Departme Internal R	<b>990</b>	Return of Organization Exempt From Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code	(except private foundation	s) <b>2016</b>				
internal A	ent of the Treasury	Do not enter social security numbers on this form as it m		Open to Pub				
A For		Information about Form 990 and its instructions is at ww ar year, or tax year beginning JUL 1, 2016 and ending	JUN 30, 2017	Inspection				
B Chec	T	organization	D Employer identifica	ation number				
appli		IAM J. BRENNAN CENTER FOR	D Employer identifica	ation number				
Ac	distances and the second secon	ICE, INC.						
Na	ame	isiness as	13-38	39293				
Ini re	itial turn Number	and street (or P.O. box if mail is not delivered to street address) Room/s						
Llret		BROADWAY 1750	) (646)					
ate		own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	24,560,3				
Llret		YORK, NY 10271	H(a) Is this a group ret					
	n <b>F</b> Name a	nd address of principal officer: MICHAEL WALDMAN	for subordinates?					
	SAME	AS C ABOVE	H(b) Are all subordinates inc					
	exempt status:	▲ 501(c)(3) 501(c) ( ) ◄ (insert no.) 4947(a)(1) or BRENNANCENTER.ORG		st. (see instruction				
	n of organization:		H(c) Group exemption Year of formation: 1995 M					
	I Summary			State of legal domici				
	· · · · · · · · · · · · · · · · · · ·	e the organization's mission or most significant activities: SEE SCHE	DULE O.					
nce	Differity decorte	$\frac{2}{2}$						
	2 Check this bo	Image: Interpretation of the temperature of the temperature of the temperature of the temperature of tempera	more than 25% of its net ass	ets.				
S S		ing members of the governing body (Part VI, line 1a)						
Activities & Governance	Number of ind	ependent voting members of the governing body (Part VI, line 1b)	4					
Se 5		of individuals employed in calendar year 2016 (Part V, line 2a)						
izi e	Total number	of volunteers (estimate if necessary)	6					
7 Act		I business revenue from Part VIII, column (C), line 12						
	b Net unrelated	ousiness taxable income from Form 990-T, line 34						
			Prior Year	Current Year				
8 e		and grants (Part VIII, line 1h)	14,401,649.	24,064,8				
9 9 10 10		ervice revenue (Part VIII, line 2g) 0. t income (Part VIII, column (A), lines 3, 4, and 7d) 64,487.						
		ome (Part VIII, column (A), lines 3, 4, and 7d)	-216,465.	-116,3 144,2				
11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12)	14,249,671.	24,092,7				
13		nilar amounts paid (Part IX, column (A), lines 1-3)	30,000.	30,0				
1.		o or for members (Part IX, column (A), line 4)	0.	0070				
10 1 30		compensation, employee benefits (Part IX, column (A), lines 5-10)	10,032,356.	10,630,6				
BU 16		ndraising fees (Part IX, column (A), line 11e)	0.					
Expenses	<b>b</b> Total fundraisi	ng expenses (Part IX, column (D), line 25) ▶ 1,830,450.						
ш <sub>17</sub>		s (Part IX, column (A), lines 11a-11d, 11f-24e)	3,478,347.	4,269,9				
18	B Total expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)	13,540,703.	14,930,5				
19	9 Revenue less	expenses. Subtract line 18 from line 12	708,968.	9,162,2				
Fund Balances			Beginning of Current Year	End of Year				
20 Bala	D Total assets (F		12,470,883.	24,970,7				
			858,634.	3,769,1				
-군 22	II   Signature	und balances. Subtract line 21 from line 20	11,612,249.	21,201,6				

	WILLIAM J. BRENNAN CENTER FOR		
	n 990 (2016) JUSTICE, INC.	13-3839293	Page <b>2</b>
Ра	rt III Statement of Program Service Accomplishments		
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission:		
•	THE BRENNAN CENTER FOR JUSTICE AT NEW YORK UNIVERSITY	SCHOOL OF LAW	IS
	A NONPARTISAN LAW AND POLICY INSTITUTE THAT SEEKS TO I	MPROVE THE	
	AMERICAN SYSTEMS OF DEMOCRACY AND JUSTICE.		
2	Did the exercise tion undertake any eignificant program can jobs during the year which were not listed on the		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?		XNo
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	es?Yes	XNo
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services.		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to c revenue, if any, for each program service reported.		and
4a		evenue \$	)
	THE BRENNAN CENTER FOR JUSTICE PERFORMS RIGOROUS RESEA	ARCH, CRAFTS A	ND ′
	PROMOTES INNOVATIVE POLICY PROPOSALS, ENGAGES IN ADVOC		
	LITIGATES TO ADVANCE ITS MISSION. OUR WORK RANGES FROM		S TO
	CAMPAIGN FINANCE, FROM CRIMINAL JUSTICE REFORM TO CONS PROTECTION IN THE FIGHT AGAINST TERRORISM. WE COMBINE		<u></u>
	A THINK TANK, A LEGAL ADVOCACY GROUP, AND A CUTTING-ED		
	HUB.		
4b	(Code:) (Expenses \$ including grants of \$) (Re	evenue \$	)
			/
4c	(Code: ) (Expenses \$ including grants of \$ ) (Re	evenue \$	)
10			,
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses 10,736,089.		
		Form <b>9</b>	<b>90</b> (2016)
63200	2 11-11-16 <b>2</b>		
031	.211 758275 3128.000 2016.05000 WILLIAM J. BRENNAN	CENTER F 3128	3 001

14031211 758275 3128.000

2016.05000 WILLIAM J. BRENNAN CENTER F 31

JUSTICE, INC.

Form 990 (2016)

Pa	t IV Checklist of Required Schedules			0
			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	Х	
12a	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	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			<b>_</b> _
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X

Form **990** (2016)

632003 11-11-16

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	1990 (2016) JUSTICE, INC. $13-3833$	9293	P	age <b>4</b>
Pa	rt IV Checklist of Required Schedules (continued)			<u> </u>
00-		00-	Yes	No X
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		<u> </u>
b 01	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21		<u> </u>
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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			v
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	06		x
27	<i>complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26		- 23
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity 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 Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			l
	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			x
22	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
34	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	<u> </u>
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		<u> </u>
~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		x
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 in Schedule O for Part VI, lines 11b and 19?			[
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form	990	(2016)

632004 11-11-16

13-3839293

WILLIAM	J.	BRENNAN	CENTER	FOR
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JUSTICE, INC.

Form 990 (2016)

Pa	<b>t V</b> Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V								
					Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	21						
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0								
с	Did the organization comply with backup withholding rules for reportable payments to vendors and r (gambling) winnings to prize winners?			1c	x				
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	150						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	х				
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction								
3a				3a		X			
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b					
	At any time during the calendar year, did the organization have an interest in, or a signature or other								
	financial account in a foreign country (such as a bank account, securities account, or other financial	-		4a		X			
b	If "Yes," enter the name of the foreign country:	,							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accounts (F	-BAR).						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	-		5a		X			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-			5b		X			
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c					
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t								
	any contributions that were not tax deductible as charitable contributions?			6a		X			
b	If "Yes," did the organization include with every solicitation an express statement that such contribu								
	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 se	rvices provi	ded to the payor?	7a	Х				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Х				
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as require	d						
	to file Form 8282?			7c		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contract?		7e		X			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7f		X			
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 8899 a	as required?	7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz	ation file a	Form 1098-C?	7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by the							
	sponsoring organization have excess business holdings at any time during the year?			8					
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		<b> </b>			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b					
10	Section 501(c)(7) organizations. Enter:								
	· · · · · · · · · · · · · · · · · · ·	10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b							
11	Section 501(c)(12) organizations. Enter:								
		11a							
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)	11b							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1		12a					
b	b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		<u> </u>			
-	<b>Note.</b> 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	13b							
	Enter the amount of reserves on hand	13c				v			
				14a		X			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	ю О		14b					

Form **990** (2016)

632005 11-11-16

JUSTICE, INC.

Form 990 (2016)

X

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

ect	tion A. Governing Body and Management					
4			27		Yes	+
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	<u> </u>	-		
	If there are material differences in voting rights among members of the governing body, or if the governing					I
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		26			
	Enter the number of voting members included in line 1a, above, who are independent					
	Did any officer, director, trustee, or key employee have a family relationship or a business relations					1
	officer, director, trustee, or key employee?			2		_
3	Did the organization delegate control over management duties customarily performed by or under					
	of officers, directors, or trustees, or key employees to a management company or other person?			3		_
	Did the organization make any significant changes to its governing documents since the prior Form			4		_
	Did the organization become aware during the year of a significant diversion of the organization's a			5		_
	Did the organization have members or stockholders?			6		_
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	• •		_		
	more members of the governing body?			7a		_
b	Are any governance decisions of the organization reserved to (or subject to approval by) members					
_	persons other than the governing body?			7b		
	Did the organization contemporaneously document the meetings held or written actions undertaken during the y		•		v	
	The governing body?			8a	X	_
	Each committee with authority to act on behalf of the governing body?			8b	X	_
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		-
ect	tion B. Policies (This Section B requests information about policies not required by the Internal	Revenue Co	ode.)			-
					Yes	-
	Did the organization have local chapters, branches, or affiliates?			10a		-
b	If "Yes," did the organization have written policies and procedures governing the activities of such					
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		_
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	ody before fi	ling the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
				12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ri			12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? $I\!f$	"Yes," descr	ibe			
	in Schedule O how this was done			12c	Х	
	Did the organization have a written whistleblower policy?			13	Х	
4	Did the organization have a written document retention and destruction policy?			14	Х	
5	Did the process for determining compensation of the following persons include a review and appro	val by indep	pendent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	1?				
а	The organization's CEO, Executive Director, or top management official			15a	Х	
	Other officers or key employees of the organization			15b	Х	ĺ
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					ĺ
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang	ement with	а			
	taxable entity during the year?			16a		
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its parti	cipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org	anization's				
	exempt status with respect to such arrangements?			16b		
ect	tion C. Disclosure					
7	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ,	CA,CT,	FL,GA,HI	,IL	,KS	5
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990					
	for public inspection. Indicate how you made these available. Check all that apply.					
		in in Schedu	ıle O)			
	Own website Another's website X Upon request Other (expla		,	d finan	cial	
		conflict of int	terest policy, and	יומוווע		
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, or	conflict of int	erest policy, and	Jillali		
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, o statements available to the public during the tax year.			u iiriari		
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, or statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's to					
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, o statements available to the public during the tax year.					-

Part VII	Co	mpensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	
	Em	nployees, and Independent Contractors	

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

JUSTICE, INC.

