efile Public Visual Render ObjectId: 001 - Submission: 2015-01-16 TIN: 20-5478191 OMB No. 1545 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundation) Do not enter social security numbers on this form as it may be made public. Open to Public Department of the Treasury ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2019 and ending 12-31-2019 D Employer identification number C Name of organization B Check if applicable: PROCLAIMING JUSTICE TO THE NATIONS INC 20-3144206 Name change Initial return Doing business as Final return/terminated E Telephone number Amended return Number and street (or P.O. box if mail is not delivered to street address) Application pending (615) 778-0202 City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ 1,313,758 F Name and address of principal officer: **H(a)** Is this a group return for LAURIE MOORE Yes No subordinates? 1858 WILSON PIKE **H(b)** Are all subordinates FRANKLIN, TN 37067 included? Tax-exempt status: 501(c)(3) If "No," attach a list. (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW.PJTN.ORG **K** Form of organization: lacktriangledown Corporation lacktriangledown Trust lacktriangledown Association lacktriangledown Other lacktriangledownL Year of formation: 2005 M State of legal domicile: TN Summary 1 Briefly describe the organization's mission or most significant activities: TO PROMOTE AN UNDERSTANDING AND/OR UNITY WITHIN THE CHRISTIAN AND JEWISH FAITHS AND TO COMBINE EDUCATION, SUPPORT, AND ENCOURAGEMENT TO HELP INDIVIDUALS AND GROUPS BUILD STRONG RELATIONSHIPS Activities & Governance WITHIN THE CHRISTIAN AND JEWISH COMMUNITIES AND WITH THE STATE OF ISRAEL Check this box lacktriangle if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . 9 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2019 (Part V, line 2a) Total number of volunteers (estimate if necessary) . 8 5 Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 39 7h **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . . . 1,000,673 1,294,353 Program service revenue (Part VIII, line 2g) 10,985 19,405 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,011,658 1,313,758 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 42,665 43,032 Benefits paid to or for members (Part IX, column (A), line 4) . . Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 297,666 326,896 16a Professional fundraising fees (Part IX, column (A), line 11e) . Total fundraising expenses (Part IX, column (D), line 25) 209,914 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 819,643 1,105,392 1,475,320 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,159,974 Revenue less expenses. Subtract line 18 from line 12 $\,$. -148,316 -161,562 Assets or d Balances Beginning of Current Year **End of Year** 47,105 Total assets (Part X, line 16) . 21,660 21 Total liabilities (Part X, line 26) . 48,896 185,013 -1,791 Net assets or fund balances. Subtract line 21 from line 20 $\,$. -163,353 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign LAURIE MOORE President Here Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check 🔲 if P00105858 Paid self-employed Firm's name FIRM SPAIN & HIGGINBOTHAM CPA GROUP PLLC Firm's EIN > 56-2317869 **Preparer** Firm's address ▶ 1127 W MAIN ST **Use Only** Phone no. (615) 794-8100 FRANKLIN, TN 37064 May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2019) Cat. No. 11282Y

Forn	n 990 (2019)					Page 2
Pa	Statement of Pro	gram Service Ac	complishments			
	Check if Schedule O co	ntains a response or	note to any line in t	his Part III		🔽
1	Briefly describe the organizat	ion's mission:				_
SUP	PROMOTE AN UNDERSTANDII PORT, AND ENCOURAGEMEN JEWISH COMMUNITIES AND	T TO HELP INDIVID	DUALS AND GROUPS			
2	Did the organization undertak the prior Form 990 or 990-E2		-	the year which were	not listed on	Yes V No
	If "Yes," describe these new	services on Schedule	e O.			
3	Did the organization cease co services?	nducting, or make si	gnificant changes in l	now it conducts, any	orogram · · · · ·	Yes V No
	If "Yes," describe these chan	ges on Schedule O.				
4	Describe the organization's presented by the total expenses, and reven	and 501(c)(4) organi	zations are required	to report the amount		
4a	(Code:) (Expenses \$	711,737 including gran	nts of \$) (Revenue \$)
	PRODUCTION AND BROADCASTIN THE DEFENSE OF THE NATION OF			ICOURAGE JEWISH AND C	HRISTIAN FAITHS TO UNIT	E TOGETHER AND COME TO
4b	(Code:) (Expenses \$	191,962 including grad	nts of \$) (Revenue \$)
	PJTN'S GOAL FOR THIS INITIATIVE CHRISTIAN BIAS. WE USE THE INI NOT BIASED AND REFLECT THE VA	ORMATION TO EDUCATE	PARENTS, EDUCATORS A			
4c	(Code:)(Expenses \$	63,734 including grad	nts of \$) (Revenue \$)
	THE NRB DINNER SERVED TO ENC ANTISEMITISM.	OURAGE JEWISH AND CH	HRISTIAN FAITHS TO UNIT	E TOGETHER AND COME T	O THE DEFENSE OF THE N	ATION OF ISRAEL AGAINST
4d	Other program services (De	escribe in Schedule C).)			
	(Expenses \$		grants of \$	43,032) (Reve	nue \$)
4e	Total program service exper	nses 🕨 1,0	37,548			
						Form 990 (2019)

