# **Return of Organization Exempt From Income Tax**

Department of the Treasury Internal Revenue Service

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.

Inspection

OMB No. 1545-0047

A I	or th	ie 2022 cal	endar year, or tax year beginning	and	ending						
R a	Shook if a	applicable:	C Name of organization WASHING	TON LAWYERS' COMMITTEE	FOR CI	IVIL		D Em	ployer	r identification n	umber
	)	арріісавіе.	RIGHTS AND URBAN AFFA	AIRS, INC.							
	Addres	ss change	Doing business as					52-	-178	34938	
	Name	change	Number and street (or P.O. box if ma	ail is not delivered to street address)	F	Room/su	ite	E Tele	phon•	e number	
	Initial	return	700 14TH STREET NW,	100				(20	)2):	319-1000	
	Final r	eturn/terminated	City or town, state or province, cour	try, and ZIP or foreign postal code				<b>G</b> Gro	ss rec	ceipts \$	
	Ameno	ded return	WASHINGTON, DC 20005							3,737,7	10.
	Applica	ation pending	F Name and address of principal office	r: JOANNE LIN			H(a) Is this	s a group dinates?	return fo	or Yes	X No
			700 14TH STREET, NW,	STE #400, WASHINGTON,	DC 200	05	H(b) Are a		nates in	icluded? Yes	No
ı	Tax-ex	xempt status:	X 501(c)(3) 501(c) (	) (insert no.) 4947(a)(1) o	or 52	27	lf .	"No," att	ach a l	list. See instructions.	
J	Webs	ite: WV	WW.WASHLAW.ORG				H(c) Grou	p exemp	otion nu	umber	
K	Form	of organization	on: X Corporation Trust	Association Other	L Year	of format	ion: 199	2 <b>M</b> s	State	of legal domicile:	DC
Р	art I	Summ	nary	<u> </u>	'						
	1	Briefly des	scribe the organization's mission o	r most significant activities: TO PR	OTECT,	THRO	UGH LI	TIGA	 YITA	ON AND LEG	GAL
ø		•	· ·	LIGHTS OF PERSONS WHO H							
Governance			SUBJECT TO DISCRIMINAT								
ern	2	Check this		discontinued its operations or dis	posed of	more t	han 25%	of i	ts n	et assets.	
9	3			body (Part VI, line 1a)				1	3		68
	4			he governing body (Part VI, line 1b)					4		68
ties	5			endar year 2022 (Part V, line 2a)					5		35
Activities &	6			sary)					6		445
Aci				III, column (C), line 12					7a		
				Form 990-T, Part I, line 11					7b		
		THOU UTILION	ated business taxable mosme from	onn ood i, i dit i, inio i i		Τ	Prior Y			Current Y	ear
	8	Contribution	ons and grants (Part VIII, line 1h)				5,66		1	3,170	
Revenue	9		service revenue (Part VIII, line 2g)	1,48		_		,212.			
Ş.	10			es 3, 4, and 7d)				4,37			,262.
å	11			6d, 8c, 9c, 10c, and 11e)				8,25	_		,717.
	12		, , ,	equal Part VIII, column (A), line 12)			7,09			3,611	
	13			umn (A), lines 1-3)							
	14							4,00		9	, 454.
	4.5			mn (A), line 4)			2 07		ONE	2 212	NONE
Expenses	15		other compensation, employee bene	2,97			3,313				
oe u	Ioa			(A), line 11e)				INC	ONE		NONE
Ä	470		Iraising expenses (Part IX, column (I	· · · · · · · · · · · · · · · · · · ·			1 10	0 40	1	1 220	7.60
	17			a-11d, 11f-24e)			1,19		_	1,228	
	18			Part IX, column (A), line 25)			4,17		_	4,551	
- S	19	Revenue	less expenses. Subtract line 18 from	n line 12			2,91			End of Yea	<u>,791.</u>
Net Assets or Fund Balances	20	T-4-1	to (Don't V. line 40)			Degin			-+		
SSE	20		ets (Part X, line 16)			'	6,93			9,068	
a d	21		lities (Part X, line 26)			·	1,87			4,940	
			s or fund balances. Subtract line 21	from line 20			5,06	7,10	3.	4,127	<u>,312.</u>
	art II		ture Block	is return, including accompanying schedu	loo and atata	monto	and to the	hoot of	mu le	rowlodge and b	oliof it is
tru	e, corre	ect, and com	plete. Declaration of preparer (other than	n officer) is based on all information of whice	ch preparer h	as any ki	nowledge.	nest of	IIIy K	.nowledge and bi	ellel, It is
								11/1	- /c	2002	
Sig	ın	Signature of	of officer				Dat	11/1	_5/2	1023	
He								.0			
	-	JOANNE	L LIN nt name and title	EXECUT	IVE DIR	RECTO.	R				
		ļ , , , , , , , , , , , , , , , , , , ,		Proporar's signature	Data			_		OTINI	
Paid	d	1	e preparer's name	Preparer's signature	Date		Chec		".	PTIN	
	parer	BRIAN	W DOW, CPA				self-e	employe	1	P00367740	
	Only	Firm's nam		<u> </u>			Firm's EIN	١		2-0961657	
		Firm's add		E, SUITE 501 NORTH BETHESDA, MD 2	20852-2794		Phone no		3(	01-770-550	00
$\overline{}$									<u> </u>	. X Yes	<u>No</u>
For	Pane	erwork Red	uction Act Notice, see the separat	e instructions.						Form <b>99</b> 0	J (2022)

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F		nt of Program Service Schedule O contains	a response or note to any line in this Pa	urt III	
1	Briefly describe th	e organization's missi			
	SEE SCHEDULE	0			
2			nificant program services during the y		Yes X No
_	If "Yes," describe to	these new services on	Schedule O.		
3	services?		ng, or make significant changes inedule O		Yes X No
4	Describe the org expenses. Section	anization's program s n 501(c)(3) and 501(	service accomplishments for each of c)(4) organizations are required to refor each program service reported.		
4a	(Code:	) (Expenses \$	3,305,421. including grants of \$	) (Revenue \$	)
	SEE SCHEDULE	0			
	_				
4b	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)
	_				
4c	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)
4d		ervices (Describe on So			
4 -		including grvice expenses		ue \$ )	
46	Total program se	ivice expenses	3,305,441.		

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Part IV Checklist of Required Schedules

aı	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	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			37
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	4	v	
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	X	
J	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			21
Ū	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I.	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9	X	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
_	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	110	v	
h	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more	11a	X	
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
c	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more	115		21
Ŭ	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII.	12a	X	
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	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
a	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	. 75		21
. •	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	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		X

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Form 990 (2022)

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Form 990 (2022)
Part IV Chocklist of Poquired Schodules (continued)

Part	Checklist of Required Schedules (continued)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		21
		240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	l		
	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		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>	26		v
0.7		20		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a	Х	
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
·	"Yes," complete Schedule L, Part IV	28c		Х
20				
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	334		21
D	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
00		330		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? <b>Note</b> : All Form 990 filers are required to complete Schedule O	38	X	
Part				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u> .		
		_	Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
C		10	v	
	reportable gaming (gambling) winnings to prize winners?	1c	Х	

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1 011111	330 (2022)			age <b>C</b>
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 35			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	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.	9a		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9b		
10	Section 501(c)(7) organizations. Enter:	0.5		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	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		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?  If "Yes " complete Form 6069	17		

52-1784938 Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Sect	ion A. Governing Body and Management					21
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	68			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	68			
2	Did any officer, director, trustee, or key employee have a family relationship or a business re	lations	ship with			
	any other officer, director, trustee, or key employee?		-	2		X
3	Did the organization delegate control over management duties customarily performed by or ur	nder t	he direct			
	supervision of officers, directors, trustees, or key employees to a management company or other			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fi	led?.		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's	assets	?	5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to el	ect o	r appoint			
	one or more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval	by) r	nembers,	l		
	stockholders, or persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions und	ertake	n during			
	the year by the following:					
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		Х
Secti	ion B. Policies (This Section B requests information about policies not required by the Inte	ernal	Revenue	Code		NI -
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of		-	406		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt pro-	•		10b 11a	- V	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fi	ling th	e form? .	IIa	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			12a	X	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			124		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests			12b	Х	
_	rise to conflicts?			120	21	
С	describe on Schedule O how this was done	•		12c	Х	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written whisteblower policy?			14	X	
15	Did the process for determining compensation of the following persons include a review ar					
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation		•			
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b	Х	
-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar	r arra	ingement			
	with a taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization	to ev	aluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?			16b		
Secti	ion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable),		and 990-1	(sec	tion 5	01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that ap  Own website X Another's website X Upon request Other (explain on Sc	ply.				. ,
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents	nents,	conflict o	f inter	est p	olicy,
	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 I	oooks	and record	s		

202-319-1000

2E1042 1.000

8637LA C021 V22-7.4F 88042 11

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . . Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the o	rganization nor any related o	rganization compensated an	y current officer, director, or trustee.