Form 990 (2016)

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average	(do		Pos		than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week			uau	reciu	n/uus	(ee)	. from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation from the
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	organizations	ruste	ll trus		vee	mpen		(** 2/1000 10100)		and related
	below	d ual 1	Institutional trustee	-	Key employee	est co oyee	er			organizations
	line)	Indivi	Institu	Officer	Key e	Highest compensated employee	Former			C C
(1) NANCY BRENNAN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(2) ADAM B. COX	1.00									
BOARD MEMBER		Х						0.	0.	0.
(3) JOHN FEREJOHN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(4) GAIL FURMAN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(5) DANIELLE GRAY	1.00									
BOARD MEMBER		Х						0.	0.	0.
(6) KIM HARRIS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(7) HELEN HERSHKOFF	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) JAMES E JOHNSON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) THOMAS M. JORDE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) DANIEL F. KOLB	1.00								_	_
BOARD MEMBER		Х						0.	0.	0.
(11) RUTH LAZARUS	1.00									-
BOARD MEMBER		Х						0.	0.	0.
(12) TREVOR MORRISON	1.00									
EX-OFFICIO		Х						0.	0.	0.
(13) ERIN MURPHY	1.00									
BOARD MEMBER		X						0.	0.	0.
(14) WENDY NEU	1.00									
BOARD MEMBER		Х						0.	0.	0.
(15) BURT NEUBORNE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(16) LAWRENCE PEDOWITZ	1.00									
BOARD MEMBER	1 00	X						0.	0.	0.
(17) STEVEN ALAN REISS	1.00									<u>^</u>
BOARD MEMBER		Х						0.	0.	0.
632007 11-11-16										Form <b>990</b> (2016)

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2016.05000 WILLIAM J. BRENNAN CENTER F 3128\_001

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Form **990** (2016)

WILLIAM	J.	BRENNAN	CENTER	FOR
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Form 990 (2016) JUSTICE ,	INC.								13-38	<u>;39</u> :	<u>293</u>	Pa	age <b>8</b>
Part VII Section A. Officers, Directors, Tru	stees, Key Em	ploy	ees,	and	d Hi	ighe	st C	Compensated Employe	es (continued)				
(A)	(B)	ĺ	,	(C		<u> </u>		(D)	(E)			(F)	
Name and title	Average		F	Posi	ition	۱		Reportable	Reportable		Fe	timate	bd
Name and the	hours per		not ch , unles	eck r	more	than		compensation	compensatio			nount	
	week		cer and					from	from related	'		other	01
	(list any	J.						the	organizations			pensa	tion
	hours for	lirect				_		organization	(W-2/1099-MIS			om th	
	related	e or c	tee			sated		(W-2/1099-MISC)	(00-2/1033-1010	<i>o,</i>		anizat	
	organizations	ruste	trus		ee	npen		(W 2/1000 WICO)			•	d relat	
	below	ual ti	tiona		ploy	st cor	_					nizati	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orgu	Inzan	0110
(18) RICHARD L. REVESZ	1.00	<u> </u>	-	<u> </u>	¥	Ξæ	ш						
	1.00	x						0.		0.			0.
BOARD MEMBER	1 0 0	<u> </u>						0.		<u> </u>			0.
(19) GERALD ROSENFELD	1.00												•
BOARD MEMBER		Х						0.		0.			0.
(20) STEPHEN SCHULHOFER	1.00												
BOARD MEMBER		X						0.		0.			Ο.
(21) EMILY SPITZER	1.00												
BOARD MEMBER		x						0.		0.			Ο.
(22) CHRISTINE VARNEY	1.00												
	1.00							0.		0.			Δ
BOARD MEMBER	1 00	X						0.		<u> </u>			0.
(23) SCOTT WALLACE	1.00									_			
BOARD MEMBER		Х						0.		0.			0.
(24) ADAM WINKLER	1.00												
BOARD MEMBER		X						0.		0.			Ο.
(25) KENJI YOSHINO	1.00												
BOARD MEMBER		x						0.		0.			0.
(26) ROBERT ATKINS	1.00					-							
	1.00	x		x				0.		0.			Ο.
BOARD CO-CHAIR				Λ				0.		0.			0.
1b Sub-total								• •		-	20	<u> </u>	
c Total from continuation sheets to Part	/II, Section A							2,442,243.		0.			12.
d Total (add lines 1b and 1c)								2,442,243.		0.	30	b,3	12.
2 Total number of individuals (including but	not limited to th	nose	liste	d at	oove	e) wł	no r	eceived more than \$100	,000 of reportable	э			
compensation from the organization													13
												Yes	No
3 Did the organization list any former office	r. director. or tru	ustee	e. kev	/ en	npla	ovee	or	highest compensated e	mplovee on				
line 1a? If "Yes," complete Schedule J for					•			•		- 1	3		Х
4 For any individual listed on line 1a, is the													
									ine organization			Х	
and related organizations greater than \$1										·····	4	~	<u> </u>
5 Did any person listed on line 1a receive or	-				-			ted organization or indivi	dual for services				
rendered to the organization? If "Yes," col	mplete Schedul	le J f	or su	ch j	pers	son .					5		X
Section B. Independent Contractors													
1 Complete this table for your five highest c	ompensated in	depe	ender	nt c	onti	racto	ors t	that received more than	\$100,000 of com	pensa	ation f	rom	
the organization. Report compensation fo	r the calendar y	ear (	endir	ng w	vith	or w	ithiı	n the organization's tax	/ear.				
(A)				0				(B)			(C	;)	
Name and busines	s address							Description of s	ervices	C	omper		n
120 BROADWAY HOLDINGS LI	<u>C 120</u>	BRC		WA	Y								
36TH FLOOR, NEW YORK, NY	-	0111	/110			•		CONSTRUCTION		1	,21	<b>۵</b> ۲	37
	102/1							CONSTRUCTION			, 41.	5,5	57.
EMPIRE OFFICE	1	~ ~ ~									201		<u> </u>
105 MADISON AVE, NEW YOF		00-	10				_	FURNITURE			38	1,3	69.
SCHRIMMER DESIGN GROUP I													
200 W 41ST ST, NEW YORK	C, NY 10	036	5					ARCHITECTURE			15	4,0	28.
BERLIN ROSEN													
15 MAIDEN LN #1600, NEW	YORK, NY	Y 1	L O O	38	3		ł	PUBLIC RELAT	IONS		14	2,0	11.
PAETEC	,												
600 IRWIN ROAD #A, MT. I	AUREL I	л.т	0.8	0 5	58			TELEPHONE			12	3.0	37.
						ac."			are there			-, -	51.
2 Total number of independent contractors		iot III	nitec	i to		_	stec	a above) who received m	iore than				
\$100,000 of compensation from the organ		<u></u>	<b>TT T 7</b>	<u> </u>		5	1 7 7				_	2000	
SEE PART VII, SECTIO	IN A CON'	т. Т Г	NUΑ	.T.T	LUI	N S	SH.	EETS			Form	<b>990</b> ()	2016)

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8 2016.05000 WILLIAM J. BRENNAN CENTER F 3128\_001

WILLIAM	J.	BRENNAN	CENTER	FOR
JUSTICE,	II	NC.		

Form 990 JUSTICE	E, INC.						- 1		13-383	9293
Part VII Section A. Officers, Directors,	Trustees, Key E	mplo	oyee	es, a	nd H	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours	(check all that apply)			app	ly)	compensation	compensation	amount of	
	per					Ð		from the	from related	other
	week (list any	tor				ploye		organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	r direc				ed em		(W-2/1099-MISC)	(	organization
	related	stee or	ustee			en sat				and related
	organizations	al trus	onal tr		loyee	comp				organizations
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pensated em ployee	Former			
(27) PATRICIA BAUMAN	1.00	=	-		×	-				
BOARD CO-CHAIR		x		x				0.	0.	0.
(28) PAUL LIGHTFOOT	1.00									
TREASURER		x		x				0.	0.	0.
(29) MICHAEL WALDMAN	40.00									
PRESIDENT		X		X				373,968.	0.	36,825.
(30) JOHN ANTHONY BUTLER	40.00									
VP/COO				X				217,203.	Ο.	23,687.
(31) ELISA MILLER	24.00									
SECRETARY				Х				109,620.	0.	407.
(32) JOHN KOWAL	40.00									
VICE PRESIDENT PROGRAMS					Х			227,378.	0.	30,786.
(33) WENDY WEISER	40.00									
DIRECTOR DEMOCRACY PROGRAM					х			203,929.	0.	26,005.
(34) VIVIEN WATTS	40.00							4 2 4 4 4 4		
VP/MANAGING DIRECTOR	10.00				X			179,188.	0.	32,622.
(35) JENNIFER WEISS-WOLF	40.00				x			160 100	0	20 122
VP DEVELOPMENT	40.00				^			169,128.	0.	30,433.
(36) JEANINE PLANT-CHIRLIN VP COMMUNICATIONS	40.00				x			167,819.	0.	13,111.
(37) LARRY NORDEN	40.00						<u> </u>	107,019.	0.	,
DEPUTY DIRECTOR DEMOCRACY	40.00					x		171,401.	0.	19,938.
(38) INIMAI CHETTAIR	40.00							1/1/4010	0.	19,990.
DIRECTOR JUSTICE PROGRAM						x		165,590.	0.	20,132.
(39) NICOLE AUSTIN-HILLERY	40.00								•••	
DIRECTOR- DC OFFICE						x		154,538.	0.	31,627.
(40) FAIZA PATEL	40.00									
DIRECTOR LNS PROGRAM						x		154,420.	0.	11,440.
(41) MYRNA PEREZ	40.00									
DEPUTY DIRECTOR DEMOCRACY						X		148,061.	0.	29,299.
		<u> </u>								
		-								
		-	-	-		$\vdash$	-			
								2 442 242		206 210
Total to Part VII, Section A, line 1c								2,442,243.		306,312.