Form 990 (2019) Page 3 **Checklist of Required Schedules** Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Yes 1 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🐿 . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Νo 3 candidates for public office? If "Yes," complete Schedule C, Part I 🥦 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 为 4 Yes 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 Νo 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 Νo 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Νo 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part Il 🐯 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Nο 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 Νo 9 negotiation services? If "Yes," complete Schedule D, Part IV 🥦 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, Νo permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V 🐒 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.

Yes

Yes

Yes

Nο

Nο

Nο

Nο

Nο

Νo

Νo

Nο

Nο

Νo

11a

11b

11c

11d

11e

11f

12a

12b

13

14a

14b

15

16

17

18

19

20a

20b

Yes

Form 990 (2019)

Yes

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of

Did the organization's separate or consolidated financial statements for the tax year include a footnote that

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

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

Did the organization report on Part IX column (A), line 3, more than \$5,000 of grants or other assistance to or for

b Was the organization included in consolidated, independent audited financial statements for the tax year?

14a Did the organization maintain an office, employees, or agents outside of the United States?

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 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

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

any foreign organization? If "Yes," complete Schedule F, Parts II and IV 🥦

Nο

Nο

Νo

Νo

Νo

Nο

Nο

Nο

Nο

Nο

No

24b

24c

24d

25a

25b

26

28a

28b

28c

29

30

31

32

33

34

35a

35h

36

37

13

0

1a

Yes

Yes

Form 990 (2019)

Yes

Yes

Yes

Yes

n 990 (2019)			Page
rt IV Checklist of Required Schedules (continued)			
		Yes	No
Did the organization report more than \$5.000 of grants or other assistance to or for domestic individuals on	22		

Nο Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's Νo 23 current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," 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 Nο 24a

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

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 🔒 🔒 🕺

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

Did the organization report any amount on Part X, line 5 or 22 for receivables from or sayables to any current or

former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled

ប្រជុំ^Yអាច «លាក្សាខ្លែស ស្រាស់ និង ប្រជុំ ប្រជាជ្រាក្រ employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member,

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes,"

c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes,"

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . .

Hid the Granketation field to the schedule N, Part I

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete

Wasen Granditz เอก Chedule R. Part II, III, or IV,

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

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

Statements Regarding Other IRS Filings and Tax Compliance

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable

b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

or to a 35% controlled entity (including an employee thereof) or family member of any of these persons?

b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

"Yes," complete Schedule L, Part I

If "Yes," completeSchedule L,Part III

conservation contributions?

Part V

sections 301.7701-2 and 301.7701-3?

entity or family member of any of these persons?

instructions for applicable filing thresholds, conditions, and exceptions):

Pa	Statements Regarding Other IRS Filings and Tax Compliance (continued)									
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo						
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	4a		No						
ь	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account, or other financial account, or other financial account, securities account, or other financial									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts									
5a	\widehat{W} organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No						
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo						
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5 c								
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N o						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).	7a		No						
а	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?									
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b								
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to									
_	file Form 8282?	7c		No						
d	If "Yes," indicate the number of Forms 8282 filed during the year									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νο						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο						
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?									
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a									
	Form 1098-C?	7h		No						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8								
9	Sponsoring organizations maintaining donor advised funds.									
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12 10a									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club									
11	Section 501(c)(12) organizations. Enter:									
	Gross income from members or shareholders									
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)									
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
а	Is the organization licensed to issue qualified health plans in more than one state?	13a								
	Note. See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans									
c	Enter the amount of reserves on hand									
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No						
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No						
16	If the sort gase is a storm cation as lacoration than Forms to it 4000, Such jet to the section 4968 excise tax on net investment income?	16		No						
	If "Yes," complete Form 4720, Schedule O.	F	orm 990	(2019)						

independent

year by the following:

Section C. Disclosure

13

14

15

Νo

Nο

Νo

Nο

Nο

Nο

Nο

Nο

Nο

Νo

Νo

Νo

Nο

Νo

Form 990 (2019)

2

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7a

7b

8b

10a

10b

11a

12a

12b

12c

13

15a

15b

16a

16b

Yes

Yes

Yes

Yes

0	(2019)	Pa
	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line	S
	8a 8h or 10h helow describe the circumstances, processes, or changes in Schedule O. See instructions	

	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched Check if Schedule O contains a response or note to any line in this Part VI	ıle O. S	See instr	ructions.				
e	ection A. Governing Body and Management							
						 Υ	es	
3	Enter the number of voting members of the governing body at the end of the tax	1a			9			
	Yethere are material differences in voting rights among members of the governing							

	Check it Schedule o contains a response or note to any line in this Part VI.		•	•			•	•	•	•	•
Se	ction A. Governing Body and Management										
									Ye	s	-
1a	Enter the number of voting members of the governing body at the end of the tax	1a				9	9				
	Y for the governing body, or if the governing body delegated broad authority to an executive committee										

Section A. Governing Body and Management				
			Yes	N
1a Enter the number of voting members of the governing body at the end of the tax	1a	9		
Yethere are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee				
or similar committee, explain in Schedule O.				

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any

Did the organization delegate control over management duties customarily performed by or under the direct

Did the organization make any significant changes to its governing documents since the prior Form 990 was

Bild the organization become aware during the year of a significant diversion of the organization's assets? .

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or

b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,

Did the organization contemporaneously document the meetings held or written actions undertaken during the

Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

organization's mailing address? If "Yes," provide the names and addresses in Schedule O

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters,

affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give

Did the process for determining compensation of the following persons include a review and approval by

Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe

independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

FL,TN,TX

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

State the name, address, and telephone number of the person who possesses the organization's books and records:

Own website Another's website Vpon request Other (explain in Schedule O)

interest policy, and financial statements available to the public during the tax year.

LAURIE MOORE 1858 WILSON PIKE FRANKLIN, TN 37067 (615) 778-0202

b Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 . . .

Did the organization have a written document retention and destruction policy? .

a The organization's CEO, Executive Director, or top management official . . .

List the states with which a copy of this Form 990 is required to be filed

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).

Did the organization have a written whistleblower policy?

supervision of officers, directors or trustees, or key employees to a management company or other person? .

Enter the number of voting members included in line 1a, above, who are

Did the organization have members or stockholders?

b Each committee with authority to act on behalf of the governing body?

10a Did the organization have local chapters, branches, or affiliates? .

other officer, director, trustee, or key employee?

	Check if Schedule O contains a response or note to any line in this Part VI.	•		•	•	•	•	•	•	•	•	•
Se	ection A. Governing Body and Management											
										Ye	s	
1a	Enter the number of voting members of the governing body at the end of the tax	1a					9					
	Yethere are material differences in voting rights among members of the governing body or if the governing body delegated broad authority to an executive committee											

Check if Schedule O contains a response or note to any line in this Part VI.	• 0. 3	ee mstructions.			
Section A. Governing Body and Management					
				Yes	N
1a Enter the number of voting members of the governing body at the end of the tax	1a	!	9		
Yethere are material differences in voting rights among members of the governing					

Part VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and 1b below 7b b	onse to	lines	
	Ba, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI			
	Check it Schedule O contains a response of note to any line in this Part VI		•	•
Section	on A. Governing Body and Management			
		Y	es/	ı
1a Ent	or the number of voting members of the governing body at the end of the tay			

dovernance, Flandgement, and Disciosure For each Fes response to lines 2 timough 76 below, and for a five response	co mics	
8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI		
Check if Schedule O contains a response or note to any line in this Part VI		•
Section A. Governing Body and Management		
	Yes	No
4. Enter the number of voting members of the governing body at the end of the tay		