(A)	(B)			Pos	C) sition			(D)	(E)	(F)
Name and title	Average	,				than c		Reportable	Reportable	Estimated amount
	hours per week					is both or/trust		compensation from the	compensation from related	of other compensation
	(list any		_				· ·	organization (W-2/	organizations (W-2/	from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
(1) JONATHAN SMITH	40.00									
EXECUTIVE DIRECTOR	NONE			Х				182,325.	NONE	44,810.
(2) JACQUELINE KUTNIK-BAUDER	40.00							,		•
DEPUTY LEGAL DIRECTOR	NONE					X		149,502.	NONE	40,699.
(3) KAITLIN BANNER	40.00									
DEPUTY LEGAL DIRECTOR	NONE					Х		154,299.	NONE	31,342.
(4) GREGG A. KELLEY	40.00									
DIRECTOR, DEV. & COMM.	NONE					Х		156,515.	NONE	23,478.
(5) KENT T. WITHYCOMBE	40.00									
DIRECTOR, PUBLIC EDUCATION	NONE					Х		108,130.	NONE	39,113.
(6) JOANNA KAROLINA WASIK	40.00									
SUPERVISING COUNSEL	NONE					Х		109,265.	NONE	25,919.
(7) ROCHELLE D. JONES	40.00									
CHIEF FINANCIAL OFFICER	NONE			Х				113,030.	NONE	21,454.
(8) JOHN A. FREEDMAN	1.00									
EXECUTIVE COMMITTEE MEMBER	NONE	Х						NONE	NONE	NONE
(9) JENNIFER G. LEVY	1.00									
EXECUTIVE COMMITTEE MEMBER	NONE	X						NONE	NONE	NONE
(10) KEVIN H. METZ	1.00									
IMMEDIATE PAST CO-CHAIR	NONE	X						NONE	NONE	NONE
(11) GEORGE D. RUTTINGER	1.00									
EXECUTIVE COMMITTEE MEMBER	NONE	X						NONE	NONE	NONE
(12) THOMAS G. ALLEN	1.00									
DIRECTOR	NONE	X						NONE	NONE	NONE
(13) DOUGLAS W. BARUCH	1.00									
DIRECTOR	NONE	X						NONE	NONE	NONE
(14) L. SCOTT BURWELL	1.00									
DIRECTOR	NONE	X						NONE	NONE	NONE

Form **990** (2022)

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Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	nplo	yee	es,	and F	ligl	hest Compensat	ed Employees (co	ontinued)
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours per	,				e than o		compensation	compensation from	amount of
	week (list any hours for	1				is both or/trust		from	related	other compensation
	related			_			_	the organization	organizations (W-2/1099-MISC)	from the
	organizations	Individual trustee or director	stitu	Officer	Key employee	ghe	Forme	(W-2/1099-MISC)	(** 2/1000 1/1100)	organization
	below dotted	dual	tion	-	힏	st co	=			and related
	line)	L tri	a t		уе	duc				organizations
		stee	Institutional trustee		"	ens				
			ď			Highest compensated employee				
( 15) G. BRIAN BUSEY	1.00									
DIRECTOR	NONE	Х						NONE	NONE	NONE
( 16) JOSEPH G. DAVIS	1.00									
EXECUTIVE COMMITTEE MEMBER	NONE	Х						NONE	NONE	NONE
( 17) JOHN M. DEVANEY	1.00									
DIRECTOR	NONE	X						NONE	NONE	NONE
( 18) DAVID H. DICKIESON	1.00									
DIRECTOR	NONE	X						NONE	NONE	NONE
( 19) DAVID L. DOUGLASS	1.00							110112	110112	110111
DIRECTOR	NONE	X						NONE	NONE	NONE
( 20) ROBERT B. DUNCAN	1.00	21						NONE	NONE	IVOIVE
DIRECTOR	NONE	X						NONE	NONE	NONE
( 21) SHANKAR DURAISWAMY	1.00							NOINE	NONE	NONE
	+							NONE	NONTE	NONE
DIRECTOR (THROUGH 5/2022)	NONE	X						NONE	NONE	NONE
( 22) JOSEPH D. EDMONDSON	1.00	.,						310310	NONE	NONE
DIRECTOR	NONE	X						NONE	NONE	NONE
( 23) JULIE FERNANDES	1.00								170177	17017
DIRECTOR	NONE	X						NONE	NONE	NONE
( 24) J. DAVID FOLDS	1.00									
DIRECTOR	NONE	X						NONE	NONE	NONE
( 25) DANIELLE R. FOLEY	1.00									
DIRECTOR	NONE	X						NONE	NONE	NONE
1b Sub-total								973,066.	NONE	226,815.
c Total from continuation sheets to Part VII, S	ection A							NONE	NONE	NONE
d Total (add lines 1b and 1c)							<u> </u>	973,066.	NONE	226,815.
2 Total number of individuals (including but not		hose	liste	d al	bove	,	o re	ceived more than	\$100,000 of	
reportable compensation from the organization	n ▶					7				
										Yes No
3 Did the organization list any former office										
employee on line 1a? If "Yes," complete Sched	ule J for su	ch ind	livid	ual						3
4 For any individual listed on line 1a, is the	sum of rer	oortab	ole d	com	per	sation	n ai	nd other compens	sation from the	
organization and related organizations gro	eater than	\$15	0,0	00?	lf.	"Yes	5,"	complete Schedu	le J for such	
individual										4
5 Did any person listed on line 1a receive or	accrue co	mpen	sati	on f	fron	n anv	un	related organization	on or individual	
for services rendered to the organization? If "Y	es," comple	te Sch	ned:	ıle J	l for	such	per	son	<u></u>	5
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.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VII Section A. Officers, Directo		y En	ıpıc			and F	ııg	1				
(A)	(B)				C)			(D)	(E)		(F)	
Name and title	Average hours per week (list any hours for related	box,	unle:	heck ss pe	erson	e than o is both or/trust	an ee)	Reportable compensation from the	Reportable compensation from related organizations (W-2/1099-MISC)	am c comp	timated ount of other oensation om the	
	organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-WISC)	orga and	nizatio related nization	I
26) JAMIE S. GARDNER	1.00											
CO-CHAIR	NONE	X		Х				NONE	NONE			NON
27) EMILY P. GRIM	1.00_	-										
DIRECTOR	NONE	X						NONE	NONE			NON
28) MARK P. GUERRERA	1.00	-										
DIRECTOR	NONE	X						NONE	NONE		]	NON
29) PAUL M. HAMBURGER	1.00											
TREASURER	NONE	X		Х				NONE	NONE			NON
30) STEPHEN J. HARBURG	1.00											
DIRECTOR	NONE	X						NONE	NONE			NON
31) MAUREEN D. HARDWICK	1.00							17017	1			
DIRECTOR	NONE	X						NONE	NONE			NON
32) JOHN E. HEINTZ	1.00							17017	1			
DIRECTOR	NONE	X						NONE	NONE			NON
33) MATTHEW S. HELLMAN	<u>1.00</u>	1,,						NONE	NONT			
DIRECTOR	NONE	X						NONE	NONE			NON
34) THOMAS G. HENTOFF	<u>1.00</u>	1,,						NONE	NONT			
DIRECTOR	NONE	X						NONE	NONE			NON
35) HOWARD S. HOGAN	1.00											
DIRECTOR	NONE	X						NONE	NONE			NON
36) STEVEN P. HOLLMAN	1.00											
DIRECTOR	NONE	X						NONE	NONE		]	NON
1b Sub-total												
c Total from continuation sheets to Part												
d Total (add lines 1b and 1c)				• •	<u> </u>		_		<b>1</b>			
Total number of individuals (including b reportable compensation from the organization)		nose	liste	ed a	DOV	e) wnd	re	eceived more than	\$100,000 of			
											Yes	No
3 Did the organization list any forme employee on line 1a? If "Yes," complete										3		
4 For any individual listed on line 1a, is	s the sum of rep	ortab	ole d	com	per	satior	n ai	nd other compens	sation from the			
organization and related organizatio	ns greater than	\$15	50,0	00?	! It	"Yes	,"	complete Schedu	le J for such			
individual										4		
5 Did any person listed on line 1a rece												
for services rendered to the organization	n? If "Yes," comple	te Scl	hedu	ıle .	J for	such	per	rson		5		
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.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	nplo	oye	es,	and I	Hig	hest Compensat	ed Employees (d	continued)	)		
(A)	(B)			(	C)			(D)	(E)				
Name and title	Average	(do r	not c		sition	e than c	nna	Reportable	Reportable	Estim			
	hours per week (list any					is both		compensation from	compensation from related	amou oth			
	hours for	office	T			tor/trust		the	organizations	compe			
	related organizations	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization	(W-2/1099-MISC)	from organi			
	below dotted	idua	utio	еŗ	mpl	est c	er	(W-2/1099-MISC)		and re			
	line)	or frug	nal ti		oyee	ömp				organiz	zations		
		stee	nste			ens							
			ď			ated							
37) ROSCOE C. HOWARD	1.00												
DIRECTOR	NONE	Х						NONE	NONE		NON		
38) THEODORE A. HOWARD	1.00												
DIRECTOR	NONE	X						NONE	NONE		NON		
( 39) SUSAN E. HUHTA	1.00												
DIRECTOR	NONE	X						NONE	NONE		NON		
( 40) CHARLES W. JOHNSON	1.00												
DIRECTOR	NONE	X		-				NONE	NONE		NON		
(41) JULIA M. JORDAN	1.00	.,						NONE	NONE		37037		
DIRECTOR 42) CAITLIN M. KASMAR	NONE	X						NONE	NONE		NON		
DIRECTOR	1.00 NONE	X						NONE	NONE		NTON		
43) GEORGE KOSTOLAMPROS	1.00	Λ						NOINE	NOINE		NON		
DIRECTOR	NONE	X						NONE	NONE		NON		
(44) ALEX C. LAKATOS	1.00	21						110111	110111		11011		
DIRECTOR	NONE	Х						NONE	NONE		NON		
45) STAVROULA E. LAMBRAKOPOULOS	1.00								_				
EXECUTIVE COMMITTEE MEMBER	NONE	Х						NONE	NONE		NON		
46) HARRY LEE	1.00												
DIRECTOR	NONE	Х						NONE	NONE		NON		
( 47) JOSHUA A. LEVY	1.00												
DIRECTOR	NONE	X						NONE	NONE		NON		
c Total from continuation sheets to Part VII, S	-		-				<b>&gt;</b>						
d Total (add lines 1b and 1c)									Φ400 000 ef				
2 Total number of individuals (including but not reportable compensation from the organization		nose	liste	ed a	vod	e) wn	o re	eceived more than	\$100,000 of				
Toportable compensation from the organization	,,,, <u>, , , , , , , , , , , , , , , , ,</u>									v	es No		
3 Did the organization list any former office	cor directo	or or	tri	ueto		kov o	mn	Novoo or highes	t componented	•	63 140		
employee on line 1a? If "Yes," complete Sched										3			
4 For any individual listed on line 1a, is the													
organization and related organizations gr													
individual										4			
5 Did any person listed on line 1a receive or													
for services rendered to the organization? If "Y										5			
Section B. Independent Contractors													
1 Complete this table for your five highest con	npensated i	ndepe	ende	ent	con	tracto	rs t	hat received more	than \$100,000 c	of			