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WILLIAM J. BRENNAN CENTER FOR JUSTICE, INC.

			CE, INC.				13-3839	293 Page 9
Pa	t VI	II Statement of Rever	nue					
		Check if Schedule O cont	ains a response	or note to any lin				
					<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
Ğå.		Fundraising events		1,104,338.				
ar J		d Related organizations						
s, C		Government grants (contribut						
is i	f	All other contributions, gifts, gran	ts, and					
put		similar amounts not included abo		22,960,497.				
<u>i Ģ</u>	c	Noncash contributions included in lines		67,072.				
a C	-	Total. Add lines 1a-1f	-		24,064,835.			
-	-			Business Code	, ,			
e	2 8	a						
ž	k							
Sel	Č							
Program Service Revenue		4						
л Б С	e	j 						
Pre	f	All other program service reve	nue					
		g Total. Add lines 2a-2f						
	3	Investment income (including						
		other similar amounts)			28,995.			28,995.
	4	Income from investment of tax						
	5	Royalties						
		,	(i) Real	(ii) Personal				
	6 a	Gross rents	()	(				
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
		a Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	99,181.					
	t	<ul> <li>Less: cost or other basis</li> </ul>						
		and sales expenses	244,493.					
	c	Gain or (loss)	-145,312.					
		Net gain or (loss)			-145,312.			-145,312.
ø		Gross income from fundraising						
Other Revenue		including \$ 1,104						
eve		contributions reported on line						
R B		Part IV, line 18		100,815.				
the	k	Less: direct expenses						
0	c	Net income or (loss) from func	Iraising events	►	-122,271.			-122,271.
		Gross income from gaming ac						
		Part IV, line 19						
	k	Less: direct expenses						
		Net income or (loss) from gam						
		Gross sales of inventory, less	-					
		and allowances						
	t	Less: cost of goods sold						
		Net income or (loss) from sale						
Ī		Miscellaneous Revenu		Business Code				
İ	11 a	LEASE TERMINATION REFU		900099	265,000.			265,000.
	Ł	MISCELLANEOUS INCOME		900099	1,535.			1,535.
	c							
		All other revenue						
		• Total. Add lines 11a-11d			266,535.			
	12	Total revenue. See instructions.			24,092,782.	0.	0.	27,947.
63200				F	, , ,		-	Form <b>990</b> (2016)

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#### Form 990 (2016) JUSTICE, INC. Part IX Statement of Functional Expenses

Par	t IX Statement of Functional Expens	es			
Secti	on 501(c)(3) and 501(c)(4) organizations must com		-	omplete column (A).	
	Check if Schedule O contains a respor				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations	22.000			
	and domestic governments. See Part IV, line 21	30,000.	30,000.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	2,012,152.	1,496,288.	272,060.	243,804
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	6,992,112.	5,199,513.	945,393.	847,206
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	426,072.	325,164.	54,333.	46,575
9	Other employee benefits	594,739.	453,383.	76,038.	65,318
10	Payroll taxes	605,537.	459,960.	78,070.	67,507
11	Fees for services (non-employees):				
а	Management				
	Legal	5,999.	3,559.	1,665.	775
	Accounting	30,500.		30,500.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	76,021.	45,102.	21,100.	9,819
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	1,073,509.	654,998.	275,915.	142,596
12	Advertising and promotion	32,922.	18,328.	8,741.	5,853
13	Office expenses	869,933.	484,299.	230,974.	154,660
14	Information technology				
15	Royalties				
16	Occupancy	1,482,566.	1,082,920.	224,591.	175,055
17	Travel	228,430.	154,797.	55,426.	18,207
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	161,072.	109,151.	39,082.	12,839
20	Interest	80,506.	58,804.	12,196.	9,506
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	174,608.	129,844.	23,608.	21,156
23	Insurance	53,851.	29,979.	14,298.	9,574
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
a					
b					
C					
d	<u></u>				
	All other expenses	14,930,529.	10,736,089.	2,363,990.	1,830,450
25	Total functional expenses. Add lines 1 through 24e	14,930,349.	10,730,009.	4,303,990.	1,030,430
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

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Check here

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\_\_\_\_\_ if following SOP 98-2 (ASC 958-720)

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Form **990** (2016)

1 61		Dalalice Sileet					
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			1,944,423.	1	12,833,717.
	2	Savings and temporary cash investments			5,365,430.	2	
	3	Pledges and grants receivable, net			2,856,646.	3	5,153,782.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensation	ated em	oloyees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	fied pers	sons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c)	(3)(B), and contributing			
		employers and sponsoring organizations of sect	tion 501(	(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr).	Comple	ete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
Ä	8	Inventories for sale or use				8	
	9				96,495.	9	82,546.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	3,503,686.			
	b	Less: accumulated depreciation	10b	326,346.	222,722.	10c	3,177,340.
	11	Investments - publicly traded securities			1,784,464.	11	3,413,872.
	12	Investments - other securities. See Part IV, line	11			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			200,703.	15	309,483.
	16	Total assets. Add lines 1 through 15 (must equ			12,470,883.	16	24,970,740.
	17	Accounts payable and accrued expenses			552,196.	17	645,555.
	18	Grants payable			206 420	18	
	19	Deferred revenue			306,438.	19	964,576.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I				21	
ies	22	Loans and other payables to current and former					
oilit		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	2,159,000.
_	23	Secured mortgages and notes payable to unrela				23	2,159,000.
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	,			05	
	26	Schedule D Total liabilities. Add lines 17 through 25			858,634.	25 26	3,769,131.
	20	Organizations that follow SFAS 117 (ASC 958		here X and	000,0010	20	5770571510
s		complete lines 27 through 29, and lines 33 an					
Ce	27	Unrestricted net assets			7,267,780.	27	10,851,313.
alar	28				4,144,469.	28	10,150,296.
Ë	29				200,000.	29	200,000.
ņ		Organizations that do not follow SFAS 117 (A			,		,
ъ		and complete lines 30 through 34.	,	,			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds				30	
SSE	31	Paid-in or capital surplus, or land, building, or ec				31	
∋t A	32	Retained earnings, endowment, accumulated in				32	
ž	33	Total net assets or fund balances			11,612,249.	33	21,201,609.
	34	Total liabilities and net assets/fund balances			12,470,883.	34	24,970,740.
				I			Form <b>990</b> (2016)

WILLIAM J. BRENNAN CENTER FOR

JUSTICE, INC.

Form **990** (2016)

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Form 990 (2016)

Part X Balance Sheet

WILLIAM	J	•	BRENNAN	CENTER	FOR
JUSTICE	,	IN	VC.		

	1990 (2016) JUSTICE, INC.	13-	3839	293	Pag	<sub>je</sub> 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					Χ
					_	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,092</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,930		
3	Revenue less expenses. Subtract line 2 from line 1	3		,162		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11	,612		
5	Net unrealized gains (losses) on investments	5		484	, 89	99.
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 in Schedule O)	9		-57	<mark>,</mark> 79	92.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	21	,201	,60	09.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
				`	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	,			
	consolidated basis, or both:					
	Separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit			
	Act and OMB Circular A-133?			3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired aud	dit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2016)

