BEHALF OF EARTHJUSTICE; FROM TIME TO TIME, DONORS HAVE CONTRIBUTED REAL PROPERTY, USUALLY INTO A CHARITABLE REMAINDER TRUST. WHEN THIS HAPPENS, A REAL ESTATE AGENT WILL BE HIRED TO ASSIST IN SELLING THE PROPERTY.					
	Schedule M (Form 990) (2019)					

efile GRAPH	C print - DO NOT PRO	CESS As Filed Data -		DLN:	93493089013441
SCHEDUL (Form 990 or EZ)	90-EZ ons on on.	OMB No. 1545-0047 2019 Open to Public Inspection			
Ntamel Bethe เอโต EARTHJUSTICE	¥M\$ation			Employer identi 94-1730465	fication number
990 Schedul	O, Supplemental Info	rmation			
Return Reference		Ex	olanation		
FORM 990, PART III	CREATURES, SAFEGUARI HAVE CONTINUED TO HOFOR THEIR ACTIONS. AS LEVERAGE OUR EXPERTIE EARTHJUSTICE BRINGS OF STRENGTHENED BY POLITION. AND WITHIN THE CONTINUE OF THEE KEY GOALS TO SEPRESERVING THE WILD APROGRAM AREAS, EARTHJUSTICE. WITH A LONGSTOBE A BETTER AND STE	OF CASES AT THE NATIONAL AD COMMUNITY HEALTH, ADVANDED THOSE WHO BREAK OUR NATHE PREMIER NONPROFIT PUBLISE AND COMMITMENT TO FIGHOLSES THAT WILL SET PRECED OURT OF PUBLIC OPINION TO SIECURE A JUST AND FLOURISHIES ADVANCING CLEAN ENERGY AND HOUSE HAS CONTINUED WITTANDING TRADITION OF EMPHARONGER PARTNER TO GROUPS WORK, WE ARE PREVAILING IN	CE CLEAN ENERGY, AND ATION'S STRONG ENVIROI LIC INTEREST ENVIRONM T FOR JUSTICE AND CREENTS FOR GENERATIONS AMS WORKING WITH DECUSTAIN OUR LEGAL VICTOR WORLD: FIGHTING FOR D A HEALTHY CLIMATE IN H ITS COMMITMENT TO PUSIS ON PARTNERSHIP, WE LARGE AND SMALL WHO	COMBAT CLIMANMENTAL LAWS ENTAL LAW ORCATE LASTING CHOTO COME. OUR ISION-MAKERS IDRIES. EARTHJUR HEALTHY COME. ADDITION TO TIROTECT PUBLICE ARE ALSO EXF	TE CHANGE. WE ACCOUNTABLE GANIZATION, WE HANGE. LITIGATION IS N WASHINGTON, STICE PURSUES MUNITIES HESE THREE ACCESS TO PLORING NEW WAYS WITH OUR CAUSES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III	SCHEDULE OF COURT AWARDED ATTORNEY FEES & COSTS 1404 2020 BIOP & CRSO FEIS 1,968.007.34 31 45 WORLD LOGISTICS CENTER INITIATIVE CHALLENGE 449,118.71 3537 CADIZ RIGHT OF WAY 373,824. 23 3087 ADC NPDES PERMIT 263,457.20 2888 MEXICAN WOLF 10(J) RULE CHALLENGE 257,485.53 3647 FIRSTENERGY SOLUTIONS BANKRUPTCY 255.498 1.9 3194 FISHER LISTING WITHDRAWAL 249,539 40 298 1 2008 OZONE IMPLEMENTATION 248,962.25 3306 WEST COAST ANCHOVY CATCH LIMITS 247,787.44 323 7 KLAMATH REINITIATION OF CONSULTATION 241,292.91 3897 RAISING SHASTA DAM - STATE LAW 192, 451.02 3553 BLM METHANR RULE SUSPENSION 140,272.28 3202 CHEMICAL DISASTER RULE 119,308 80 1310 E.W. BROWN CITIZEN SUIT 103,046,18 2975 BAN CHLORPYRIFOS 95,928.64 3773 NORTHWESTERN ENERGY RATE INCREASE 83,900.49 3392 ORCAS AND OIL TANKERS DON'T MIX 69,580.64 3867 OZONE B UMP-UPS 2019 55,268.75 2745 CORPS SHORELINE JURISDICTION 50,886.26 3164 CALIFORNIA ENERGY PLANNING 2016 40,197.50 3173 DC BACTERIA TMDLS 39,110.80 3775 FAIRBANKS PM2.5 NONATTAINMEN T SIP ROUND III 33,750.00 3635 CPUC RATE DESIGN WINDOW 26,984.77 3679 GULF DRILLING ESA DE LAY 25,908.59 2440 AEP NEW SOURCE REVIEW CONSENT DECREE 25,200.00 3837 ENTERGY NEW ORLEANS 2018 RATE CASE 24,456.47 3515 ELG ROLLBACK FOIA LITIGATION 24,170.28 3577 REVISED CCR RULE 21,500 00 3789 BLOOMINGTON WAREHOUSE 14,660.00 3243 UTAH REGIONAL HAZE DEFENSE 12,539.90 3296 AMERICAN PRAIRIE RESERVE LAND-USE DEFENSE 11,308.14 2147 WASHINGTON WATER QUALITY ST ANDARDS REVISION 9,932.00 3795 DREDGING FOIA CHALLENGE 8,527.00 4008 DTE ELECTRIC 2019 IRP 8,211.34 3455 ROSEMONT COPPER MINE CHALLENGE 7,525.15 3506 KAUA' I SEABIRD TAKE 5,700.00 3 968 RIVERVIEW ENERGY PERMIT APPEAL 5,000.00 3600 FEECA 2018 4,253.51 3874 TAYLOR OIL SPILL INTERVENTION 3,947.00 3818 CONSUMERS ENERGY 2018 INTEGRATED RESOURCE PLAN 3,945.58 2645 T RANSMOUNTAIN PIPELINE 3,535.08 2163 WYOMING REGIONAL HAZE SIP 3,150.00 4069 DTE ELECTRIC 2019 RATE CASE 2,140.94 3705 GULF OF MEXICO 2018 LEASE 8,486.17 3651 BLM SAGE GROUSE LEASING 1,844.54 3382 ACF WATER CASE 2,743.85 2162 GE SALMO