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

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations. • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (D) (B) (C) (E) (F) Name and title Position (do not check Reportable Reportable **Estimated** Average hours per more than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours for and a director/trustee) organization organizations from the (W-2/1099-(W-2/1099related organization Individual to or director mployee organizations MISC) MISC) and related Institutional below dotted organizations employee line) compens 2 큠 eetsi 8 100.00 (1) LAURIE MOORE 145,120 Χ 0 President 0.00 1.00 (2) DOUG STECKBECK Director 0.00 (3) BONNIE GLOTH 0 C 0.00 1.00 (4) BILLIE ANN SMITH Х 0 0 n Director 0.00 1.00 (5) CHERNA MOSKOWITZ X 0 0 n Director 0.00 1.00 (6) ANNE KUFELDT Χ 0 C 0 Director 0.00 1.00 (7) BETH POE Х 0 C 0.00 1.00 (8) BARBARA WILSON Х 0 C 0 Treasurer 0.00 1.00 (9) STANLEY TATE X 0 0 Chairman 0.00

(A) Name and title	(B) Average hours per week (list any hours for	Average hours per week (list person is both an officer any hours for related									((F) Estima mount o compens from t	ted f other sation :he
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2,103	, misc)	MISC)		relati organiza	ed
1b Sub-Total	art VII, Section A			·		*			145 120				
d Total (add lines 1b and 1c) 2 Total number of individuals (includ	ing but not limit	ed to th	ose		d ab	oove)	who	received	more tha	n			
\$100,000 of reportable compensat	ion from the org	ganizati	on 🕨	1								Yes	No
3 Did the organization list any forme on line 1a? <i>If "Yes," complete Sche</i> e				, key	y em	nploye	e, o	r highest	compens	ated employee	3		
For any individual listed on line 1a organization and related organization individual	, is the sum of r	eportab	le co										No
5 Did any person listed on line 1a re	ceive or accrue	 compen	• satio	• n fr	• om :	• • unv ייי	• nrela	• •	nization o	r individual for	4		No
services rendered to the organizat	ion? <i>If "Yes," con</i>					,					5		No
Section B. Independent Contr Complete this table for your five h compensation from the organizatio	ighest compens											ay vear	
·	(A) and business addre		101 (ile C	.aiei	iuai y	еаг	enaing w		(B) ription of services	1115	(C) Compen)
												•	

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization \triangleright 0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

		0 (2019)	. ~ ~	Deve						Page S
Part	VII					ponse or note to	any line in this Pa	rt VIII		
		5.050.0					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Giffs, Grants and Other Similar Amounts	1	 a Federated camp b Membership due c Fundraising eve d Related organize e Government grants 	es . ents atio		1a 1b 1c 1d 1e					
Contr and (f All other contributio and similar amounts above g Noncash contributio lines 1a - 1f:\$ h Total. Add lines	s not	included	1f 1g	1,294,353 4,895	1,294,353			
						Business Code				
Program Service Revenue	2a	OTHER EXEMPT FUNC	CTION	N			19,405	19,405		
Be	•									
rvice	c	·								
Set	c	i								
gran	_									
Pro	e									
	f	f All other program	ser	vice reven	ıe.					
	_	Total. Add lines				19,405	<u> </u>	1	T	1
	3 Investment income (including dividends other 4 钟花诗音中的州市的estment of tax-exempt 5 Royalties							0		
	3	Royalties		(i) Re		(ii) Personal	1			
	6-	Gross rents	6-							
		Less: rental	6a							
		expenses	6b							
	С	Rental income or	6с							
	•	d (Nets)ental incom	e or	(loss).				0		
				(i) Secu	rities	(ii) Other	_			
	7a	Gross amount from sales of assets other than inventory	7a							
	b	Less: cost or other basis and sales expenses	7b							
	С	Gain or (loss)	7c							
		d Net gain or (loss	-					0		
Other Revenue		a Gross income from fu (not including \$ contributions reported See Part IV, line 18 b Less: direct expe	d on l	of line 1c).	8a 8b		_			
Re		c Net income or (lo				events		0		
the						•	7			
0	ı	Gross income from activities. See Part IV, line 1 b Less: direct expe	L9 ense	 s	9a 9b	dition	-	0		
	•	- Act medine of (10)	o gaiiili	.9 46111	ities b				
		a Gross sales of inverteurns and allowb Less: cost of goo	ance	es	10a 10b		_			
		C Net income or (lo			Ь	ntory		0		
		(10	,			•				
	11	Miscellaneo 1a	us F	Revenue		Business Code				
	ı	b								
	•	с								
		d All other revenue								
		e Total. Add lines :						0		
		- rotarrevenue. Se	.e 111	isti uctiviis	• •	*	1,313,75	19,40	5	