632012 11-11-16

SCHEDULE A	.							OMB No. 1545-0047
(Form 990 or 990-EZ)			rity Status an nization is a section 50 <sup>.</sup>					2016
			47(a)(1) nonexempt cha			or a section		2010
Department of the Treasury Internal Revenue Service			Attach to Form 990 or F					Open to Public Inspection
Name of the organizati			(Form 990 or 990-EZ) and NNAN CENTER		ions is at W	ww.irs.gov/fo		identification number
Nume of the organization		ICE, INC.		POR				3-3839293
Part I Reason			All organizations must co	omplete th	is part.) Se	e instruction		
The organization is not a	a private found	lation because it is:	(For lines 1 through 12, c	heck only	one box.)			
1 🛄 A church, co	nvention of chi	urches, or association	on of churches described	d in sectio	on 170(b)(*	I)(A)(i).		
2 A school des	cribed in <b>secti</b>	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Forn	n 990 or 9	90-EZ).)			
· · ·	•		anization described in <b>s</b> e					
		ation operated in co	njunction with a hospital	described	d in <b>sectio</b>	n 170(b)(1)(A	)(iii). Enter	the hospital's name,
city, and stat								and the
	•	or the benefit of a co Complete Part II.)	ollege or university owned	a or opera	ted by a g	overnmental	unit descrit	bed in
		-	mental unit described in a	section 17	70(h)(1)(A)	(v)		
			antial part of its support f				he general	public described in
		omplete Part II.)		5			5	
			(1)(A)(vi). (Complete Par	t II.)				
9 🗌 An agricultur	al research org	ganization described	l in section 170(b)(1)(A)(	ix) operate	ed in conju	inction with a	land-grant	college
or university	or a non-land-g	grant college of agric	culture (see instructions).	Enter the	name, city	/, and state o	f the colleg	e or
university:								
			e than 33 1/3% of its sup					
			ct to certain exceptions,					
		nplete Part III.)	e (less section 511 tax) fr		sses acqu	lifed by the o	ganization	alter Julie 30, 1975.
		• •	ively to test for public sa	fetv. See	section 50	)9(a)(4).		
<u> </u>	-	-	lively for the benefit of, to	•			arry out the	purposes of one or
			ed in section 509(a)(1) o					
lines 12a thro	ough 12d that o	describes the type o	of supporting organizatio	n and con	nplete line	s 12e, 12f, an	d 12g.	
a 🗌 Typel.As	upporting orga	anization operated, s	supervised, or controlled	by its sup	ported org	ganization(s),	typically by	giving
the suppor	ted organizatio	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or truste	ees of the s	upporting
		complete Part IV, So						
			d or controlled in connec					
		t the supporting org	anization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	ported
<u> </u>	. ,	•	g organization operated	in connec	tion with	and functions	lly integrate	ed with
••	-	•	b). You must complete I				iny integration	sa with,
	0		porting organization oper			-	rted organi	zation(s)
that is not	functionally int	egrated. The organi	zation generally must sat	tisfy a dist	ribution re	quirement an	d an attent	iveness
requiremer	nt (see instructi	ions). You must cor	nplete Part IV, Sections	A and D,	and Part	<b>v</b> .		
e Check this	box if the orga	anization received a	written determination fro	om the IRS	that it is a	а Туре I, Туре	II, Type III	
			onally integrated support	ing organi	zation.			
f Enter the number	• •	•						
g Provide the follow (i) Name of supp		n about the supporte (ii) EIN	ed organization(s). (iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount o	monetarv	(vi) Amount of other
organization		(.,	(described on lines 1-10	in your governi Yes	ng document? No	support (see in	-	support (see instructions)
			above (see instructions))					
Total								
LHA For Paperwork Re	duction Act N	lotice, see the Inst	ructions for Form 990 o	r 990-EZ.	632021 09-	21-16 <b>Sche</b>	dule A (For	m 990 or 990-EZ) 2016

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## Schedule A (Form 990 or 990 EZ) 2016 JUSTICE, INC.

Part II

13-3839293 Page 2

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.)

<u>Sec</u>	ction A. Public Support					-	
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	9507981.	8769280.	15317113.	14401649.	24064835.	72060858.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	9507981.	8769280.	15317113.	14401649.	24064835.	72060858.
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)						12714593.
6	Public support. Subtract line 5 from line 4.						59346265.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4	9507981.	8769280.	(c)2014 15317113.	14401649.	24064835.	72060858.
-	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	21,392.			2,765.	28,995.	53,152.
9	Net income from unrelated business	,			,		
·	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	5,491.	198,211.	4,058.	280.	266.535.	474,575.
11	Total support. Add lines 7 through 10	.,					72588585.
	Gross receipts from related activities,	etc (see instructio	ons)	•		12	
	First five years. If the Form 990 is for	•	,				
10	organization, check this box and <b>stor</b>	-			•		
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2016 (			colump (f))		14	81.76 %
	Public support percentage from 2015		•			15	77.59 %
	33 1/3% support test - 2016. If the c						7-
104	stop here. The organization qualifies						
h							
U	33 1/3% support test - 2015. If the c						
170	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac			-	-	-	
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes	•					
	more, and if the organization meets th						•
40	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 160, 1/a, or 171		and see instruction	

Schedule A (Form 990 or 990-EZ) 2016

632022 09-21-16

## Schedule A (Form 990 or 990-EZ) 2016 JUSTICE, INC.

#### 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.)

	on A. Public Support ar year (or fiscal year beginning in)	(a) 2010	(6) 0010	(c) 0014	(4) 0015	1000	16	
		<b>(a)</b> 2012	(b) 2013	(c) 2014	(d) 2015	(e) 20	16	(f) Total
	ifts, grants, contributions, and							
	embership fees received. (Do not							
	clude any "unusual grants.")							
	ross receipts from admissions, erchandise sold or services per-							
	rmed, or facilities furnished in							
	ny activity that is related to the							
	ganization's tax-exempt purpose							
<b>3</b> G	ross receipts from activities that							
ar	e not an unrelated trade or bus-							
in	ess under section 513							
<b>4</b> Ta	ax revenues levied for the organ-							
	ation's benefit and either paid to							
or	expended on its behalf							
5 Tł	ne value of services or facilities							
fu	rnished by a governmental unit to							
th	e organization without charge							
	otal. Add lines 1 through 5							
	mounts included on lines 1, 2, and							
	received from disqualified persons							
<b>b</b> An	nounts included on lines 2 and 3 received							
	m other than disqualified persons that ceed the greater of \$5,000 or 1% of the							
	nount on line 13 for the year							
	dd lines 7a and 7b							
	ublic support. (Subtract line 7c from line 6.)							
	on B. Total Support		•	•	•			
alenda	ar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 20	16	(f) Total
9 AI	mounts from line 6							
	ross income from interest,							
	vidends, payments received on							
se	ecurities loans, rents, royalties							
	nrelated business taxable income							
	ess section 511 taxes) from businesses							
•	quired after June 20 1075							
	dd lines 10a and 10b							
	et income from unrelated business							
	ctivities not included in line 10b,							
	hether or not the business is							
	gularly carried on							
	ther income. Do not include gain loss from the sale of capital							
as	ssets (Explain in Part VI.)			ļ				
	otal support. (Add lines 9, 10c, 11, and 12.)							
4 Fi	<b>rst five years.</b> If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3)	organization	I,
							<u></u>	►
	on C. Computation of Publ					<u> </u>		
	ublic support percentage for 2016 (I					15		%
	ublic support percentage from 2015					16		%
	on D. Computation of Inves		•					
	vestment income percentage for 20					17		%
<b>18</b> In	vestment income percentage from 2	2015 Schedule A,	Part III, line 17			18		%
19a 33	3 1/3% support tests - 2016. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, ar	nd line 17 is r	not
m	ore than 33 1/3% , check this box a	nd stop here. The	e organization qua	lifies as a publicly	supported organiz	ation		►
b 33	3 1/3% support tests - 2015. If the	organization did r	not check a box o	n line 14 or line 19a	a, and line 16 is mo	ore than 33	1/3%, and	
lin	e 18 is not more than 33 1/3%, che	ck this box and <b>s</b>	top here. The org	anization qualifies	as a publicly supp	orted orgar	nization	
	rivate foundation. If the organizatio							
	09-21-16						orm 990 or 9	
				16		-		-
312	11 758275 3128.000	) 201	16.05000	WILLIAM J	. BRENNAN	CENTE	R F 31	28 001

## Schedule A (Form 990 or 990-EZ) 2016 JUSTICE, INC.

Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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

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6 7 8 9a 9b 9c 10a 10b

Schedule A (Form 990 or 990-EZ) 2016

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17

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

Yes

No

#### WILLIAM J. BRENNAN CENTER FOR Schedule A (Form 990 or 990-EZ) 2016 JUSTICE, INC.

Pai	T IV Supporting Organizations (continued)			-
			Yes	
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			F
	below, the governing body of a supported organization?	11a		┢
	A family member of a person described in (a) above?	11b		╀
	A 35% controlled entity of a person described in (a) or (b) above?If "Yes" to a, b, or c, provide detail in Part VI. tion B. Type I Supporting Organizations	11c		L
			Yes	Γ
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			Γ
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			l
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			l
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			l
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			т
			Yes	ł
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			I
	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			l
	or management of the supporting organization was vested in the same persons that controlled or managed			ł
	the supported organization(s).	1		1
bec	tion D. All Type III Supporting Organizations		Yes	1
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		165	ł
•	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		1
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			İ
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how			l
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		I
3	By reason of the relationship described in (2), did the organization's supported organizations have a	_		İ
-	significant voice in the organization's investment policies and in directing the use of the organization's			l
	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		1
Sec	tion E. Type III Functionally Integrated Supporting Organizations			T
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions,	)_		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	structions	).	
2	Activities Test. Answer (a) and (b) below.		Yes	
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 Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b				l
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			l
	reasons for the organization's position that its supported organization(s) would have engaged in these			l
	activities but for the organization's involvement.	2b		ļ
	Parent of Supported Organizations. Answer (a) and (b) below.			I
3	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			l
3 a				1
а	trustees of each of the supported organizations? Provide details in Part VI.	3a		t
а		3a 3b		

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# Schedule A (Form 990 or 990 EZ) 2016 JUSTICE, INC. 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 qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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		
e 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 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional	/ integrate	d Type III supporting or	anization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2016

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Schedule A (Form 990 or 990 EZ) 2016 JUSTICE, INC.

	tV Type III Non-Functionally Integrated 509	(a)(3) Supporting Org		.5-5659295 Page7
Sect	ion D - Distributions		(continued)	Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exemption	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	he organization is responsive	9	
	(provide details in <b>Part VI</b> ). See instructions	5		
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii) Diatributable
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2016	Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
с	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, 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 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j and 4c			
8	Breakdown of line 7:			
<u>о</u> а				
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
е	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

632027 09-21-16

Schedule A	(Form 990 or 990-EZ) 20				CENTER	- 010		13-38	339293 <sub>Pa</sub>
Part VI	Part IV, Section A, lines line 1; Part IV, Section Section D, lines 5, 6, ar (See instructions.)	ormation. Provi s 1, 2, 3b, 3c, 4b, 4 D, lines 2 and 3; Pa	ide the 1c, 5a, 6 art IV, S	explanations re 5, 9a, 9b, 9c, 1 Section E, lines	1a, 11b, and 11 1c, 2a, 2b, 3a, a	c; Part IV and 3b; P	Section B, I art V, line 1;	17a or 17b; Part ines 1 and 2; Pa Part V, Section E	III, line 12; rt IV, Section C, 3, line 1e; Part V
32028 09-21-1	16				21		Scł	nedule A (Form	990 or 990-EZ)
31211	758275 3128	.000	201	6.05000		. J. Е	RENNAN	CENTER	F 3128_0