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.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y Em	plo	ye	es,	and I	lig	hest Compensat	ed Employees (c	ontinu	ed)	
(A)	(B)			((	C)			(D)	(E)		(F)	
Name and title	Average hours per week (list any hours for	box,	unle	heck ss pe	erson	e than o is both or/trust	an	Reportable compensation from the	Reportable compensation from related organizations	ar	stimated mount of other npensati	of
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	org an	rom the ganization of related anization	on d
( 48) ELIZABETH B. MCCALLUM	1.00											
DIRECTOR	NONE	X						NONE	NONE			NONE
( 49) PATRICK MCGLONE	1.00											
DIRECTOR	NONE	X						NONE	NONE			NONE
( 50) OMAR V. MELEHY	1.00											
DIRECTOR	NONE	X						NONE	NONE			NONE
( 51) WILLIAM B. NES	1.00											
DIRECTOR	NONE	X						NONE	NONE			NONE
( 52) LEE G. PETRO	1.00											
DIRECTOR	NONE	X						NONE	NONE			NONE
( 53) BARRY J. POLLACK	1.00											
DIRECTOR	NONE	X						NONE	NONE			NONE
( 54) JOHN P. RELMAN	1.00											
DIRECTOR	NONE	X						NONE	NONE			NONE
( 55) BRIAN D. SCHNEIDER	1.00											
DIRECTOR	NONE	X						NONE	NONE			NONE
( 56) JOSEPH M. SELLERS	1.00											
DIRECTOR	NONE	X						NONE	NONE			NONE
( 57) MATTHEW D. SLATER	1.00											
DIRECTOR	NONE	X						NONE	NONE			NONE
( 58) RICHARD W. SNOWDON III	1.00											
DIRECTOR	NONE	X						NONE	NONE			NONE
to Sub-total c Total from continuation sheets to Part VII, Sed Total (add lines 1b and 1c)  Total number of individuals (including but not reportable compensation from the organization	limited to t						> re	eceived more than	\$100,000 of			
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu										3	Yes	No
<b>4</b> For any individual listed on line 1a, is the sorganization and related organizations graindividual.	eater than	\$15	0,0	00?	) If	"Yes	5,"	complete Schedu	le J for such	4		
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye Section B. Independent Contractors										5		

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.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	plo	ye	es,	and F	lig	hest Compensat	ed Employees (d	ontinued)			
(A)	(B)			((	C)			(D)	(D) (E)				
Name and title	Average				sition			Reportable	Reportable	Estimated			
	hours per	,				e than o is both		compensation	compensation from	amount of other			
	week (list any hours for	office				tor/trust		from the	related organizations	compensation			
	related	Individual trustee or director	Ins	Qf	<u>6</u>	Hig	For	organization	(W-2/1099-MISC)	from the			
	organizations	vid	titut	Officer	/ em	hes	Former	(W-2/1099-MISC)	,	organization			
	below dotted line)	ual t	ione		Key employee	t co				and related organizations			
	,	rust	2		/ee	npe							
		ее	Institutional trustee			Highest compensated employee							
						ted							
( 59) WILLIAM W. TAYLOR III	1.00	_											
EXECUTIVE COMMITTEE MEMBER	NONE	X						NONE	NONE	NONI			
( 60) LEWIS S. WIENER	1.00												
DIRECTOR	NONE	X						NONE	NONE	NONE			
( 61) CLAUDIA WITHERS	1.00												
CO-CHAIR	NONE	X		Х				NONE	NONE	NON			
( 62) WILLIAM P. BARRY	1.00												
DIRECTOR	NONE	X						NONE	NONE	NON			
( 63) KELSI CORKRAN	1.00												
DIRECTOR	NONE	X						NONE	NONE	NONE			
( 64) W. NEIL EGGLESTON	1.00												
DIRECTOR	NONE	X						NONE	NONE	NONE			
( 65) JONATHAN W. HARAY	1.00												
DIRECTOR	NONE	X						NONE	NONE	NONE			
( 66) MATTHEW W. HOWARD	1.00												
DIRECTOR	NONE	X						NONE	NONE	NONE			
( 67) BETH WILKINSON	1.00												
DIRECTOR	NONE	X						NONE	NONE	NONE			
( 68) ALEXIS COLLINS	1.00												
DIRECTOR	NONE	X						NONE	NONE	NONE			
( 69) BRENDA E. LEE	1.00												
DIRECTOR	NONE	X						NONE	NONE	NON			
1b Sub-total							$\blacktriangleright$						
c Total from continuation sheets to Part VII, S	_						$\blacktriangleright$						
d Total (add lines 1b and 1c)							<u> </u>						
2 Total number of individuals (including but not		hose	liste	d a	bov	e) who	o re	eceived more than	\$100,000 of				
reportable compensation from the organizatio	n ▶												
										Yes No			
3 Did the organization list any former office													
employee on line 1a? If "Yes," complete Sched	ule J for su	ch ina	IVIC	uai	• •					3			
4 For any individual listed on line 1a, is the													
organization and related organizations gr													
individual										4			
5 Did any person listed on line 1a receive or										-			
for services rendered to the organization? If "Yes," complete Schedule J for such person										5			

#### 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.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

_	orm 990 (2022)	. 16									Page 8
L	Part VII Section A. Officers, Directors, Tr		y⊵n	npio			and F	ligi			·
	(A)	(B)				C)			(D)	(E)	<b>(F)</b>
	Name and title	Average hours per	(do i	not ch		ition more	e than o	ne	Reportable compensation	Reportable compensation from	Estimated amount of
		week (list any	box,	unles	ss pe	rson	is both	an	from	related	other
		hours for			dad		or/truste		the	organizations	compensation
		related organizations	ndiv di	nsti	Offic	(ey	mp digh	Forme	organization	(W-2/1099-MISC)	from the organization
		below dotted	idua	Institutional	er	mp	Highest cc employee	ē	(W-2/1099-MISC)		and related
		line)	Individual trustee or director	nal 1		Key employee	om				organizations
			stee	trustee		Ф	) Dens				
				ее			compensated				
-	70) DAVID J. LEVISS	1.00									
_	DIRECTOR	NONE	X						NONE	NONE	NONE
_	71) GEORGE B. BREEN	1.00								2,02,1	
_	DIRECTOR	NONE	Х						NONE	NONE	NONE
_	72) JEANNIE S. RHEE	1.00								3,03,1	
_	DIRECTOR	NONE	X						NONE	NONE	NONE
	73) JOHN C. KEENEY, JR	1.00								3,03,1	
_	 DIRECTOR	NONE	X						NONE	NONE	NONE
-	74) DANIEL A. TISHMAN	1.00									
I	DIRECTOR (FROM 9/2022)	NONE	Х						NONE	NONE	NONE
-	75) JUDITH WINSTON	1.00									
I	DIRECTOR (FROM 9/2022)	NONE	X						NONE	NONE	NONE
-	76) AVIS E. BUCHANAN	1.00									
_I	DIRECTOR (FROM 9/2022)	NONE	Х						NONE	NONE	NONE
_			-								
_											
_											
-											
_		+									
•	Ib Sub-total							ightharpoons			
	c Total from continuation sheets to Part VII, S	Section A									
_	d Total (add lines 1b and 1c)							<u> </u>			
2	2 Total number of individuals (including but not reportable compensation from the organization		hose	liste	d al	bov	e) who	re	eceived more than	\$100,000 of	
_	reportable compensation from the organization										Yes No
	B Did the organization list any former office	oor dirocto	or or	· tri	ıcto	^	kov o	mn	lovos or highes	t componented	Tes No
•	3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched										3 X
											71
-	4 For any individual listed on line 1a, is the organization and related organizations gr										
	individual										4 X
į	5 Did any person listed on line 1a receive or	accrue co	mpen	sati	on f	fron	n any	un	related organizati	on or individual	
-	for services rendered to the organization? If "Y Section B. Independent Contractors	res," comple	te Sci	nedu	iie J	tor	such	per	son		5 X
_	I Complete this table for your five highest con	nnaneatad i	nden	anda	nt f	con	tracto	re t	hat received more	than \$100 000 a	f
	compensation from the organization. Report of year.										