For	m 990 (2019)				Page 10
Р	art IX Statement of Functional Expenses				<u> </u>
	Section 501(c)(3) and 501(c)(4) organizations must				
	Check if Schedule O contains a response or note to	any line in this Part			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	43,032	43,032		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	145,120	72,560	7,256	65,304
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	159,171	106,972	47,516	4,683
	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			,,,,,
		ا م	i	ĺ	
	Other employee benefits	0	40.000		
	Payroll taxes	22,605	13,337	4,069	5,199
11	Fees for services (non-employees):				
ā	Management	0			
ı	Legal	480		480	
•	Accounting	31,701	10,782	10,918	10,001
	1 Lobbying	0			
•	Professional fundraising services. See Part IV, line 17	0			
1	Investment management fees	0			
ģ	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	269,883	196,976	71,544	1,363
12	Advertising and promotion	297,527	293,279	3,610	638
	Office expenses	38,551	1,633	24,231	12,687
14	Information technology	0			
	Royalties	0			
16	Occupancy	41,570	24,526	7,483	9,561
	Travel	135,833	62,996	5,587	67,250
	Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19	Conferences, conventions, and meetings	62,615	62,385		230
	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	229		229	
23	Insurance	22,844		22,844	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a EDUCATION AND ADVOCACY	133,874	122,660	2,684	8,530
	b meals and entertainment	23,422	13,349	1,151	8,922
	c TELEPHONE	14,243	8,403	2,564	3,276
	d penalties	13,930		13,930	
	e All other expenses	18,690	4,658	1,762	12,270
25	Total functional expenses. Add lines 1 through 24e	1,475,320	1,037,548	227,858	209,914
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720).				

		(2019)					Page 11	
Pa	art X	Balance Sheet						
	Check if Schedule O contains a response or note to any line in this Part IX							
					(A)		(B)	
					Beginning of year	_	End of year	
	1	Cash-non-interest-bearing			40,761	1	15,545	
	2	Savings and temporary cash investments		_		2	0	
	3	Pledges and grants receivable, net	•			3	0	
	4	Accounts receivable, net				4	0	
	5	Loans and other payables to any current or for key employee, creator or founder, substantial controlled entity or family member of any of the	contri hese p	butor, or 35% ersons		5	0	
	6	Loans and other receivables from other disquiunder section $4958(f)(1)$), and persons descr				6	0	
S	7	Notes and loans receivable, net		7	0			
ssets	8	Inventories for sale or use				8	0	
S	9	Prepaid expenses and deferred charges .				9	0	
1	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	24,292				
	b	Less: accumulated depreciation	10b	24,177	344	10c	115	
	11	Investments—publicly traded securities .				11	0	
	12	Investments—other securities. See Part IV, lin	ne 11			12	0	
	13	Investments—program-related. See Part IV, li	ne 11			13	0	
	14	Intangible assets		[14	0	
	15	Other assets. See Part IV, line 11			6,000	15	6,000	
	16	Total assets: Add lines 1 through 15 (must ed	qual lir	ne 34)	47,105	16	21,660	
	17	Accounts payable and accrued expenses .			17			
	18	Grants payable				18		
	19	Deferred revenue				19		
	20	Tax-exempt bond liabilities				20		
S	21	Escrow or custodial account liability. Complet	e Part	IV of Schedule D		21		
Liabilities	22	Loans and other payables to any current or for key employee, creator or founder, substantial			100 504			
		controlled entity or family member of any of the	-	_	2	22	102,534	
	23	Secured mortgages and notes payable to unre		·		23		
	24	Unsecured notes and loans payable to unrelat		· ·	40.004	24	00.470	
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on li Complete Part X of Schedule D	, payat nes 17	oles to related third ' - 24).	48,894	25	82,479	
	26	Total liabilities. Add lines 17 through 25 .			48,896	26	185,013	
es		Organizations that follow FASB ASC 958, check	ck here	and complete				
Balances	27	lines 27, 28, 32, and 33.						
ala	27	Net assets without donor restrictions		L		27	<u> </u>	
d B	28	Net assets with donor restrictions				28		
Fund		Organizations that do not follow FASB ASC 99	58, che	eck here 🕨 🔽 and				
or F		complete lines 29 through 33.						
		Capital stock or trust principal, or current fun				29		
Assets	30	Paid-in or capital surplus, or land, building or				30		
As	31	Retained earnings, endowment, accumulated i	ncome	, or other funds	-1,791	31	-163,353	
Net	32	Total net assets or fund balances		_	-1,791	32	-163,353	
2	33	Total liabilities and het assets/fund balances			47,105	33	21,660	
							Form 990 (2019)	