#### SCHEDULE C (Form 990 or 990-EZ)

## 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. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. 2016 Open to Public

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

If the organization answered '	"Yes," on Form 99	0. Part IV. line 3. or	· Form 990-EZ. Part \	Ine 46 (Political	Campaign Activities), ther
		-,,		.,	e

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

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

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

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

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

Nan	ne of orga	anization WILLIAM	J. BRENNAN CENT	ER FOR	E	nployer identification number
		JUSTICE	, INC.			13-3839293
Pa	art I-A	Complete if the org	anization is exempt und	er section 501(c)	or is a section 527	7 organization.
2	Political	campaign activity expendit	ation's direct and indirect politic ures gn activities		Þ	
Pa	art I-B	Complete if the org	anization is exempt und	er section 501(c)(	3).	
1	Enter th	e amount of any excise tax	incurred by the organization und	ler section 4955		►\$
2	Enter th	e amount of any excise tax	incurred by organization manage	ers under section 4955	•	► \$
3	If the or	ganization incurred a sectio	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a c	correction made?				Yes No
b	If "Yes."	' describe in Part IV.				
		· · ·	anization is exempt und	• 7	•	
1	Enter th	e amount directly expended	d by the filing organization for se	ction 527 exempt funct	ion activities	►\$
2		0 0	ization's funds contributed to ot	0		
						<b>\$</b>
3		• •	. Add lines 1 and 2. Enter here a	-		
	line 17b	)			P	►\$
4			1120-POL for this year?			
5			nployer identification number (El		-	
	-		tion listed, enter the amount pair omptly and directly delivered to a			-
		-	additional space is needed, prov			arate segregated fund of a
	pontiou				1	m (a) Amount of political
		<b>(a)</b> Name	<b>(b)</b> Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter	contributions received and

Schedule C (Form 990 or 990-EZ) 2016

632041 11-10-16

13-3839293 Page 2

Part II-A Complete if the org section 501(h)).	anization is exe	empt under sectio	n 501(c)(3) and fil	ed Form 5768 (el	lection under			
A Check    if the filing organiza	tion belongs to an al	ffiliated group (and list ir	n Part IV each affiliated	group member's nam	e, address, EIN,			
		and "limited control" pro	ovisions apply.					
Limi	ts on Lobbying Exp			<b>(a)</b> Filing organization's totals	(b) Affiliated group totals			
<b>1a</b> Total lobbying expenditures to influ	uence public opinion	(grass roots lobbying)		3,311.				
<b>b</b> Total lobbying expenditures to influ				42,665.				
c Total lobbying expenditures (add li	nes 1a and 1b)			45,976.				
d Other exempt purpose expenditure	es			14,884,553.				
e Total exempt purpose expenditure				14,930,529.				
f Lobbying nontaxable amount. Ente		he following table in bot	h columns.	896,526.				
If the amount on line 1e, column (a) o		bbying nontaxable am						
Not over \$500,000		of the amount on line 1e.						
Over \$500,000 but not over \$1,000		000 plus 15% of the exc						
Over \$1,000,000 but not over \$1,5		000 plus 10% of the exc						
	Over \$1,500,000 but not over \$17,000,000         \$225,000 plus 5% of the excess over \$1,500,000.           Over \$17,000,000         \$1,000,000.							
Over \$17,000,000	\$1,000	,000.						
g Grassroots nontaxable amount (en	iter 25% of line 1f)			224,132.				
h Subtract line 1g from line 1a. If zero	,			0.				
i Subtract line 1f from line 1c. If zero	o or less, enter -0-			0.				
j If there is an amount other than ze	ro on either line 1h c	r line 1i, did the organiz	ation file Form 4720		•			
reporting section 4911 tax for this	year?			[	Yes No			
(Some organizations th	hat made a section	veraging Period Under 501(h) election do not rrate instructions for lin	have to complete all	of the five columns b	elow.			
	Lobbying Exp	enditures During 4-Yea	ar Averaging Period					
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2013	<b>(b)</b> 2014	(c) 2015	<b>(d)</b> 2016	<b>(e)</b> Total			
2a Lobbying nontaxable amount	699,191	. 771,277.	827,035.	896,526.	3,194,029			
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					4,791,044			
<b>c</b> Total lobbying expenditures	52,063	. 32,302.	64,131.	45,976.	194,472			
d Grassroots nontaxable amount	174,798	. 192,819.	206,759.	224,132.	798,508			
e Grassroots ceiling amount (150% of line 2d, column (e))					1,197,762			
f Grassroots lobbying expenditures	2,202	. 157.	18,634.	3,311.	24,304			

Schedule C (Form 990 or 990-EZ) 2016

632042 11-10-16

#### 13-3839293 Page 3

#### Schedule C (Form 990 or 990 EZ) 2016 JUSTICE, INC. Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(t	<b>)</b>
of th	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5	ō), or se	ction	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				ne 3, is
1	answered "Yes." Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
-	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)				
-	t IV Supplemental Information				
Prov	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-A	A, lines 1 a	and 2 (see	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990 or 990-EZ) 2016

632043 11-10-16

<b>(Forn</b>	HEDULE D n 990) ment of the Treasury	Complete if the org Part IV, line 6, 7, 8, 9, 10	al Financial Statements anization answered "Yes" on Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.	OMB No. 1545-0047 <b>2016</b> Open to Public Inspection
	Revenue Service		rm 990) and its instructions is at www.irs.gov СЕМТЕВ FOR	
Nam	e of the organizati	JUSTICE, INC.	CENTER FOR	Employer identification number 13-3839293
Par	t I Organiza		ed Funds or Other Similar Funds or	
		n answered "Yes" on Form 990, Part IV, lin		
	organization		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at er	nd of year		
2		f contributions to (during year)		
3		f grants from (during year)		
4		t end of year		
5			L I I I I I I I I I I I I I I I I I I I	inds
Ū	-		exclusive legal control?	
6			dvisors in writing that grant funds can be used	
-	•		or donor advisor, or for any other purpose confi	•
Par			ganization answered "Yes" on Form 990, Part I	
1	Purpose(s) of cons	servation easements held by the organizati	ion (check all that apply).	
		of land for public use (e.g., recreation or e		lly important land area
		f natural habitat	Preservation of a certified	historic structure
	Preservation	of open space		
2	Complete lines 2a	through 2d if the organization held a quali	fied conservation contribution in the form of a d	conservation easement on the last
	day of the tax year	r.		Held at the End of the Tax Yea
а	Total number of co	onservation easements		2a
b				
с			ucture included in (a)	
d			after 8/17/06, and not on a historic structure	
	listed in the Nation	al Register		2d
3			leased, extinguished, or terminated by the orga	anization during the tax
	year 🕨			
4	Number of states	where property subject to conservation ea	sement is located	
5		tion have a written policy regarding the pe		
	violations, and enf	orcement of the conservation easements i	t holds?	Yes 📖 N
6	Staff and voluntee	r hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserva	tion easements during the year
7	Amount of expens	es incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation e	easements during the year
	▶\$			
8			ve satisfy the requirements of section 170(h)(4)	
-				
9			ion easements in its revenue and expense stat	
			tion's financial statements that describes the c	organization's accounting for
Da	conservation ease		f Art, Historical Treasures, or Other	r Similar Assots
1 41		the organization answered "Yes" on Form		Similar Assets.
10			SC 958), not to report in its revenue statement	and balance aboat works of art
Id	-			
		those to its financial statements that descri	hibition, education, or research in furtherance of these these items	of public service, provide, in Part An
h			SC 958), to report in its revenue statement and	balance sheet works of art historic
5	-		ducation, or research in furtherance of public s	
	relating to these ite		ducation, or research in furtherance of public s	service, provide the following amount
	•			► \$
2			asures, or other similar assets for financial gair	
-		unts required to be reported under SFAS 1		., F. Strac
я	-			▶ \$
		eduction Act Notice, see the Instruction		Schedule D (Form 990) 20
	08-29-16			(, 0,, 0, 0, 0, 10
	-		30	