Return Reference	Explanation
FORM 990, PART III	TER FISHERY 719.81 3838 MINNESOTA LINE 3 696.42 2934 KRAFT PULP MILLS & YEAST MANUFACTURIN G AIR TOXICS RTRS 659.21 3441 TSCA FRAMEWORK RULES CHALLENGE 634.77 3990 NOAA META-FOIA 62 3.25 4101 APS 2019 RATE CASE 618.14 3102 RIVER OF NO RETURN WILDERNESS HELICOPTER INTRUSIO N 603.06 3621 ROCK CREEK MINE ESA CHALLENGE 566.35 3410 CHALLENGE TO POWER PLANT ELG STAY 555.78 3616 AIR TOXICS DEREGULATION 537.46 3682 DSW III 526.64 3841 WELL CONTROL RULE ROLL BACK 526.47 3659 HAWAII PBR 520.45 3847 CHALLENGE TO 2019 RFS RULE 516.66 4030 2019 CO OIL & GAS RULEMAKING 489.06 2314 COOS BAY DREDGING PERMIT 473.00 3557 EPA SCIENCE BOARD INTEG RITY 460.09 2561 DTE NSR DISTRICT COURT REMAND 446.91 1473 EVERGLADES 411.44 3738 I-70 EXP ANSION LITIGATION 399.38 3707 DANSKAMMER GAS PLANT 386.21 3619 ATLANTIC SEISMIC 382.15 304 1 WOPR JR. 350.48 3760 ISO-NE FUEL SECURITY 333.32 3950 WEPCO 2019 RATE CASE 329.50 2461 S HENANDOAH RIVER ALGAE 311.26 3743 DTE ELECTRIC 2018 RATE CASE 304.98 3406 NATIONAL ELK REF UGE II 290.94 3957 WEST COAST ANCHOVY CATCH LIMIT II 268.44 3799 CPUC BUG ENFORCEMENT 267. 11 3636 VIGNETO 404 PERMIT 258.20 3863 PORTLAND CRUDE AMICUS 253.34 3825 RTO/ISO ENERGY ST ORAGE RULES 250.00 3563 WEST ELK COAL LEASE II 219.25 3606 MECO RATE CASE 214.60 3966 PALM DALE AMICUS 213.17 3099 PAGAN - TINIAN MILITARY TRAINING 210.00 3845 PUGET SOUND NO DISCHA RGE ZONE DEFENSE 200.01 3808 NORTH KONA UNGULATE ESA TAKE 194.34 3871 DOE CEII RULE 193.00 3277 ESSROC CLARK COUNTY INTERVENTION 180.00 3545 DTE 2017 GAS PLANT CON 148.40 3666 INTE RIOR & BLM FOIA POLICIES LITIGATION 130.58 2491 SENECA LAKE LPG STORAGE 126.00 3929 SCHOOL NUTRITION AMICUS 108.17 2826 EMPOWER MARYLAND 104.30 3533 MILLENIUM 401 CERT DEFENSE 104. 00 3970 REVISED CCR RULE FOIA LAWSUIT 103.75 3511 GRAND STAIRCASE-ESCALANTE MONUMENT DEFENSE 102.35 3534 MONUMENTS FOIA LITIGATION 100.57 2776 MARYLAND AIR REGULATIONS 94.08 3729 H ECO GRID PLANNING 89.85 3672 O&R 2018 RATE CASE 88.99 3834 CON EDISON NY 2019 RATE CASE 79 .74 3718 SCIENCE DEFENSE FOIA CHALLENGE 75.09 395