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► NONE NONE

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#### Part VIII Statement of Revenue

		Check if Schedule O contains a respo	nse or note to an	y line in this Part V	/III		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts,	1a	Federated campaigns 1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues 1b					
פֿפֿ	С	Fundraising events 1c	1,038,400.				
fts,	d	Related organizations 1d					
اغَنِق	е	Government grants (contributions) 1e	1,013,250.				
Sin's	f	All other contributions, gifts, grants,					
e ë		and similar amounts not included above . 1f	1,118,586.				
호된	g	Noncash contributions included in					
E D		lines 1a-1f 1g	\$				
ပ္က ၕ ∣	h	Total. Add lines 1a-1f		3,170,236.			
			Business Code				
8	2a	LEGAL FEES AND COURT AWARDS	541110	399,835.	399,835.		
Program Service Revenue	b	FELLOWSHIP SUBSIDIES	541110	92,417.	92,417.		
S E	c	CONTRACTED SERVICES REVENUE	541110	41,960.	41,960.		
ev.	d						
99 R	e						
בֿ	f	All other program service revenue					
	g	Total. Add lines 2a-2f		534,212.			
	3	Investment income (including dividends,	interest, and				
		other similar amounts)		33,262.			33,262.
	4	Income from investment of tax-exempt bond	proceeds .	NONE			
	5	Royalties		NONE			
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c NON	e none				
	d	Net rental income or (loss)		NONE			
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a					
e	b	Less: cost or other basis					
evenue		and sales expenses 7b					
Ş	С	Gain or (loss) 7c					
-i	d	Net gain or (loss)		NONE			
Other	8a	Gross income from fundraising					
١		events (not including \$1,038,400.					
		of contributions reported on line					
		1c). See Part IV, line 18 8a	NONE				
	b	Less: direct expenses	125,717.				
	С	Net income or (loss) from fundraising events		-125,717.			
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	NONE				
	b	Less: direct expenses 9b	NONE				
	С	Net income or (loss) from gaming activities		NONE			
	10a	Gross sales of inventory, less					
		returns and allowances	NONE				
	b	Less: cost of goods sold 10b	NONE				
_	С	Net income or (loss) from sales of inventory.		NONE			
Snc			Business Code				
Je e	11a						
ke la	b						
Miscellaneous Revenue	С	All other revenue					
Ξ	d	All other revenue		NONE			
	<u>е</u> 12	Total. Add lines 11a-11d		NONE 3,611,993.	534,212.		33,262.
	14	i viai leveliue. Odd III SUUCUUIS		3,011,995. l	334,717.1		33,707.

Form **990** (2022)

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52-1784938

### Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respond not include amounts reported on lines 6b, 7b,	nse or note to any line  (A)  Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b,	9b, and 10b of Part VIII.	1 otal oxponoco	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	9,454.	9,454.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	NONE			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and	270275			
	foreign individuals. See Part IV, lines 15 and 16	NONE			
	Benefits paid to or for members	NONE			
5	Compensation of current officers, directors,	261 610	070 151	F2 040	26 600
	trustees, and key employees	361,619.	272,151.	52,840.	36,628
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and	NONE			
_	persons described in section 4958(c)(3)(B)	NONE	1 000 055	240 667	0.40 201
	Other salaries and wages	2,393,003.	1,800,955.	349,667.	242,381
8	Pension plan accruals and contributions (include	92,387.	69,530.	13,499.	9,358
	section 401(k) and 403(b) employer contributions)	000 100	204 252	20 552	0.7. 5.7.0
9		272,193.	204,850.	39,773.	27,570
10	Payroll taxes	194,360.	146,274.	28,400.	19,686
	Fees for services (nonemployees):	170177			
	Management	NONE			
	Legal	NONE		FF 424	
	Accounting	75,434.		75,434.	
	Lobbying	NONE			
	Professional fundraising services. See Part IV, line 17.	NONE			
f	Investment management fees	NONE			
g	Other. (If line 11g amount exceeds 10% of line 25, column	05 006	15 006	00.000	
	(A), amount, list line 11g expenses on Schedule O.)	95,906.	15,906.	80,000.	
	Advertising and promotion	NONE	15 510	1 202	2 000
13		19,741.	15,519.	1,393.	2,829
14	Information technology	2,616.		2,616.	
15	Royalties	NONE	470.000	67.004	FO 100
16	, , , , , , , , , , , , , , , , , , , ,	598,758.	472,292.	67,284.	59,182
	Travel	7,724.	4,999.	2,378.	347
18	Payments of travel or entertainment expenses	NONTE			
	for any federal, state, or local public officials	NONE	C 47C	1 004	C0F
	Conferences, conventions, and meetings	8,195.	6,476.	1,024.	695
	Interest	NONE NONE			
	Payments to affiliates		125 061	14 020	17 027
	Depreciation, depletion, and amortization	167,028.	135,961.	14,030. 3,555.	17,037 4,316
	Insurance	42,317.	34,446.	3,333.	4,310
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
_	EQUIPMENT RENTAL & MAINTENAN	72 529	45 100	21 766	5 652
	PUBLICATIONS AND MESSAGING	72,528. 43,698.	45,109. 24,363.	21,766. 582.	5,653 18,753
	PRINTING AND DUPLICATING	20,146.	16,399.	1,692.	2,055
	COMMUNICATIONS	27,941.	23,508.	2,002.	
		46,736.	7,229.	9,193.	2,431 30,314
	All other expenses				
	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	4,551,784.	3,305,421.	767,128.	479,235
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

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# Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this	Part X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	. 833,191.	1	387,553.
	2	Savings and temporary cash investments	3,271,854.	2	3,146,719.
	3	Pledges and grants receivable, net	1,517,746.	3	1,250,938.
	4	Accounts receivable, net	53,574.	4	29,167.
	5	Loans and other receivables from 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	. NONE	5	NONE
	6	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	NONE	
S	7	Notes and loans receivable, net			NONE
Assets	8	Inventories for sale or use			NONE
As	9	Prepaid expenses and deferred charges		9	145,818.
	_	Land, buildings, and equipment: cost or other	17071001		11370101
		basis. Complete Part VI of Schedule D 10a 1,440,69	1		
	h	Less: accumulated depreciation 10b 621,32	_	100	819,365.
	11	Investments - publicly traded securities			NONE
	12	Investments - other securities. See Part IV, line 11			NONE
	13	Investments - program-related. See Part IV, line 11			NONE
	14				
	15	Intangible assets			NONE
		Other assets. See Part IV, line 11		15	3,288,534.
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	9,068,094.
	17	Accounts payable and accrued expenses		17	342,467.
	18	Grants payable			NONE
	19	Deferred revenue		19	15,000.
	20	Tax-exempt bond liabilities			NONE
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	1,519.
Liabilities	22	Loans and other payables to any current or former officer, director			
ij		trustee, key employee, creator or founder, substantial contributor, or 35%			
<u>ia</u>		controlled entity or family member of any of these persons			NONE
_	23	Secured mortgages and notes payable to unrelated third parties			NONE
	24	Unsecured notes and loans payable to unrelated third parties		24	NONE
	25	Other liabilities (including federal income tax, payables to related third	1		
		parties, and other liabilities not included on lines 17-24). Complete Part >	1		
		of Schedule D		25	4,581,796.
	26	Total liabilities. Add lines 17 through 25	1,870,997.	26	4,940,782.
seou		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
ılar	27	Net assets without donor restrictions	4,099,085.	27	2,911,102.
B	28	Net assets with donor restrictions.		28	1,216,210.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.	,		, ,
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds		31	
Ť	32	Total net assets or fund balances		32	A 107 010
Š	33	Total liabilities and net assets/fund balances		33	4,127,312. 9,068,094.
_	33	Total habilities and het assets/fund palatices,	·   0,930,100.	33	Form <b>990</b> (2022)

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Part	XI Reconciliation of Net Assets					$\overline{}$
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,6	11,	993
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	4,5	51,	<u> 784</u>
3	Revenue less expenses. Subtract line 2 from line 1	3				<u> 791</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		5,0	67,	<u> 103</u>
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	4	4,1	27,	<u> 312</u>
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	on			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Χ	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi					
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ersight	of			
	the audit, review, or compilation of its financial statements and selection of an independent accounta	nt?		2c	Χ	
	If the organization changed either its oversight process or selection process during the tax year, e	xplain	on			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in t	he			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a			3b		

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#### **SCHEDULE A** (Form 990)

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury

Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization WASHINGTON LAWYERS' COMMITTEE FOR CIVIL Employer identification number 52-1784938 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 331/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 12 one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (v) Amount of monetary (iv) Is the organization (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see instructions) above (see instructions)) document? instructions) Yes No (A) (B) (C) (D)

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

Schedule A (Form 990) 2022

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(E)

Total

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

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

Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,905,509.	1,480,741.	2,553,586.	4,654,461.	2,131,836.	13,726,133.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
3	The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
4	Total. Add lines 1 through 3	2,905,509.	1,480,741.	2,553,586.	4,654,461.	2,131,836.	13,726,133.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						2,363,884.
6	Public support. Subtract line 5 from line 4						11,362,249.
	tion B. Total Support		I I				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,905,509.	1,480,741. 33,558.	2,553,586. 27,231.	4,654,461.	2,131,836.	13,726,133.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						NONE
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						NONE
11	Total support. Add lines 7 through 10						13,837,804.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	
13	<b>First 5 years.</b> If the Form 990 is for organization, check this box and <b>stop here</b>	<u> </u>		l, third, fourth,	or fifth tax yea	ar as a section	501(c)(3)
Sec	tion C. Computation of Public Sup		_				
14	Public support percentage for 2022 (li					14	82.11 %
15	Public support percentage from 2021					15	79.67 %
16a	331/3% support test - 2022. If the org						
	box and <b>stop here.</b> The organization quality to a second stop here.	•		•			
D	331/3% support test - 2021. If the organization						
170	this box and <b>stop here</b> . The organization <b>10%-facts-and-circumstances test - 2</b>			_			
11a	10% or more, and if the organization						
	Part VI how the organization meets					-	•
	organization			-	•		
h	10%-facts-and-circumstances test - 2						
	15 is 10% or more, and if the organization		•				
	in Part VI how the organization meets						•
	organization			•	•		• •
18	Private foundation. If the organization						
	instructions						