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		J. BRENNA	N CENTER 1	FOR						
	dule D (Form 990) 2016 JUSTICE	-					13-38			је <b>2</b>
Par	t III Organizations Maintaining C	collections of A	rt, Historical T	reasures, or O	ther	Simil	ar Asse	ts(contine	ued)	
3	Using the organization's acquisition, accessi (check all that apply):	on, and other record	ls, check any of the	e following that are	a sign	iificant	use of its	collection	items	
а	Public exhibition	d	I 🛄 Loan or ex	change programs						
b	Scholarly research	e	• Dther							
с	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how they further	the organization's	exemp	t purp	ose in Par	t XIII.		
5	During the year, did the organization solicit of	r receive donations	of art, historical tre	asures, or other sir	nilar as	ssets				
	to be sold to raise funds rather than to be ma	aintained as part of t	the organization's o	collection?				Yes		No
Par	t IV Escrow and Custodial Arran									
	reported an amount on Form 990, Pa		5				, ,	,		
-1a	Is the organization an agent, trustee, custod		diary for contributio	ons or other assets	not ind	cluded				
	on Form 990, Part X?		•					Yes	X	No
h	If "Yes," explain the arrangement in Part XIII									
5		and complete the lo	nowing table.					Amount		
	Decimping belonce					10		Amount		
	Beginning balance					1c				
	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
	Did the organization include an amount on F					?	L	Yes		No
	If "Yes," explain the arrangement in Part XIII.									
Par	t V Endowment Funds. Complete i	f the organization an						i		
		(a) Current year	(b) Prior year	(c) Two years bac			years back			
	Beginning of year balance	1,784,464.	1,999,940	. 2,101,68	7.	1,9	924,201.	1,	688,0	94.
b	Contributions	867,667.								
с	Net investment earnings, gains, and losses	346,418.	-108,199	. 14,59	1.	3	367,564.		336,1	.59.
d	Grants or scholarships									
	Other expenditures for facilities									
	and programs	89,372.	94,412	. 101,63	8.	1	176,182.		92,1	.11.
f	Administrative expenses	9,808.					, 13,896.			941.
g	End of year balance	2,899,369.					L01,687.		924,2	
2	Provide the estimated percentage of the cur					-,-	,	-,	,-	
	Board designated or quasi-endowment	91.44	%	(a)) Held as.						
	Permanent endowment <b>6</b> .89		70							
		<sup>%</sup> 1.67 %								
С										
_	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse	ession of the organization	ation that are held	and administered f	or the	organi	zation	г		
	by:									No
	(i) unrelated organizations							3a(i)		X
	(ii) related organizations									Х
b	If "Yes" on line 3a(ii), are the related organization			?				3b		
4	Describe in Part XIII the intended uses of the		owment funds.							
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answere	d "Yes" on Form 990	0, Part IV, line 11a.	See Form 990, Pa	t X, lin	e 10.				
	Description of property	(a) Cost or o basis (investr		st or other (o	•	umulate ciation		<b>(d)</b> Book	value	
1a	Land									
	Buildings									
	Leasehold improvements		2.0	80,929.	6	5,0	29.	2,015	5.90	0 -
				22,757.		<u>5,0</u> 1,3	17.	$\frac{1,013}{1,161}$	41	0
	Equipment		<u> </u>	<u> </u>	20	· <b>-</b> ,	<u>+ / •</u>	<u>, 101</u>	., = =	<u>.</u>
	Other							2 1 7 7	21	<u> </u>
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line	10c.)				3,177		
							Schedule	D (Form	990) 2	2016

Schedule D (Form 990) 2016 JUSTICE, IN	с.		13	-3839293 <sub>Page</sub>
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation: Cost or end	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A) (B)				
(B) (C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990, Part IV	, line 11c. See Form 990,	Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of v	aluation: Cost or end	l-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets.				
Complete if the organization answered "Yes"	on Form 990 Part IV	line 11d See Form 990	Part X line 15	
	Description	, inte 114. dee 1 onn 330,	Tart X, inte To.	(b) Book value
(1)	•			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)			
Part X Other Liabilities.				
Complete if the organization answered "Yes"	on Form 990, Part IV		n 990, Part X, line 25	
<b>1.</b> (a) Description of liability		(b) Book value	4	
(1) Federal income taxes			-	
(2)			-	
(3)			-	
(4)			4	
(5)			-	
(6)			-	
(7)			-	
(8) (9)				
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line	25)			
<ol> <li>Liability for uncertain tax positions. In Part XIII, provide</li> </ol>		ote to the organization's	I financial statements	that reports the
organization's liability for uncertain tax positions under				
	, , . <b>.</b>			edule D (Form 990) 20 <sup>-</sup>

	WILLIAM J. BRENNAN CENTER	FOR	
Sche	dule D (Form 990) 2016 JUSTICE , INC .		13-3839293 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statem	nents With Reve	enue per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Pa	t XII Reconciliation of Expenses per Audited Financial Stater	ments With Exp	enses per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.	
1	Total expenses and losses per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	<b>2</b> b	
с	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		
Pa	t XIII Supplemental Information.		

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

PART X, LINE 2:

MANAGEMENT	HAS	REVIEWED	THE	TAX	POSITIONS	FOR	EACH	OF	$\mathbf{THE}$	OPEN	TAX	YEARS

(2014-2016) OR EXPECTED TO BE TAKEN IN THE CENTER'S 2017 TAX RETURN AND

HAS CONCLUDED THAT THERE ARE NO SIGNIFICANT UNCERTAIN TAX POSITIONS THAT

WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS.

632054 08-29-16

(Form 990 or 990-EZ) Department of the Treasury	ental Information Regarding e organization answered "Yes" on organization entered more than \$1 Attach to Form 990 about Schedule G (Form 990 or 990-EZ)	Form 5,000 ) or Fo	990, F on Fo rm 99	Part IV, line 17, 18, c rm 990-EZ, line 6a. 0-EZ.	or 19,	, or if the	OMB No. 1545-0047
	I J. BRENNAN CENTER						entification number 0293
	- Complete if the organization answe	ered "Y	es" o	n Form 990, Part IV, I	line 1		
<ol> <li>Indicate whether the organization rai</li> <li>a Mail solicitations</li> <li>b Internet and email solicitations</li> <li>c Phone solicitations</li> <li>d In-person solicitations</li> <li>2 a Did the organization have a written of key employees listed in Form 990, F</li> <li>b If "Yes," list the 10 highest paid indic compensated at least \$5,000 by the</li> </ol>	sed funds through any of the followin e Solicita s f Solicita g Special pr oral agreement with any individual Part VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (inclue	non-g gover aising ding o ional 1	overnment grants nment grants events fficers, directors, trus fundraising services?	stees	Ye	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or con contrib	aiser ustody	(iv) Gross receipts from activity	to (o	Amount paid or retained by) fundraiser ted in col. <b>(i)</b>	(vi) Amount paid to (or retained by) organization
		Yes	No				
Total							
3 List all states in which the organization or licensing.			oution	s or has been notified	d it is	exempt from	registration
LHA For Paperwork Reduction Act Not	ice, see the Instructions for Form	990 or	990-	EZ. S	Sche	dule G (Form	990 or 990-EZ) 2016

632081 09-12-16

Schedule G (Form 990 or 990-EZ) 2016 JUSTICE, INC.

13-3839293 Page 2

	-				-		1 "Yes" on Form 990, )-EZ, lines 1 and 6b. L				
-	-				(a) Event #1 BRENNAN LEGACY AWA	RD	<b>(b)</b> Event #2		(c) Other events NONE	(d) Total ev (add col. (a) t col. (c)	hrough
					(event type)		(event type)		(total number)		)
	s				1,205,15	3.				1,205,	,153
ior	utions				1,104,33	8.				1,104,	, 338
line	(line 1 mir	ius line 2	<u>2)</u>		100,81	5.		_		100,	,815
	es										
sts	osts				123,38	3.				123,	, 383
rag	erages										
	xpenses					3.				99	,703
							I		<b></b>	223	
		-		-						-122	
							n 990, Part IV, line 19			•	
Fo	n Form 99	0-EZ, line	e 6a.								
					(a) Bingo		(b) Pull tabs/instant bingo/progressive bing		(c) Other gaming	(d) Total gami col. (a) through	
	ə	<u></u>									
	es							_			
sts	osts							_			
ser	xpenses .	<u></u>									
	or				└── Yes └── No	- %	└── Yes └── No	% L [	Yes % No	) 	
su	e summar	y. Add lir	nes 2 tł	hrougl	h 5 in column (d)				►		
om	come sum	ımary. Sı	ubtract	t line 7	r from line 1, column	(d)					
		-					states?			Yes	No
							erminated during the		ear?	Yes	No
									Schedule G (Fe	orm 990 or 990-	EZ) 201
										Schedule G (Fo	Schedule G (Form 990 or 990-

35 2016.05000 WILLIAM J. BRENNAN CENTER F 3128\_001

WILLIAM	J.	BRENNAN	CENTER	FOR
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Sch	edule G (Form 990 or 990-EZ) 2016 JUSTICE , INC .	13-38	3929	3 Page 3
	Does the organization conduct gaming activities with nonmembers?	L	Yes	No
	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?	C	Yes	🗌 No
13	Indicate the percentage of gaming activity conducted in:			
a	The organization's facility		3a	%
	An outside facility		3b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and record			
	Address			
<b>1</b> 5a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	No No
b	If "Yes," enter the amount of gaming revenue received by the organization $\blacktriangleright$ \$ and the amou	nt		
	of gaming revenue retained by the third party <b>&gt;</b>			
c	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Gaming manager compensation 🕨 \$			
	Description of services provided			
	Director/officer			
17	Mandatory distributions:			
	I is the organization required under state law to make charitable distributions from the gaming proceeds to			
-	retain the state gaming license?	Γ	Yes	No No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	1 the		
	organization's own exempt activities during the tax year 🕨 \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and P	art III, line:	s 9, 9b,	10b, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions			
6320	83 09-12-16 Schedule (	َ (Form 9	90 or 99	0-EZ) 2016
_0	36			,

14031211 758275 3128.000

2016.05000 WILLIAM J. BRENNAN CENTER F 3128\_001

	WILLIAM	J.	BRENNAN	CENTER	FOR
990-EZ)	JUSTICE	, IÌ	NC.		