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

Single Audit Act and OMB Circular A-133? За

Νo

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b

Form 990 (2019)

Form 990 (2019) **Additional Data** Return to Form **Software ID:** 19009920 **Software Version:** 2019v5.0 Form 990, Special Condition Description: **Special Condition Description**

efi	le Pu	blic Visua	l Render	ObjectI	d: 001 - Submiss	ion: 2015-0	1-16	T.	IN: 20-5478191
SC	HED	ULE A		Public	Charity Statu	s and Pub	dic Sunno	rt	OMB No. 1545-0047
		or 990EZ)	c		organization is a sect				2010
Donort	mant of th	o Tracoun			4947(a)(1) nonexe Attach to Form	•			2013
		e Treasury e Service	•	Go to <u>www.ir</u>	s.gov/Form990 for i			rmation.	Open to Public Inspection
		ne organizat						Employer identification	
PROC	LAIMIN	G JUSTICE TO 1	THE NATIONS	INC				20-3144206	
	rt I				t atus (All organiza			art.) See instruction	ons.
	organi —		•		use it is: (For lines 1		•	•	
1		•			association of churc		•		
2					(1)(A)(ii). (Attach S	•			
3		•	•	•	service organization o				
4			research org name, city,		ated in conjunction w	vith a hospital d	escribed in sect	ion 170(b)(1)(A)(ii	i). Enter the
5		_	•	ed for the bendered II.	efit of a college or uni)	versity owned o	r operated by a	governmental unit o	described in section
6		A federal,	state, or loc	al government	or governmental unit	described in se	ction 170(b)(1)(A)(v).	
7					es a substantial part o i). (Complete Part II.		m a governmen	tal unit or from the	general public
8		A commun	ity trust de	scribed in secti	on 170(b)(1)(A)(vi).	(Complete Par	t II.)		
9					described in 170(b) e of agriculture. See in				
10	V	-		•	es: (1) more than 331 exempt functions—su			· · · · · · · · · · · · · · · · · · ·	
		from gross	investmen	t income and u	nrelated business tax e section 509(a)(2).	cable income (le	ess section 511	• •	
11		An organiz	ation organ	ized and opera	ted exclusively to test	t for public safe	ty. See section	509(a)(4).	
12		one or mor	e publicly s	upported organ	ed exclusively for the nizations described in t describes the type o	section 509(a)	(1) or section 5	09(a)(2). See sectio	n 509(a)(3). Check
а		supported	organization	n(s) the power	erated, supervised, or to regularly appoint o t IV, Sections A and I	r elect a majori			
b		Type II. A manageme	supporting nt of the su	organization su pporting organ	ipervised or controlled ization vested in the	d in connection		•	by having control or organization(s). You
С		Type III fu	inctionally i		upporting organizatio				grated with, its
d	Г				uctions). You must co • A supporting organiz				anization(s) that is
-		not functio	nally integr	ated. The orga	nization generally mu	st satisfy a dist	ribution require		
е					te Part IV, Sections A ceived a written deter			a Type I Type II T	vne III functionally
-					lly integrated support			, pc 1, . , pc 11, 1	, po III runctionally
f	Ente			ed organizatior				<u> </u>	
g	(i) N	Provide the lame of supp		nformation abo	ut the supported orga (iii) Type of		organization	(v) Amount of	(vi) Amount of
	(1)	organization		(II) LIN	organization (described on lines	listed in you docur	ır governing	monetary support (see instructions)	other support (see instructions)
					<pre>1- 10 above (see instructions))</pre>				
					//	Yes	No		
				<u> </u>					
Tota									
		vork Reduct	ion Act Noti	ce, see the Ins	tructions for	Cat. No. 11285	iF.	Schedule A (Form	990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (a) 2015 **(b)** 2016 (c) 2017 (f) Total (d) 2018 (e) 2019 (or fiscal year beginning in) 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge... 4 Total. Add lines 1 through 3 **5** The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) **Public support.** Subtract line 5 from line 4. Section B. Total Support Calendar year (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total (or fiscal year beginning in) 7 Amounts from line 4. . 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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.). . Total support. Add lines 7 through

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 50

Public support percentage for 2018 Schedule A, Part II, line 14

17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

h 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization $\ldots\ldots\ldots\ldots\ldots\ldots$

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

	۲,	`	
(C)	(3)	
٠	•	•	•

Section C. Computation of Public Support Percentage Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))

14

15

1	(c)	(:
•		

Schedule A (Form 990 or 990-EZ) 2019

(c)			
	•	•	

16a 33 1/3% support test-2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box h 33 1/3% support test-2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

Schedule A (Form 990 or 990-EZ) 2019

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.)