Schedule A (Form 990) 2022

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#### Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	•				,	
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(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 under section 513						
4	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						
	Amounts included on lines 1, 2, and 3						
. u	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
r	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
	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 on line 10b, whether						
	or not the business is regularly carried on.						
12	Other income. Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
. •	and 12.)						
14	First 5 years. If the Form 990 is for	the organizati	on's first secon	ud. third. fourth	or fifth tax ve	ar as a section	501(c)(3)
• •	organization, check this box and <b>stop here</b> .	-			•		
Sec	tion C. Computation of Public Supp						
15	Public support percentage for 2022 (line 8,			mn (f))		15	%
16	Public support percentage from 2021 Sched					16	
	tion D. Computation of Investment						70
<u> 17</u>	Investment income percentage for 2022 (lin			13 column (f))		17	%
18	Investment income percentage for 2022 (in					18	
	331/3% support tests - 2022. If the org						
134	17 is not more than 331/3%, check this	_					
h	331/3% support tests - 2021. If the orga	·-	-	·	• •		
D	line 18 is not more than 331/3%, check				•		
20	<b>Private foundation.</b> If the organization of		•				<del></del>
				,			

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#### Part IV Supporting Organizations

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

Section A	A. All	Supporting	<b>Organizations</b>
-----------	--------	------------	----------------------

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

		Yes	No
g <i>y</i>			
	1		
s d			
	2		
er	3a		
d e			
	3b		
3)	3с		
lf	4a		
n n	4b		
n <i>d</i> 3)	40		
	4c		
." V n; n			
,	5a		
y			
	5b		
	5c		
o d r			
	6		
r y			
Э	7		
,	8		
e s			
	9a		
h	9b		
it	9c		
n d			
0	10a		
_	10b		

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
_	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI.</b>	44-		
Socti	on B. Type I Supporting Organizations	11c		
Jecu	on B. Type i Supporting Organizations		Yes	No
			163	140
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part</i>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on 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 <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
Socti	on D. All Type III Supporting Organizations	1		
Secu	on 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		163	NO
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.			
	.,	3		
	on 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 ins	structi	ons).	
a	The organization satisfied the Activities Test. Complete line 2 below.  The organization is the parent of each of its supported organizations. Complete line 3 below.			
b C	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see	a inetr	uction	c)
·	The diganization supported a governmental entity. Describe in all winow you supported a governmental entity (se	.0 111311	Yes	
2	Activities Test. Answer lines 2a and 2b below.			
а	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 <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
D	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in <b>Part VI</b> 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 lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	01		
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

JSA 2E1230 1.000 Schedule A (Form 990) 2022

Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations					
1	Check here if the organization satisfied the Integral Part Test as a qualifyin			in in <b>Part VI</b> ). <b>See</b>		
	instructions. All other Type III non-functionally integrated supporting organ					
Se	ection A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3.	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or collection					
	of gross income or for management, conservation, or maintenance of					
	property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
	ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
a	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
C	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other factors					
	(explain in detail in <b>Part VI</b> ):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d.	3				
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
	Multiply line 5 by 0.035.	6				
7		7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Se	ection C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, column A)	1				
2	Enter 0.85 of line 1.	2				
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3				
4	Enter greater of line 2 or line 3.	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions).	6				
7	Check here if the current year is the organization's first as a non-functional	lly integra	ited Type III supporting	g organization		
	(see instructions).					

Schedule A (Form 990) 2022

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish e	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of support	ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations			3	
4	Amounts paid to acquire exempt-use assets				
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)				
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.				
9	9 Distributable amount for 2022 from Section C, line 6			9	
10	10 Line 8 amount divided by line 9 amount				
			(ii)		/iii)

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2022			
a	From 2017			
b	From 2018			
C	From 2019			
d	From 2020			
е	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2018			
b	Excess from 2019			
С	Excess from 2020			
d	Excess from 2021			
е	Excess from 2022			

Schedule A (Form 990) 2022

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# Schedule B (Form 990)

## **Schedule of Contributors**

Attach to Form 990 or Form 990-PF.

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service

Name of the organization

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

Em

Name of the organization

WASHINGTON LAWYERS' COMMITTEE FOR CIVIL

Employer identification number

RIGHTS AND URBAN AFFA	IRS, INC.	52-1784938			
Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization				
	4947(a)(1) nonexempt charitable trust <b>not</b> treated a	s a private foundation			
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a	private foundation			
	501(c)(3) taxable private foundation				
Check if your organization is co	overed by the <b>General Rule</b> or a <b>Special Rule</b> .				
	•				
<b>Note:</b> Only a section 501(c)(/), instructions.	(8), or (10) organization can check boxes for both the Gener	ral Rule and a Special Rule. See			
General Rule					
_	iling Form 990, 990-EZ, or 990-PF that received, during the property) from any one contributor. Complete Parts I and II. ntributions.				
Special Rules					
regulations under sec 16b, and that receive	lescribed in section 501(c)(3) filing Form 990 or 990-EZ that ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Scheduled from any one contributor, during the year, total contributions on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1	e A (Form 990), Part II, line 13, 16a, or ons of the greater of <b>(1)</b> \$5,000; or			
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year					
must answer "No" on Part IV, I	sn't covered by the General Rule and/or the Special Rules dine 2, of its Form 990; or check the box on line H of its Form the filing requirements of Schedule B (Form 990).				

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2022)

JSA

WASHINGTON LAWYERS' COMMITTEE FOR CIVIL Name of organization RIGHTS AND URBAN AFFAIRS, INC.

Employer identification number 52-1784938

Schedule B (Form 990) (2022)

art I	Contributors	(see instructions).	Use duplicate copies	of Part I if additional	space is needed.
-------	--------------	---------------------	----------------------	-------------------------	------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	THE D.C. BAR FOUNDATION  80 M STREET, SE	\$1,013,250.	Person X Payroll Noncash
	WASHINGTON, DC 20003		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	KIRKLAND & ELLIS LLP  300 NORTH LASALLE	\$103,750.	Person X Payroll Noncash (Complete Part II for
	CHICAGO, IL 60654		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	OTHER CONTRIBUTORS < 2%  700 14TH STREET NW #400  WASHINGTON, DC 20005	\$1,778,236.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4_	THE MORRIS & GWENDOLYN CAFRITZ FDN  1825 K STREET, NW, #1400  WASHINGTON, DC 20006	\$75,000.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	BETH WILKINSON  2167 DUNMORE LN., NW,  WASHINGTON, DC 20007	\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			ı

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Schedule B (Form 990) (2022)

Name of organization Page 3

Name of organization	ON WASHINGTON LAWYERS' COMMITTEE FOR CIVIL	Employer identification number	
	RIGHTS AND URBAN AFFAIRS, INC.	52-1784938	
Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.			

Part II	Noncash Property (see instructions). Use duplicate copies of	rait ii ii additional space is nee	eueu.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		  \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

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Name of or	ganization WASHINGTON LAWYERS' (	COMMITTEE FOR CI	VIL	Employer identification number
	RIGHTS AND URBAN AFFA			52-1784938
Part III	Exclusively religious, charitable, etc (10) that total more than \$1,000 for the following line entry. For organizat contributions of \$1,000 or less for the Use duplicate copies of Part III if additional transfer of the copies	the year from any coions completing Part e year. (Enter this inf	one contributor. Co Ill, enter the total of formation once. Se	omplete columns (a) through (e) and f exclusively religious, charitable, etc.,
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
	Transferee's name, address,	(e) Transfe	_	nip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
	Transferee's name, address,	(e) Transfe and ZIP + 4	_	nip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
	Transferee's name, address,	(e) Transfe and ZIP + 4	•	nip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
	Transferee's name, address,	(e) Transfe and ZIP + 4	_	nip of transferor to transferee

Schedule B (Form 990) (2022)

#### **SCHEDULE C** (Form 990)

# **Political Campaign and Lobbying Activities**

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. **Open to Public** Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information. If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

•	Section 501(c)(3) organizations	that have filed Form 5768 (election un	der section 501(h)): Co	mplete Part II-	A. Do not com	plete Part II-B.	
•	Section 501(c)(3) organizations	that have NOT filed Form 5768 (election	on under section 501(h)	): Complete P	art II-B. Do no	t complete Part I	I-A.
If the	organization answered "Yes,"	on Form 990, Part IV, line 5 (Proxy	Tax) (See separate in	structions) o	r Form 990-E	EZ, Part V, line	35c (Prox
	(See separate instructions), ther Section 501(c)(4), (5), or (6) orga						
			EOD GIVII	I F	mnlover ide	ntification numb	or
	WIBIIIN	GTON LAWYERS' COMMITTEE	FOR CIVIL	"			OI.
RIG	HTS AND URBAN AFFAIR	organization is exempt under	saction 501(c) or i	is a soction	52-17	784938	
							intiona fo
1	•	ne organization's direct and indi	rect political campa	aign activition	es in Part	iv. See instru	ictions to
•	definition of "political campa	•			ф		
2		xpenditures. See instructions					
		campaign activities. See instruction rganization is exempt under s					
					Φ		
1	Enter the amount of any exc	sise tax incurred by the organization	n under section 495	0	\$		
2		cise tax incurred by organization m					
3	=	a section 4955 tax, did it file Form	•				No
						Yes	No
	If "Yes," describe in Part IV.	vacaination is evenuation dev	acation E04/a\ av	oont coati	E04/a\/2	`	
Par		organization is exempt under				).	
1		xpended by the filing organization					
2		g organization's funds contributed					
3	Total exempt function expe	enditures. Add lines 1 and 2. Ent	er here and on For	m 1120-PO	L,		
<b>4 5</b>	Did the filing organization file Enter the names, addresses organization made payment the amount of political cont	e Form 1120-POL for this year? and employer identification numb s. For each organization listed, en ributions received that were prom	er (EIN) of all section ter the amount paid	on 527 politi I from the fi livered to a	ical organiza Iling organiz separate po	Yes ations to which ation's funds.	n the filing Also ente ation, sucl
	as a separate segregated fur	nd or a political action committee (	PAC). If additional sp	ace is neede	ed, provide i	nformation in	Part IV.
	( <b>a)</b> Name	<b>(b)</b> Address	(c) EIN	filing orga	t paid from anization's ne, enter -0	(e) Amount of contributions re- promptly and delivered to a political orga If none, en	eceived and d directly a separate anization.
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							