Return Explanation
Reference

FORM 990, A FULL COPY OF FORM 990 IS POSTED ON A SECURE WEB PORTAL ACCESSIBLE BY THE TRUSTEES PRIOR TO FILING. THE TRUSTEES ARE NOTIFIED OF THE FORM 990 POSTING AND ENCOURAGED TO REVIEW AND COMMENT SECTION B, ON IT PRIOR TO FILING.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY REQUIRES AN ANNUAL DISCLOSURE BY TRUSTEES AND SENIOR STAFF OF ENTITIES IN WHICH THEY HAVE PERSONAL, FINANCIAL OR PROFESSIONAL INTERESTS. THE RESULTS OF THOSE DISCLOSURES ARE COMPILED INTO A SCREENING LIST OF ENTITIES USED BY THE BOARD CHAIR, CHIEF EXECUTIVE OFFICER AND GENERAL COUNSEL WHEN REVIEWING POTENTIAL TRANSACTIONS WITH EARTHJUSTICE AND OUTSIDE ENTITIES. THE SCREENING LIST IS USED AS A CONFLICT CHECK TO ASSURE THAT INDIVIDUAL DECISION-MAKERS RECUSE THEMSELVES FROM ANY PARTICIPATION IN DECISIONS AFFECTING THE ENTITIES IN WHICH THEY HAVE INTERESTS.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	WE GET MARKET DATA FROM A COMPENSATION CONSULTING FIRM FOR ALL STAFF SALARIES, INCLUDING OUR CEO. IN ADDITION, OUR VICE PRESIDENT OF HUMAN RESOURCES COLLECTS SALARIES OF CEOS FROM OTHER NATIONAL NON-PROFIT ENVIRONMENTAL ORGANIZATIONS TO MAKE AN INFORMED RECOMMENDATION TO THE BOARD OF DIRECTORS. THE RECOMMENDATION AND MARKET INFORMATION IS PASSED ALONG TO THE EXECUTIVE COMMITTEE OF OUR BOARD OF DIRECTORS WHICH REVIEWS THE DATA AND MAKES AN APPROPRIATE FINAL RECOMMENDATION FOR OUR CEO SALARY. THE FULL BOARD VOTES ON THE CEO SALARY APPROVAL. WE DO A BIANNUAL REVIEW OF ALL POSITIONS IN THE ORGANIZATION INCLUDING THE CEO AND ALL STAFF. WE UPDATE ALL POSITION DESCRIPTIONS AND USE AN OUTSIDE COMPENSATION CONSULTING FIRM TO DETERMINE SALARIES THAT MATCH THE JOB RESPONSIBILITIES IN THE NON-PROFIT SECTOR IN THE SPECIFIC GEOGRAPHIC AREAS IN WHICH OUR JOBS ARE LOCATED. OUR VICE PRESIDENT OF HUMAN RESOURCES THEN WORKS WITH MANAGERS, BASED ON PERFORMANCE TO DETERMINE WHAT THE APPROPRIATE SALARY SHOULD BE WITHIN THIS RANGE. SINCE THIS PROCESS IS QUITE TIME INTENSIVE, WE DO THIS EVERY OTHER YEAR. IN THE YEAR WE DON'T GO THROUGH THIS PROCESS, WE GET COMPETITIVE NATIONAL JOB MARKET DATA TO DETERMINE A PERCENTAGE INCREASE TO ALL SALARY SCALES AND USE THIS AS A GUIDELINE FOR OUR BUDGETING PROCESS. IN ADDITION, WE CONDUCT AN EQUITY REVIEW FOR ALL SALARY ADJUSTMENTS TO ENSURE THAT WE ARE IN COMPLIANCE WITH THE CALIFORNIA FAIR PAY ACT AND THAT WE ARE COMPENSATING ALL STAFF FAIRLY. OUR ATTORNEYS' PAY IS BASED ON THE YEAR OF GRADUATION FROM LAW SCHOOL, TO WHICH WE ADD A GEOGRAPHIC ADJUSTMENT BASED ON THE OFFICE LOCATION, E.G. BOZEMAN, MONTANA VS. NEW YORK, NY. WE CONTACT OTHER CONSERVATION ORGANIZATIONS LIKE THE SIERRA CLUB AND ALSO GOVERNMENT ENTITIES LIKE THE DEPARTMENT OF JUSTICE TO DETERMINE THE APPROPRIATE PAY FOR OUR ATTORNEYS.