Section A. Public Support (a) 2015

Calendar year	
(or fiscal year	beginning in) 🟲

Cale	endar year	
(or	fiscal year beginning in)	
1	Gifts, grants, contributio	ns, a

732,841

(b) 2016 829,810

(c) 2017

1,000,673

1,294,458

(e) 2019

membership fees received. (Do not

997,047

4,854,829

45,582

44,677

4,945,088

2,685,358

2,685,358

2,259,730

4,945,088

4,945,186

45.700 %

40.400 %

0 %

(f) Total

0

(f) Total

include any "unusual grants.") .

.

persons

any activity that is related to the organization's tax-exempt purpose 17,966

750,807

457,443

457,443

750,807

750,807

Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))

Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))

Public support percentage from 2018 Schedule A, Part III, line 15

Investment income percentage from 2018 Schedule A, Part III, line 17

(a) 2015

19,405

1,313,863

443,750

443,750

1,313,863

1,313,863

Schedule A (Form 990 or 990-EZ) 2019

15

17

(e) 2019

Gross receipts from activities that are not an unrelated trade or

11,556

584

1,009,187

693,610

693,610

1,009,187

1,009,187

(c) 2017

(d) 2018

10,985

1,011,658

617,500

617,500

1,011,658

1,011,658

(d) 2018

16,060

13,703

859,573

473,055

473.055

859,573

98

First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

859,671

19a 331/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than $\overline{33}$ 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization b 33 1/3% support tests-2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization 🕨 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

(b) 2016

Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in

business under section 513

Tax revenues levied for the organization's benefit and either

Total. Add lines 1 through 5 7a Amounts included on lines 1, 2,

c Add lines 7a and 7b. .

(or fiscal year beginning in)

June 30, 1975. c Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. 12 Other income. Do not include gain or loss from the sale of capital

11, and 12.). .

16

17

9 Amounts from line 6. . . Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources

Unrelated business taxable income (less section 511 taxes) from businesses acquired after

assets (Explain in Part VI.) . . Total support. (Add lines 9, 10c,

Section C. Computation of Public Support Percentage

Section D. Computation of Investment Income Percentage

Section B. Total Support

from line 6.)

Calendar year

and 3 received from disqualified

b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.

Public support. (Subtract line 7c

paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge

Section A. All Supporting Organizations

was described in section 509(a)(1) or (2).

amendment to the organizing document).

organization's organizing document?

checked 12b of

12d of Part I, complete

and (c) below.

made the determination.

Page 4

No

you checked 12a or 12b in Part I, answer (b) and (c) below.

"Yes," complete Part I of Schedule L (Form 990 or 990-EZ).

(1) or (2))? If "Yes," provide detail in Part VI.

organizations)? If "Yes," answer line 10b below.

whether the organization had excess business holdings).

or supervised by or in connection with its supported organizations.

describe the designation. If historic and continuing relationship, explain.

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,

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

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

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if

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

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

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

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

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If

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)

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

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

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

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

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

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

purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.

all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.

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

regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).

the filing organization's supported organizations? If "Yes," provide detail in Part VI.

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

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you

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

Yes

1

2

За

3b

3с

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9с

10a

10b Schedule A (Form 990 or 990-EZ) 2019

Parent of Supported Organizations. Answer (a) and (b) below.

each of the supported organizations? Provide details in Part VI.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of

b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of

Page 5

Ρē	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
S	Section B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
_		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.			
S	Section C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or			
	management of the supporting organization was vested in the same persons that controlled or managed the supported	1		
S	Section ^z D ^{:/} เล้เกี่) Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Yes	No
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice	_		
	in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this	3		
-	Section. E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructio	ne).	
_	a The organization satisfied the Activities Test. Complete line 2 below.		,.	
	b The organization is the parent of each of its supported organizations. Complete line 3 below.			
	c The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(500		
	instructions)	(566		
2	Activities Test. Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities		. 65	
	constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement.	2b		

instructions)

Page **6**

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

1 Amounts paid to supported organizations to accomplish exempt purposes

Section DOrganizations

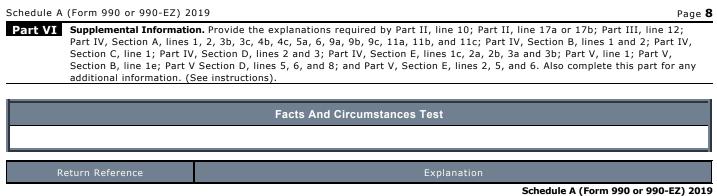
d Excess from 2018.

e Excess from 2019. . . .