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

Schedule C (Form 990) 2022

Sch	edule C (Form 990) 2022	ASHIN	GTON LAW	YERS' COMMITT	EE FOR CIVII	52	-1784938 Page 2
Pa	Complete if the orgsection 501(h)).	anizatio	on is exen	npt under section	n 501(c)(3) and	filed Form 5768 (elec	ction under
A				affiliated group (and bbying expenditures)		ach affiliated group mem	ber's name, address
В	Check if the filing organization	ation che	ecked box A	A and "limited contro	ol" provisions app	ly.	
	Limits o (The term "expenditu		ying Expendence		)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to in	fluence	public opini	on (grassroots lobb	vina)		
	Total lobbying expenditures to in				· -· -		
	Total lobbying expenditures (add		•	• •	• · · · · · · · · · · · · · · · · · · ·		
	Other exempt purpose expenditu						
	Total exempt purpose expenditu						
	Lobbying nontaxable amount. I	-		·	F		
	columns.						
	If the amount on line 1e, column (a)	or (b) is:	The lobbyin	g nontaxable amount	is:		
	Not over \$500,000		20% of the a	amount on line 1e.			
	Over \$500,000 but not over \$1,000	000	\$100,000 pl	us 15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,50	0,000	\$175,000 pl	us 10% of the excess	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,0	00,000	\$225,000 pl	us 5% of the excess of	ver \$1,500,000.		
	Over \$17,000,000		\$1,000,000.				
_	Grassroots nontaxable amount (						
	Subtract line 1g from line 1a. If a						
	Subtract line 1f from line 1c. If z				_		
j	If there is an amount other that				•		
	reporting section 4911 tax for th						Yes No
				aging Period Unde			
	(Some organizations that			1(h) election do no le instructions for l			ins below.
		Lobb	ying Exper	nditures During 4-Yo	ear Averaging Pe	riod	
	Calendar year (or fiscal year beginning in)	(a)	2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) Total
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column (e))						
С	Total lobbying expenditures						
d	Grassroots nontaxable amount						
_	Grassroots ceiling amount						

Schedule C (Form 990) 2022

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(150% of line 2d, column (e)) f Grassroots lobbying expenditures

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(election under section 501(h)).	ı illec	l Form	5768		
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a	1)		(b)	
description of the lobbying activity.	Yes	No	A	mount	
During the year, did the filing organization attempt to influence foreign, national, state, or local					
legislation, including any attempt to influence public opinion on a legislative matter or					
referendum, through the use of:					
a Volunteers?	<del></del>	X			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.	X	v			
c Media advertisements?		X			
d Mailings to members, legislators, or the public?		X			
e Publications, or published or broadcast statements?		X			
f Grants to other organizations for lobbying purposes?	X	Λ		16	,543
g Direct contact with legislators, their staffs, government officials, or a legislative body?	A	Х		10	, 545
<ul><li>h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</li><li>i Other activities?</li></ul>		X			
				16	,543
Jotal. Add lines 1c through 1i  Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X			, 5 15
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or se	ction		
501(c)(6).					т
				Yes	No
Were substantially all (90% or more) dues received nondeductible by members?				1 2	+
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from	m tha	prior w		3	+
	111 1110	DIIOI V	-ai:	<b>.</b>	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	or se	ction	ne 3. is	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No"	(c)(5)	or se	ction	ne 3, is	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."	(c)(5) OR (b	or se	ction III-A, li	ne 3, is	
Part III-B  Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."  Dues, assessments and similar amounts from members	(c)(5) OR (b	or se	ction	ne 3, is	
Part III-B  Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."  Dues, assessments and similar amounts from members	(c)(5) OR (b	or se	ction III-A, li	ne 3, is	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	(c)(5) OR (b	or se ) Part	ction III-A, li	ne 3, is	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).  a Current year.	(c)(5) OR (b	or se	ction III-A, li	ne 3, is	
Part III-B  Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).  Current year	(c)(5) OR (b	or se	ction III-A, lii	ne 3, is	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amor political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year.	(c)(5) OR (b	or se	ction III-A, lii 1 2a 2b	ne 3, is	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amor political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year.  Carryover from last year.  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du	(c)(5) OR (b	or se	ction III-A, lii 1 2a 2b	ne 3, is	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amor political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Carryover from last year  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du	(c)(5) OR (b	or se	ction III-A, lii 1 2a 2b	ne 3, is	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amor political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year.	(c)(5) OR (b unts c	or se	ction III-A, lii  1 2a 2b 2c 3	ne 3, is	
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).  Current year.  Carryover from last year.  Carryover from last year.  Carryover from last year.  Carryover sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible leand political expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions.	(c)(5) OR (b unts c	or second	ction III-A, lii 1 2a 2b 2c 3	ne 3, is	
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amount 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) duals if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible is and political expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions.	(c)(5) OR (b	or se	ction III-A, li  1 2a 2b 2c 3 4 5		
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).  Current year.  Carryover from last year.  Carryover from last year.  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dueled in the section of the section of the section 162(e) dueled in the section of th	(c)(5) OR (b	or se	ction III-A, li  1 2a 2b 2c 3 4 5		and
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).  Current year.  Carryover from last year.  Carryover from last year.  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dueled in the section of the section of the section 162(e) dueled in the section of th	(c)(5) OR (b	or se	ction III-A, li  1 2a 2b 2c 3 4 5		and
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amor political expenses for which the section 527(f) tax was paid).  Current year.  Carryover from last year.  Carryover from last year.  Carryover from last year.  Carryover from last year.  Carryover sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible leand political expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions.	(c)(5) OR (b	or se	ction III-A, li  1 2a 2b 2c 3 4 5		and

Schedule C (Form 990) 2022

#### SCHEDULE D (Form 990)

# 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.

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization Employer identification number WASHINGTON LAWYERS' COMMITTEE FOR CIVIL RIGHTS AND URBAN AFFAIRS, INC. 52-1784938 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) . 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. 2a 2b 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after July 25, 2006, and not on 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located \_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7

# Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

organization's accounting for conservation easements.

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

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)

and section 170(h)(4)(B)(ii)?

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

- b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
  - provide the following amounts relating to these items:

    (i) Revenue included on Form 990, Part VIII, line 1......\$

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the

- (ii) Assets included in Form 990, Part X.....\$ \_\_\_\_\_\_
   If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

Schedule D (Form 990) 2022

8

Pa	rt III Organizations Maintaini										
3	Using the organization's acquisition	n, accession, an	d other recor	ds, check	k any of the	he follov	ving that ma	ke sigr	nificant us	se of	its
	collection items (check all that app	ly):									
а	Public exhibition		d	Loan	or exchang	ge progra	m				
b	Scholarly research		e	Other							
С	Preservation for future gene	rations									_
4	Provide a description of the organ		ons and expla	ain how t	thev furthe	er the or	ganization's	exemp <sup>1</sup>	t purpose	in F	Part
	XIII.						<b>J</b>				
5	During the year, did the organization	n solicit or receiv	e donations o	of art histo	orical treas	sures or	other similar				
	assets to be sold to raise funds rath								Yes		No
Dэ	rt IV Escrow and Custodial A		intamod do pe		organizatio	2110 00110	otion.			ш	
ıα	Complete if the organiza		'Yes" on For	m 99∩ F	Part I\/ lin	a O orr	enorted an	amour	nt on For	m	
	990, Part X, line 21.	mon answered	103 011101	111 550, 1	art iv, iii	0, 01 1	cported arr	amoui	it oil i oi		
10	Is the organization an agent, trus	too gustodian o	r other intern	andiany fo	or contribu	ıtions or	other accet				
ιа	-			-				_	Vec	37	No
	included on Form 990, Part X?							L	Yes	X	NO
b	If "Yes," explain the arrangement i	n Part XIII and co	implete the fo	llowing tar	oie:						
	B				-		A	mount			
C	Beginning balance										
d	Additions during the year					d					
е	Distributions during the year					е					
f	Ending balance										
2a	Did the organization include an am							_	X Yes	Щ	No
	If "Yes," explain the arrangement i	n Part XIII. Checl	k here if the e	xplanation	has been	provided	on Part XIII	<u> </u>		X	
Pa	rt V Endowment Funds.										
	Complete if the organiza	tion answered	'Yes" on For	m 990, F	Part IV, lin	ne 10.					
		(a) Current year	(b) Prio	or year	(c) Two ye	ears back	(d) Three year	rs back	(e) Four y	ears b	ack
1 a	Beginning of year balance										
b	Contributions										
C	Net investment earnings, gains,										
•	and losses										
ч	Grants or scholarships										
e	Other expenditures for facilities										
C	and programs										
f	Administrative expenses										
g	End of year balance	-f th		- /li 4		\\					
2	Provide the estimated percentage Board designated or quasi-endown			e (iine 1g,	column (a	)) neid as	<b>5.</b>				
h	Permanent endowment		_ ′0								
c	Term endowment %	/0									
Ū	The percentages on lines 2a, 2b, a	and 2c should equ	al 100%								
3 a	Are there endowment funds not in			ation that	are held a	nd admi	nistered for th	<b>.</b>			
Ju	organization by:	the possession e	Tine organiza	ation that	are neid a	ina aanin	instered for th	C	Y	es	No
	(i) Unrelated organizations								3a(i)	+	
									3a(ii)		
	(ii) Related organizations If "Yes" on line 3a(ii), are the relate								3b		
	. , .	J	•						30		
4	Describe in Part XIII the intended urt VI Land, Buildings, and Equ		ization's endo	wment lur	ius.						
Pa	tt VI Land, Buildings, and Equal Complete if the organize	ation answered	"Yes" on Fo	rm 990, l	Part IV, lir	ne 11a.	See Form 9	90, Pa	rt X, line	10.	
	Description of property	(a) Cos	st or other basis	(b) Cost	or other basis	(c) Ac	cumulated		) Book valu		
	Land	,	vestment)	(0	ther)	dep	reciation				
_	Land										
b	Buildings				.00 205	+ .	64 254				
C	Leasehold improvements				20,305.		64,364.			,94	
d	Equipment			1	189,386		39,248.			,13	
	Other			<u> </u>	31,000		17,714.			, 28	
Гota	I. Add lines 1a through 1e. (Column	(a) must equal F	orm 990, Part	X, columi	n (B), line '	1Uc.)			819	,36	5.