Schedule G (Form 990 or 990-EZ)       JUSTICE, INC.       13-32         Part IV       Supplemental Information (continued)       13-32	839293 Page 4
Part IV Supplemental Information (continued)	
632084 04-01-16	Form 990 or 990-EZ)

14031211 758275 3128.000

2016.05000 WILLIAM J. BRENNAN CENTER F 3128\_001

SCHEDULE I (Form 990)		OMB No. 1545-0047 2016 Open to Public						
Internal Revenue Service			ion about Schedule I			t www.irs.gov/form99	0.	Inspection
Name of the organizati	ion WILLIAM J JUSTICE,		I CENTER FOR					Employer identification number 13-3839293
Part I General Ir	nformation on Grants a							
1 Does the organiz	zation maintain records	to substantiate the	e amount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the selec	
criteria used to a	award the grants or assis	stance?						Yes 🔀 No
	IV the organization's pro		¥¥¥					
	d Other Assistance to hat received more than t	-				anization answered "א	/es" on Form 990, Par	t IV, line 21, for any
	ddress of organization vernment	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
							RESEARCH FOR CRIMINAL JUSTICE REPORT.	
2 Enter total numb	per of section 501(c)(3) a	Ind government or	ganizations listed in th	ne line 1 table			I	▶ 1.
	per of other organization	•	•	······	<u></u>			0.
LHA For Paperwork	Reduction Act Notice	, see the Instruct	ions for Form 990.					Schedule I (Form 990) (2016)

Schedule I (Form 990) (2016)

JUSTICE, INC.

13-3839293

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

sc	HEDULE J	Compensation Information	1	OMB No.	1545-00	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	16	<u> </u>
•	-	Compensated Employees		20	IU	)
Dene	rtment of the Treasurv	<ul> <li>Complete if the organization answered "Yes" on Form 990, Part IV, line 23.</li> <li>Attach to Form 990.</li> </ul>		Open to	Publ	ic
	al Revenue Service	Information about Schedule J (Form 990) and its instructions is at www.irs.gov/for	rm990.	Inspe	ction	
Nan	ne of the organizatio	MULLIAM J. BRENNAN CENTER FOR	Employer ic			mber
		JUSTICE, INC.	13-3	83929	3	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a	Check the appropr	iate box(es) if the organization provided any of the following to or for a person listed on Form	ı 990,			
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or o	charter travel Housing allowance or residence for perso	nal use			
	Travel for com	panions Payments for business use of personal re	sidence			
	Tax indemnific	ation and gross-up payments Health or social club dues or initiation fee	s			
	Discretionary	spending account Personal services (such as, maid, chauffe	ur, chef)			
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
	reimbursement or p	provision of all of the expenses described above? If "No," complete Part III to explain		1b		
2	Did the organizatio	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2	Х	
3	Indicate which, if a	ny, of the following the filing organization used to establish the compensation of the organization	ation's			
	CEO/Executive Dire	ector. Check all that apply. Do not check any boxes for methods used by a related organizat	ion to			
	establish compens	ation of the CEO/Executive Director, but explain in Part III.				
	X Compensation	n committee X Written employment contract				
	X Independent	compensation consultant X Compensation survey or study				
	Form 990 of o	ther organizations X Approval by the board or compensation c	ommittee			
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 re	lated organization:				
а		e payment or change-of-control payment?				X
b		ceive payment from, a supplemental nonqualified retirement plan?				X
С	Participate in, or re	ceive payment from, an equity-based compensation arrangement?		4c		X
	If "Yes" to any of lir	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
		c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	-	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	on			
	contingent on the r					37
а	The organization?			5a		X
b		ation?		<b>5</b> b		X
		or 5b, describe in Part III.				
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	on			
	contingent on the r					37
						X
b		ation?		6b		X
		or 6b, describe in Part III.				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment				37
		nes 5 and 6? If "Yes," describe in Part III		7		X
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to t				37
		eption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X
9		id the organization also follow the rebuttable presumption procedure described in				
		n 53.4958-6(c)?				
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Sched	ule J (Forr	n 990	) 2016

632111 09-09-16

Schedule J (Form 990) 2016

13-3839293

Page 2

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive	(iii) Other reportable	compensation	Denents	(B)(I)-(D)	reported as deferred on prior Form 990
			compensation	compensation				
(1) MICHAEL WALDMAN	(i)	373,968.	0.	0.	16,615.	20,210.	410,793.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JOHN ANTHONY BUTLER	(i)	217,203.	0.	0.	15,641.	8,046.	240,890.	0.
VP/COO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JOHN KOWAL	(i)	227,378.	0.	0.	16,464.	14,322.	258,164.	0.
VICE PRESIDENT PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) WENDY WEISER	(i)	203,929.	0.	0.	14,956.	11,049.	229,934.	0.
DIRECTOR DEMOCRACY PROGRAM	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) VIVIEN WATTS	(i)	179,188.	0.	0.	13,507.	19,115.	211,810.	0.
VP/MANAGING DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JENNIFER WEISS-WOLF	(i)	169,128.	0.	0.	12,434.	17,999.	199,561.	0.
VP DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) JEANINE PLANT-CHIRLIN	(i)	167,819.	0.	0.	2,552.	10,559.	180,930.	0.
VP COMMUNICATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) LARRY NORDEN	(i)	171,401.	0.	0.	12,177.	7,761.	191,339.	0.
DEPUTY DIRECTOR DEMOCRACY	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) INIMAI CHETTAIR	(i)	165,590.	0.	0.	11,777.	8,355.	185,722.	0.
DIRECTOR JUSTICE PROGRAM	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) NICOLE AUSTIN-HILLERY	(i)	154,538.	0.	0.	11,800.	19,827.	186,165.	0.
DIRECTOR- DC OFFICE	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) FAIZA PATEL	(i)	154,420.	0.	0.	10,907.	533.	165,860.	0.
DIRECTOR LNS PROGRAM	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) MYRNA PEREZ	(i)	148,061.	0.	0.	11,013.	18,286.	177,360.	0.
DEPUTY DIRECTOR DEMOCRACY	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

WILLIAM	J.	BRENNAN	CENTER	FOR
JUSTICE	, II	NC.		

Schedule J (Form 990) 2016

Part III Supplemental Information

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

632113 09-09-16

(Fo	orm 990)	Complete if the ord	anizations	answered "Yes" o	n Form 990, Part IV, lines 2	9 or 30.	20	16	j
	tment of the Treasury	Attach to Form 990	-				Open To		ic
Interna	al Revenue Service				s instructions is at www.irs		Inspe		
Nam	e of the organization			I CENTER F	OR		identificati		mber
		JUSTICE, INC	•			1	3-3839	293	
Pa	rt I   Types of	Property							
			(a) Check if applicable		<b>(c)</b> Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) of determin ntribution a	-	S
1									
2		sures							
3	Art - Fractional inte	erests							
4		tions							
5		ehold goods							
6		nicles							
7									
8		ty		1.0					
9		y traded	X	10	67,072.	F.WA			
10		/ held stock							
11	Securities - Partner								
12		aneous							
13	Qualified conserva								
14		tion contribution - Other							
15		ential							
16		nercial							
17									
18									
19									
20		l supplies							
21									
22									
23		ns							
24 05		acts							
25	Other (	)							
26 07	, ` <u> </u>	)							
27	Other (	)							
28	Other (	)	ization durin	a the tax year for a	ontributions				
29		8283 received by the organ		• •					
	for which the organ	nization completed Form 82	200, Fait IV,	Donee Acknowled	gement 29			Yes	No
200	During the year di	d the ergenization receive h	v oontributi	on any proporty ray	oorted in Part I, lines 1 throu	ah 29 that it		162	NO
30a	0	•	2		d which isn't required to be u				
							30a		x
h		the arrangement in Part II.					508		
ы 31		•	policy that r	equires the review	of any nonstandard contribu	itions?	31		x
	-	÷ .		-	cit, process, or sell noncash				
JZd				-			32a		x
h	If "Yes," describe in	n Part II					J2d		
33	•		column (c) fo	or a type of propert	y for which column (a) is che	ecked			
00	describe in Part II.	aidh theport an amount in t			y to writer column (a) is che	oneu,			
	ueschue in Fait II.								

**Noncash Contributions** 

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

Schedule M (Form 990) (2016)

OMB No. 1545-0047

632141 08-23-16

SCHEDULE M

WILLIAM	J.	BRENNAN	CENTER	FOR
TITOMTOR	т.			

202 ~ ~ ~

(Form 990) (2016)	JUSTICE,	INC.			13-3839293	Page
Supplemental	Information.	Provide the information re	equired by Part I, li the number of iter	nes 30b, 32b, and 33 ns received, or a com	, and whether the organization of both. Also com	ation
-					Cobedula M /Farmer	
σ			ΛΛ		Schedule M (Form S	79U) (2
758275 31	28.000	2016.05000		J. BRENNAN	CENTER F 312	8_0
	Supplemental is reporting in Part this part for any ac	Supplemental Information. is reporting in Part I, column (b), the this part for any additional informatio	s reporting in Part I, column (b), the number of contributions, this part for any additional information.	Supplemental Information. Provide the information required by Part I, 1 is is reporting in Part I, outwork of contributions, the number of iter this part for any additional information.		Supplemental Information. Provide the information required by Part I, lines 300, 320, and 33, and whether the organize is reporting in Part I column (b), the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of both. Also contributions, the number of items received, or a combination of the number of items received, or a combination of the number of items received, or a combination of the number of items received, or a combination of the number of items received, or a combination of the number of items received, or a combination of the number of items received, or a combination of the number of items received, or a combination of the number of items received, or a combination of the number of items received, or a combination of the number of items rece

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

#### 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.



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

 WILLIAM J. BRENNAN CENTER FOR
 Employage

 JUSTICE, INC.
 13

Employer identification number 13-3839293

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE BRENNAN CENTER FOR JUSTICE AT NEW YORK UNIVERSITY SCHOOL OF LAW IS

A NONPARTISAN LAW AND POLICY INSTITUTE THAT SEEKS TO IMPROVE THE

AMERICAN SYSTEMS OF DEMOCRACY AND JUSTICE.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PREPARED BY A CPA FIRM AND IS THEN REVIEWED BY THE COO,

GENERAL COUNSEL, CONTROLLER OF THE ORGANIZATION AND THE AUDIT COMMITTEE OF

THE BOARD. IT IS THEN PRESENTED TO THE FULL BOARD FOR ITS REVIEW PRIOR TO

FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

EACH DECEMBER, THE CONFLICT OF INTEREST POLICY IS ISSUED AND PROVIDED TO

ALL MEMBERS FOR REVIEW. THE POLICY IS THEN DISCUSSED AND SIGNED BY ALL

MEMBERS.