990 Schedule O, Supplemental Information

Return

Reference

FORM 990,	THE AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE. IN ADDITION, THE
PART VI,	AUDITED FINANCIAL STATEMENTS, THE GOVERNING/ORGANIZING DOCUMENTS, AND THE CONFLICT OF INTEREST
SECTION C,	POLICY ARE MADE AVAILABLE TO THE PUBLIC BY EMAIL REQUEST: EAJUS@EARTHJUSTICE.ORG.
LINE 19	-

Explanation

Return Explanation Reference

FORM 990. CHANGE IN VALUE OF SPLIT-INTEREST GIFT AGREEMENTS 88.252.

PART XI. LINE 9:

990 Schedule O, Supplemental Information

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R**

Related Organizations and Unrelated Partnerships

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

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

OMB No. 1545-0047

DLN: 93493089013441

Open to Public Inspection

Employer identification number

Internal Revenue Serv
Name of the orga
EARTHILISTICE

(Form 990)

Department of the Treasury nization

EARTHJOSTICE							94-1	730465				
Part I Identification of Disregarded Entities. Complete	e if the organ	ization answ	ered "Yes	s" on Forr	n 990, Part	IV, line	33.					
(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary act	tivity	Legal don or foreig	c) nicile (state n country)	(d Total in	l) ncome	(e) End-of-year	r assets	(f) Direct cor enti		
Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year		te if the orga	anization	answered	d "Yes" on F	Form 99	0, Part I	V, line 34	because	e it had one or	more	
(a) Name, address, and EIN of related organization	(I Primary	b) activity	Legal dom or foreigr	c) icile (state i country)	(d) Exempt Code	section	Public cha (if section	e) arity status 501(c)(3))	Dir	(f) ect controlling entity	Section (13) co ent	512(b) ntrolled ty?
(1)WASHINGTON FOREST LAW CENTER 615 SECOND STREET SUITE 360	PUBLIC INTER	EST LAW FIRM	V	/A	501(C)(3)		11-I		EARTHJU:	STICE	Yes	No
SEATTLE, WA 98104 91-1803140												
(2)EARTHJUSTICE ACTION 500 NEW JERSEY AVENUE NW NO 700	GRASSROOTS	LOBBYING	С	OC .	501(C)(4)				EARTHJU:	STICE	Yes	
WASHINGTON, DC 200012066 82-1981944												
For Paperwork Reduction Act Notice, see the Instructions for Forn	n 990.		Ca	t. No. 5013	35Y				Sch	edule R (Form	990) 20	19