JSA 2E1269 1.000

> 8637LA C021 V22-7.4F 88042 38

Schedule D (Form 990) 2022 WASHINGTON LAWS  Part VII Investments - Other Securities.	YERS' COMMITTE	EE FOR CIVIL	52-1784938 Page
Complete if the organization answered	"Yes" on Form 99	90, Part IV, line 11b. See Form 990	0, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year ma	
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F) (G)			
(G) (H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related. Complete if the organization answered	"Yes" on Form 99	 90. Part IV. line 11c. See Form 990	 0. Part X. line 13.
(a) Description of investment	(b) Book value	(c) Method of value	
	. ,	Cost or end-of-year ma	rket value
(1)			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
<u>(7)</u>			
(8) (9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered	"Yes" on Form 99	90, Part IV, line 11d. See Form 990	0, Part X, line 15.
(a) Des	scription		(b) Book value
(1)SECURITY DEPOSIT			110,642.
(2)RIGHT OF USE ASSET - OPERATING			3,177,892.
(3)			
<u>(4)</u>			
_(5)			
<u>(6)</u>			
<u>(7)</u>			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) li.	no 15 )		2 200 524
Part X Other Liabilities.	ne 13.)	· · · · · · · · · · · · · · · · · · ·	3,288,534.
Complete if the organization answered line 25.	"Yes" on Form 99	90, Part IV, line 11e or 11f. See Fo	orm 990, Part X,
1. (a) Descript	tion of liability		(b) Book value
(1) Federal income taxes			
(2)DEFERRED RENT			NONE
(3)OPERATING LEASE LIABILITIES			4,581,796.
_(4)			
(5)			
(6)			
(7)			
(8)			
(9)			4 501 506
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)			-
2. Liability for uncertain tax positions. In Part XIII, provide the	text of the toothote to	o the organization's financial statements	mai reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII . JSA 2E1270 1.000

Schedule D (Form 990) 2022

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	٦.	
1	Total revenue, gains, and other support per audited financial statements	1	30,709,637.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.) 2d -119,377.		
е	Add lines 2a through 2d	2e	26,971,927.
3	Subtract line 2e from line 1	3	3,737,710.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	-125,717.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,611,993.
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	31,649,428.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		00 010 001
е	Add lines 2a through 2d	2e	27,217,021.
3	Subtract line 2e from line 1	3	4,432,407.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Cutor (Becombe in the Aut.)	4c	119,377.
С 5	Add lines <b>4a</b> and <b>4b</b>	5	4,551,784.
	XIII Supplemental Information.		1,331,701.
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Ft XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		
SEE	SUPPLEMENTAL PAGE		

### Part XIII Supplemental Information (continued)

FORM 990, SCHEDULE D, PART IV, LINE 2A

EXPLANATION OF ESCROW LIABILITY ACCOUNT: THE ORGANIZATION IS RESPONSIBLE FOR RECEIVING AND DISTRIBUTING CLIENT FUNDS TO THE FINAL RECIPIENTS PURSUANT TO THE SETTLEMENT AGREEMENT OR COURT ORDER.

PART XI, LINE 4B AND PART XII, LINE 2D

DIRECT EVENT EXPENSES WHICH WERE NETTED AGAINST REVENUE ON FORM 990.

SCHEDULE D, PART XI, LINE 2D AND PART XII, LINE 4B

DIRECT BENEFITS TO DONORS NETTED AGAINST REVENUES ON FINANCIAL STATEMENTS

BUT NOT ON 990.

#### SCHEDULE G (Form 990)

Department of the Treasury

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

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2022
Open to Public Inspection

Inspection

ivallie of th		AWYERS' COMMI	TTEE FC	R CIVII	_1	Linployer identification	
	S AND URBAN AFFAIRS, INC					52-178493	<u>88</u>
Part I	Fundraising Activities. Comp				Yes" on Form 99	90, Part IV, line 1	7.
	Form 990-EZ filers are not re	· · · · · · · · · · · · · · · · · · ·					
1 <u>Inc</u>	dicate whether the organization rais	sed funds through a		_			
a	Mail solicitations	е	Solid	itation of	non-government g	rants	
b	Internet and email solicitations	f	Solid	itation of	government grants	S	
С	Phone solicitations	g	Spec	cial fundra	ising events		
d	In-person solicitations						
2a Di	d the organization have a written o	r oral agreement w	ith any ind	dividual (ir	cludina officers. d	lirectors, trustees.	
	key employees listed in Form 990						Yes No
	"Yes," list the 10 highest paid indi						fundraiser is to be
со	mpensated at least \$5,000 by the	organization.					
			(iii) Did fun	draiser have		(v) Amount paid to	(vi) Amount paid to
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity		r control of	(iv) Gross receipts from activity	(or retained by) fundraiser listed in	(or retained by)
	or entity (idildiaiser)		contrib	utions?	nom activity	col. (i)	organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
40							
10							
T							
Total .	a a a a a a a a a a a a a a a a a a a						:4 :
	st all states in which the organiza gistration or licensing.	tion is registered of	n licensed	i to solicit	contributions of	nas been nouned	it is exempt from
10	gistration of licensing.						

Sche Pa			e if i	the organization ar		n 990, Part IV, line	
Ф		g. compre greener man person		(a) Event #1  ANTON LUNCH  (event type)	(b) Event #2 BURKE BREAKFAST (event type)	(c) Other events  NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts		1,031,400.	7,000.		1,038,400.
R	2 3	Less: Contributions Gross income (line 1 minus line 2)		1,031,400.	7,000.		1,038,400.
	4	Cash prizes					
	5	Noncash prizes					
<b>Direct Expenses</b>	6	Rent/facility costs					
ot Exp	7	Food and beverages					
Direc	8	Entertainment					
	9	Other direct expenses		123,527.	2,190.		125,717.
Pa	11	Direct expense summary. Add lir Net income summary. Subtract I Gaming. Complete if the org \$15,000 on Form 990-EZ, lin	line aniz	10 from line 3, co zation answered "a.	lumn (d)	Part IV, line 19, or	-125,717.
Revenue				(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
		Gross revenue					
enses	2	Cash prizes					
Direct Expe	3	Noncash prizes					
Direc	4	,					
	5 6	Other direct expenses  Volunteer labor		Yes %	Yes%	Yes%	
	7	Direct expense summary. Add lir	nes				
	8						
9 a b	l	Enter the state(s) in which the organization licensed to con	aniz iduc	ation conducts ga	aming activities: ain each of these state		
10a		Were any of the organization's gaminon f "Yes," explain:	g lice	enses revoked, sus	pended, or terminated d	uring the tax year?	Yes No

Schedule G (Form 990) 2022

JSA 2E1282 1.000

	e G (Form 990 or 990-EZ) 2022 WASHINGTON LAWYERS' COMMITTEE FOR CIVIL 52-1784938 Page
	Does the organization conduct gaming activities with nonmembers?
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
	Indicate the percentage of gaming activity conducted in:
	The organization's facility
	An outside facility
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ▶
	Address ▶
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
	amount of gaming revenue retained by the third party ► \$
С	If "Yes," enter name and address of the third party:
	Name ▶
	Address ▶
	Gaming manager information:
	Name ▶
	Gaming manager compensation ▶\$
	Description of services provided ▶
1	Director/officer Employee Independent contractor
17	Mandatory distributions:
	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year 🕨 \$
Part	Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Schedule G (Form 990 or 990-EZ) 2022

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### SCHEDULE J (Form 990)

# **Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest

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

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

Attach to Form 990.

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

WASHINGTON LAWYERS' COMMITTEE FOR CIVIL

Employer identification number

RIGHTS AND URBAN AFFAIRS, INC.