FORM 990, PART VI, SECTION B, LINE 15: THE CHAIR OR CO-CHAIRS REVIEW THE PRESIDENT'S SALARY AND THE COO'S SALARIES ARE REVIEWED AND APPROVED BY THE COMPENSATION COMMITTEE, INFORMED BY MARKET-BASED COMPARABILITY DATA PREPARED BY INDEPENDENT COMPENSATION SPECIALISTS. ALL OTHER EMPLOYEE SALARIES ARE SET BY THE PRESIDENT, INFORMED BY AND WITHIN MARKET-BASED COMPENSATION RANGES BASED ON ANALYSES PERFORMED BY INDEPENDENT THIRD PARTY COMPENSATION SPECIALISTS. SALARY LEVELS ARE PART OF THE BOARD REVIEW AND APPROVAL OF THE BUDGET. ALL HIRES ARE INTRODUCED TO THE BOARD AT THE NEXT MEETING FOLLOWING THEIR HIRE.

Schedule O (Form 990 or 990-EZ) (2016)	Page <b>2</b>
Name of the organization WILLIAM J. BRENNAN CENTER FOR JUSTICE, INC.	Employer identification number 13-3839293
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
AK, AL, AR, AZ, CA, CT, FL, GA, HI, IL, KS, KY, MA, MD, MI, MN, MO, MS, NC,	NH, NJ, NY, OK, OR, PA
RI, SC, TN, UT, VA, WI, WV	
FORM 990, PART VI, SECTION C, LINE 18:	
A COPY OF THE 990 IS PROVIDED UPON REQUEST.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE GOVERNING DOCUMENTS AND OTHER DOCUMENTATION IS AVAILA	BLE UPON REQUEST.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
LOSS ON DISPOSAL OF FIXED ASSETS	-57,792.
PART XI, LINE 2C	
THE PROCESS BY WHICH THE ORGANIZATION APPOINTS A COMMITTE	E THAT ASSUMES
RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIA	L STATEMENT
AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAS NOT CHANGE	D FROM THE
PRIOR YEAR.	

Schedule O (Form 990 or 990-EZ) (2016) 46 2016.05000 WILLIAM J. BRENNAN CENTER F 3128\_001

SCHEDULE (Form 990)	990) Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.											
Department of the Internal Revenue Name of the	organization WILLIAM J. BR	► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. VILLIAM J. BRENNAN CENTER FOR VISTICE, INC. Employer ion 13-38										
	JUSTICE, INC.					13-	-3839	293				
Part I I	dentification of Disregarded Entities. Comp	lete if the organization answered "Yes"	on Form 990, Part IV, line 3	33.								
N	<b>(a)</b> lame, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state o foreign country)	or Total inco	me End-of-year	assets		<b>(f)</b> controlling entity	9			
	dentification of Related Tax-Exempt Organi	izations. Complete if the organization	answered "Yes" on Form 99	0, Part IV, line 34 b	ecause it had one o	or more relate	ed tax-ex	empt				
0	rganizations during the tax year. (a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	<b>(f)</b> Direct cor entit	ntrolling	conti	g) 512(b)(13) rolled ity?			
120 BROAD	ENTER STRATEGIC FUND - 03-0593698 WAY, SUITE 1750 NY 10271	TO ATTEMPT TO INFLUENCE PUBLIC POLICY ON ISSUES OF SOCIAL JUSTICE.	NEW YORK	501(C)(4)					x			
		_										
For Paperw	ork Reduction Act Notice, see the Instructi	ons for Form 990.				Sc	hedule F	(Form 99	) 2016			

632161 09-06-16 LHA

#### JUSTICE, INC. Schedule R (Form 990) 2016

13-	3839293	Page <b>2</b>

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Part III

(a)	(b)	(c)	(d)	(e)	(f)	(g)	()	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General managi partner	or Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Part IV

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Percentage ownership	(i Sec 512(t contr ent	(i) ction (b)(13) trolled tity?
		country)				455515		Yes	No
									$\square$
	1								
	1								

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Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X
Gift, grant, or capital contribution to related organization(s)	1b		X
Gift, grant, or capital contribution from related organization(s)	1c		X
	1d		X
Loans or loan guarantees by related organization(s)	1e		X
Dividends from related organization(s)	1f		X
Sale of assets to related organization(s)	1g		X
Purchase of assets from related organization(s)	1h		X
	1i		X
Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
Lease of facilities, equipment, or other assets from related organization(s)	1k		X
Performance of services or membership or fundraising solicitations for related organization(s)	11		X
Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
	1n		X
	10		X
Reimbursement paid to related organization(s) for expenses	1p		X
Reimbursement paid by related organization(s) for expenses	1q		X
Other transfer of cash or property to related organization(s)	1r		X
Other transfer of cash or property from related organization(s)	1s		X
CFOOLL CSFEL LFFSS FF OO	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?       1a         Receipt of (I) interest, (ii) annuities, (iii) royatiles, or (iv) rent from a controlled entity       1a         Gift, grant, or capital contribution to related organization(s)       1b         Loans or loan guarantees to or for related organization(s)       1d         Loans or loan guarantees by related organization(s)       1d         Dividends from related organization(s)       1f         Sale of assets to related organization(s)       1g         Dividends from related organization(s)       1g         Lease of assets to related organization(s)       1j         Lease of facilities, equipment, or other assets from related organization(s)       1j         Lease of facilities, equipment, or other assets from related organization(s)       1i         Performance of services or membership or fundraising solicitations for related organization(s)       1i         Performance of services or membership or fundraising solicitations by related organization(s)       1i         Sharing of paid employees with related organization(s)       1n         Reimbursement paid to related organization(s)       1n         Retires, equipment, mailing lists, or other assets with related organization(s)       1n         Sharing of facilities, equipment, mailing lists, or other assets with related	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?       1         Receipt of (I) Interest, (II) annuities, (III) royatiles, or (Iw) rent from a controlled entity       1         Gilt, grant, or capital contribution to related organization(s)       1         Leans or loan guarantees to or for related organization(s)       1         Loans or loan guarantees by related organization(s)       1         Dividends from related organization(s)       1         Dividends from related organization(s)       1         Dividends from related organization(s)       1         Exchange of assets to related organization(s)       1         Exchange of facilities, equipment, or other assets tor related organization(s)       1         Lease of facilities, equipment, or other assets from related organization(s)       1         Lease of facilities, equipment, or other assets from related organization(s)       1         Performance of services or membership or fundraising solicitations by related organization(s)       1         Performance of services or membership or fundraising solicitations by related organization(s)       1         Sharing of paid employees with related organization(s)       1         Reimbursement paid to related organization(s)       1         Reimbursement paid to related organization(s) for expenses       1

(a) Name of related organization	<b>(b)</b> Transaction type (a·s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1)			
(2)			
<u>(</u> 3)			
_(5)			
<u>(6)</u>	40		
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#### Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a)	(b)	(c)	(d)	(e	e) all	(f)	(g)		ר)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e Are a partners 501(c orgs Yes	s sec. )(3) 5.? <b>No</b>	Share of total income	Share of end-of-year assets	Dispr tior alloca <b>Yes</b>	opor- nate tions?		General o managin partner <sup>2</sup> Yes NC	or Percentage ownership

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# WILLIAM J. BRENNAN CENTER FOR JUSTICE, INC.

Part VII	Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

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(Rev. January 2017)

Department of the Treasury

Internal Revenue Service

### Application for Automatic Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

#### Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	WILLIAM J. BRENNAN CENTER FOR JUSTICE, INC.			Employer identification number (EIN) or		
					13-3839293	
File by the due date for filing your return. See	for Number, street, and room or suite no. If a P.O. box, see instructions.			Social se	Social security number (SSN)	
instructions	City, town or post office, state, and ZIP code. For a NEW YORK, NY 10271	foreign add	lress, see instructions.			
Enter the	Return Code for the return that this application is for (1	file a separa	te application for each return)			01
Application		Return	Application			Return
Is For		Code	ls For			Code
Form 990 or Form 990-EZ		01	Form 990-T (corporation)			07
Form 990-BL		02	Form 1041-A			08
Form 4720 (individual)		03	Form 4720 (other than individual)			09
Form 990-PF		04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 6069			11
Form 990-T (trust other than above) JOHN ANTHONY BI		06	Form 8870			12
box  1 I re for	is for a Group Return, enter the organization's four digi . If it is for part of the group, check this box ▶ equest an automatic 6-month extension of time until the organization named above. The extension is for the calendar year or X tax year beginningJUL 1, 2016	and atta	ch a list with the names and EINs o Y 15, 2018 , to file	f all memb e the exen		nsion is for.
2 If t	If the tax year entered in line 1 is for less than 12 months, check reason:     Initial return     Final return     Final return					
3a lft	his application is for Forms 990-BL, 990-PF, 990-T, 472	0, or 6069,	enter the tentative tax, less any			
no	nrefundable credits. See instructions.			3a	\$	0.
b lft	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and					
est	estimated tax payments made. Include any prior year overpayment allowed as a credit.			3b	\$	0.
c Ba	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,					_
by using EFTPS (Electronic Federal Tax Payment System).		. See instru	ctions.	3c	\$	0.
instructio	If you are going to make an electronic funds withdrawa ons. For Privacy Act and Paperwork Reduction Act Notice		· ·	3453-EO a		9-EO for payment 868 (Rev. 1-2017)
	TO FIVACY ACT and Paperwork Reduction ACT NOTICE	, see instr	ucuons.		F0111 8	000 (Rev. 1-2017)

Entor filor's identifying number