	(a) Name, address, and EIN of related organization		(b) Primary activity (c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominan income(relate unrelated, excluded fro tax under sections 512 514)	ed, total incom m		(h) Disproprtionat allocations?		(i) Code V-UBI amount in boo 20 of Schedule K-1 (Form 1065)	Gene mana	i) ral or aging ner?	(Percel owne	ntage
					,			Yes	No		Yes	No		
			1 1											
Part IV Identification of Related Org because it had one or more rela							swered "Ye	s" on F	orm 9	990, Part IV	, line	34		
(a) Name, address, and EIN of related organization	(b) Primary activity	dı (state	(c) Legal omicile or foreign ountry)	Direc	(d) t controlling entity (C	(e) Type of entity Corp, S corp, or trust)	(f) Share of total income		(g) e of end- year assets	-of- Perce	h) ntage ership	(1	(i) ection ! 13) con entit	512(b) itrolled ty?
(1)CHARITABLE REMAINDER TRUST (5)	CHARITABLE REMAINDER		CA	N/A									Yes	No No
50 CALIFORNIA STREET SUITE 500 SAN FRANCISCO, CA 94111	TRUST													
(2)POOLED INCOME FUND (5)	POOLED INCOME FUND		CA	N/A										No
50 CALIFORNIA STREET SUITE 500 SAN FRANCISCO, CA 94111														
		I						1		ı				

Schedule R (Form 990) 2019				F	Page 3
Part V Transactions With Related Organizations. Complete if the organization answered "	'Yes" on Form 990, Pa	rt IV, line 34, 35l	o, or 36.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Ye	s No
1 During the tax year, did the organization engage in any of the following transactions with one or more relative	ed organizations listed in	Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a	No
f b Gift, grant, or capital contribution to related organization(s)				1b Yes	5
${f c}$ Gift, grant, or capital contribution from related organization(s)				1c	No
d Loans or loan guarantees to or for related organization(s)				1d	No
e Loans or loan guarantees by related organization(s)				1e	No
f Dividends from related organization(s)				1 f	No
g Sale of assets to related organization(s)				1g	No
h Purchase of assets from related organization(s)				1h	No
i Exchange of assets with related organization(s)				1i	No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1 j	No
k Lease of facilities, equipment, or other assets from related organization(s)				1k	No
I Performance of services or membership or fundraising solicitations for related $\operatorname{organization}(s)$				1l Yes	5
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m	No
f n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	No
o Sharing of paid employees with related organization(s)				1o Yes	5
p Reimbursement paid to related organization(s) for expenses				1p	No
q Reimbursement paid by related organization(s) for expenses				1q	No
r Other transfer of cash or property to related organization(s)				1r	No
${f s}$ Other transfer of cash or property from related organization(s)				1s	No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this	line, including covered r	elationships and tra	nsaction thresholds.		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining a	mount involv	ed
(1)EARTHJUSTICE ACTION	В	130,000	COST		
	1	1	ı		

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	Ar	(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	te	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General (managin partner	or g ?	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
	1		1							Schedul	e R (Forn	199	0) 2019

Schedule R (Form 990) 2019									
Part VII	Supplemental Info	Supplemental Information							
	Provide additional information for responses to questions on Schedule R. (see instructions).								
Return Reference		Explanation							