52-1784938

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.  First-class or charter travel  Travel for companions  Tax indemnification and gross-up payments  Discretionary spending account  Health or social club dues or initiation fees  Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	1b		
2	explain			
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.  Compensation committee  Independent compensation consultant  Form 990 of other organizations  X Approval by the board or compensation committee	2		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:	-		
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			21
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

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

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

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

(A) Name and Title		(B) Breakdown of W-2 a	ind/or 1099-MISC and/or	1099-NEC compensation	(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				in column (B) reported as deferred on prior Form 990
JONATHAN SMITH	(i)	182,325.			12,953.	31,857.	227,135.	
1 EXECUTIVE DIRECTOR	(ii)							
GREGG A. KELLEY	(i)	156,515.			9,933.	13,545.	179,993.	
2 DIRECTOR, DEV. & COMM.	(ii)							
KAITLIN BANNER	(i)	154,299.			9,674.	21,668.	185,641.	
3 DEPUTY LEGAL DIRECTOR	(ii)							
JACQUELINE KUTNIK-BAUD	(i)	149,502.			9,113.	31,586.	190,201.	
4 DEPUTY LEGAL DIRECTOR	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

#### **SCHEDULE L** (Form 990)

Department of the Treasury

#### Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open To Public Inspection

Internal Revenue Service **Employer identification number** Name of the organization WASHINGTON LAWYERS' COMMITTEE FOR CIVIL RIGHTS AND URBAN AFFAIRS, 52-1784938 Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (d) Corrected? (b) Relationship between disqualified person and 1 (a) Name of disqualified person (c) Description of transaction organization Yes No (1) (2)(3)(4)(5) (6)Enter the amount of tax incurred by the organization managers or disqualified persons during the year Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (i) Written (b) Relationship (f) Balance due (g) In default? (h) Approved (a) Name of interested person (c) Purpose of (d) Loan to or (e) Original with organization Ioan from the principal amount by board or agreement? organization? committee? From Yes No Yes No Yes No (1) (2) (3)(4)(5)(6)(7) (8)(9)(10)Total Part III **Grants or Assistance Benefiting Interested Persons.** Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (c) Amount of (a) Name of interested person (b) Relationship between interested (d) Type of assistance (e) Purpose of assistance person and the organization assistance (1)

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

Schedule L (Form 990) 2022

(2) (3)(4)(5)(6)(7) (8) (9)(10) Schedule L (Form 990 or 990-EZ) 2022 Page 2

#### Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1)STEPHEN J. HARBURG	DIRECTOR OF THE ORGANIZAT	725,654.	RENTAL OF PROPERTY		Х
_(2)					
_(3)					
_(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

#### Part V **Supplemental Information**

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L, PART IV

STEPHEN J. HARBURG IS A DIRECTOR OF THE ORGANIZATION. WLC LEASES OFFICE SPACE FROM A LAW FIRM WHERE STEPHEN HARBURG IS A PARTNER.

### **SCHEDULE 0** (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 Inspection

52-1784938

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number

#### FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

WASHINGTON LAWYERS' COMMITTEE FOR CIVIL

THE EXECUTIVE DIRECTOR AND CHIEF FINANCIAL OFFICER REVIEW THE FORM 990, WHICH IS PREPARED BY AN INDEPENDENT CPA FIRM, BEFORE DISSEMINATING TO BOARD MEMBERS AND FILING WITH THE IRS.

#### FORM 990, PART VI, LINE 15A & B - COMPENSATION REVIEW & APPROVAL

MEMBERS OF THE EXECUTIVE COMMITTEE CONDUCT AN INFORMAL SURVEY OF COMPARABLE ORGANIZATIONS AND DETERMINE COMPENSATION ACCORDINGLY.

#### FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS

MANAGEMENT MAKES THE GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC WITHIN A REASONABLE TIME WHEN REQUESTED.

#### FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST

THE CONFLICT OF INTEREST POLICY AND DISCLOSURE FORM MUST BE COMPLETED ANNUALLY BY ALL BOARD MEMBERS, STAFF MEMBERS, AND OFFICERS.

Name of the organization

WASHINGTON LAWYERS' COMMITTEE FOR CIVIL

52-1784938

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

TO PROTECT, THROUGH LITIGATION AND LEGAL REPRESENTATION, THE CIVIL RIGHTS OF PERSONS WHO HAVE HISTORICALLY BEEN SUBJECT TO DISCRIMINATION AND POVERTY. THE COMMITTEE PROVIDES PRO BONO SERVICES BY MOBILIZING THE RESOURCES OF VOLUNTEER LAWYERS AND LAW FIRMS IN THE DC METRO AREA.

Name of the organization

WASHINGTON LAWYERS' COMMITTEE FOR CIVIL

52-1784938

Employer identification number

FORM 990, PART III - PROGRAM SERVICE

#### LINE 4A, PROGRAM SERVICE

\_\_\_\_\_

WLC ENGAGES IN LITIGATION, PUBLIC POLICY ADVOCACY, CLIENT COUNSELING AND COMMUNITY EDUCATION TO ADDRESS RACIAL AND OTHER FORMS OF DISCRIMINATION. THE COMMITTEE WORKS ON MATTERS THAT AFFECT THE DISTRICT OF COLUMBIA AND THE SURROUNDING REGION AND ON CASES OUTSIDE OF THE REGION THAT MAY HAVE AN IMPACT ON LOCAL RESIDENTS. WE WORK CLOSELY WITH THE PRIVATE BAR TO EXPAND THE CAPACITY OF OUR STAFF AND RELY HEAVILY ON FIRM PRO BONO PARTNERS. OUR PROJECT PRIORITIES INCLUDE: (1) CREATING EQUAL OPPORTUNITY TO ECONOMIC STABILITY FOR INDIVIDUALS AND FAMILIES; PEOPLE OF COLOR, WOMEN, CHILDREN AND PERSONS WITH DISABILITIES WHO ARE DISPROPORTIONATELY FORCED TO LIVE IN POVERTY. THE INEQUITIES IN THE SOCIAL AND LEGAL SYSTEMS HAVE CREATED CIRCUMSTANCES IN WHICH SOCIAL MOBILITY IS EXTREMELY LIMITED AND THE GAP BETWEEN RICH AND POOR IS EXPANDING. INEQUALITY AND IMMOBILITY IS SIGNIFICANTLY WORSE IN COMMUNITIES OF COLOR. POVERTY HAS BECOME AS MUCH AN INHERITANCE AS WEALTH. WORK HAS BECOME A KEY ELEMENT OF REDUCING POVERTY SINCE WELFARE "REFORM," MAKING ACCESS TO EMPLOYMENT, FAIR WAGES AND STABILITY IN WORK CRITICAL.(2) CHALLENGING THE CONDITIONS THAT FORCE RACIAL AND ECONOMIC SEGREGATION AND THAT LIMIT OPTIONS FOR SAFE, DECENT AND AFFORDABLE HOUSING BASED ON RACE AND NATIONAL ORIGIN; HOUSING SEGREGATION IS ITSELF INHERENTLY UNEQUAL AND CONTRIBUTES TO DIMINISHED OPPORTUNITIES FOR EDUCATION, WORK AND RECREATION. RACIAL SEGREGATION IN HOUSING IS INCREASING IN THE DISTRICT AND THE REGION DRIVEN BY ECONOMIC DEVELOPMENT, THE EFFECTS OF DISCRIMINATION IN THE CRIMINAL LEGAL SYSTEM AND OTHER STRUCTURAL AND ECONOMIC FACTORS. THE FORCES OF SEGREGATION IN THE DISTRICT HAVE DEPRIVED LOW INCOME AND MANY COMMUNITIES OF COLOR ACCESS TO SAFE, DECENT AND AFFORDABLE HOUSING.(3) REDUCING BARRIERS TO PUBLIC SERVICES AND PUBLIC ACCOMMODATIONS; THE ABILITY TO ACCESS PUBLIC SERVICES OR PARTICIPATE IN THE ECONOMY ARE ESSENTIAL TO BE FULL MEMBERS OF SOCIETY. EVERYONE, REGARDLESS OF RACE, GENDER, DISABILITY OR LANGUAGE SHOULD BE FREE FROM DISCRIMINATION IN CIVIC PARTICIPATION, ECONOMIC ACTIVITY AND SOCIAL ENGAGEMENT. (4) CREATING EQUAL OPPORTUNITY FOR AN EDUCATION; ONE OF THE GREAT UNFINISHED PROJECTS OF THE CIVIL RIGHTS MOVEMENT IS ADDRESSING INEQUALITY IN EDUCATION. SCHOOLS ARE INCREASINGLY SEGREGATED, SEPARATE AND UNEQUAL. CHILDREN OF COLOR, WITH DISABILITIES AND ENGLISH LANGUAGE LEARNERS ARE MUCH MORE FREQUENTLY DENIED THE OPPORTUNITY TO THRIVE AND ACHIEVE THEIR ASPIRATIONS. EDUCATION REFORM IN THE DISTRICT AND IN THE REGION,

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Name of the organization

WASHINGTON LAWYERS' COMMITTEE FOR CIVIL

52-1784938

FORM 990, PART III - PROGRAM SERVICE

HAS HAD SOME EFFECT, BUT IT IS LIMITED. (5) REDUCING THE IMPACT OF AN UNFAIR CRIMINAL SYSTEM; THE CRIMINAL SYSTEM IS A PRIME DRIVER OF INEQUALITY. WORK TO ADDRESS THESE ISSUES WILL INCLUDE: (A) A CONTINUED STRONG EMPHASIS ON ADDRESSING CONDITIONS OF INCARCERATION. PERSONS CONFINED TO PRISONS, JAILS, IMMIGRATION DETENTION AND OTHER CRIMINAL SYSTEM INSTITUTIONS ARE CONFRONTED WITH A UNIQUE AND PARTICULARLY CRUEL FORM OF STATE POWER. AS LONG AS MASS INCARCERATION IS A FACT, THE NEED FOR PRISONERS' RIGHTS ADVOCACY WILL BE ESSENTIAL.(B) STRATEGIES TO REDUCE UNNECESSARY AND DISCRIMINATORY CONTACT WITH THE CRIMINAL JUSTICE SYSTEM AND THAT REDUCES THE EFFECTS OF SUCH CONTACT. RACE BIAS IS DEEPLY IMBEDDED IN EACH CRIMINAL SYSTEM COMPONENT, INCLUDING THE WRITING OF LAWS, POLICE, PROSECUTORS, COURTS, PRISONS AND THE EFFECTS OF COLLATERAL CONSEQUENCES. THESE EFFECTS ARE SIGNIFICANT WHETHER THEY RESULT IN LONG-TERM INCARCERATION, CRUSHING COURT IMPOSED FINANCIAL OBLIGATIONS (DEBTORS' PRISONS) OR BARRIERS TO EMPLOYMENT, EDUCATION OR HOUSING AFTER A PERIOD OF INCARCERATION.

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