(continued)

Page 7

2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity							
3 Administrative expenses paid to accomplish exempt	purposes of supported orgar	nizations	_				
4 Amounts paid to acquire exempt-use assets							
5 Qualified set-aside amounts (prior IRS approval requi	ired)						
6 Other distributions (describe in Part VI). See instruc	tions						
7 Total annual distributions. Add lines 1 through 6.							
8 Distributions to attentive supported organizations to details in Part VI). See instructions	which the organization is res	sponsive (provide					
9 Distributable amount for 2019 from Section C, line 6							
10 Line 8 amount divided by Line 9 amount							
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019				
1 Distributable amount for 2019 from Section C, line 6							
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI).							
See instructions.							
3 Excess distributions carryover, if any, to 2019:							
a From 2014							
b From 2015							
c From 2016							
d From 2017							
e From 2018							
f Total of lines 3a through e							
g Applied to underdistributions of prior years h Applied to 2019 distributable amount							
i Carryover from 2014 not applied (see instructions)							
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.							
4 Distributions for 2019 from Section D, line 7:							
\$							
a Applied to underdistributions of prior years							
b Applied to 2019 distributable amount							
c Remainder. Subtract lines 4a and 4b from 4.							
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI							
See instructions.							
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.							
7 Excess distributions carryover to 2020. Add lines 3j and 4c.	7 Excess distributions carryover to 2020. Add lines						
8 Breakdown of line 7:							
a Excess from 2015							
b Excess from 2016							
c Excess from 2017							



efile Public Visual Re	ender ObjectId: 001 - Submission: 2015-01-16		TIN: 20-5478191			
Schedule B	Schedule of Contributors		OMB No. 1545-0047			
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF. ► Go to <u>www.irs.gov/Form990</u> for the latest information.		2019			
Name of the organization		Employer ide	entification number			
PROCLAIMING JUSTIC	CE TO THE NATIONS INC	20-314420	6			
Organization type (che	eck one):					
Filers of:	Section:					
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	on				
	☐ 527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
_	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions from any one contributor. Complete Parts I and II. See instructions for determining	-				
ороски тако						
under sections 5 received from ar	ion described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the 33^{1} % sup $09(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 990-EZ), Part by one contributor, during the year, total contributions of the greater of (1) \$5,000 or (ii) Form 990-EZ, line 1. Complete Parts I and II.	II, line 13, 16a,	or 16b, and that			
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
990-EZ, or 990-PF), but	n that isn't covered by the General Rule and/or the Special Rules doesn't file Sched it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H o art I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form	of its Form 990-E				
For Paperwork Reduction for Form 990, 990-EZ, or 9		lule B (Form 990,	990-EZ, or 990-PF) (2019)			

Name of organization PROCLAIMING JUSTICE TO THE NATIONS INC

Employer identification number 20-3144206

Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED	,	\$ RESTRICTED	Person Payroll Noncash (Complete Part II for noncash
(a)	(b)	(c)	contributions.) (d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
-		\$	Person Payroll Noncash
			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		<u> </u>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash
			contributions.)

(a)

No. from

Part I

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

(c)
FMV (or estimate)
(See instructions)

20-3144206

Employer identification number

Date received

(d)

(d)

Date received

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Page 3

(b)
Description of noncash property given

Description of noncash property given

(b)

Description of noncash property given

(c) FMV (or es

FMV (or estimate)
(See instructions)

(c)

FMV (or estimate)

(See instructions)

(c)

FMV (or estimate)

(See instructions)

(c)

FMV (or estimate)

(See instructions)

(c)

FMV (or estimate)

(See instructions)

Schedule E	B (Form 990, 990-EZ, or 990-PF) (2019)		Page 4					
	rganization MING JUSTICE TO THE NATIONS INC		Employer identification number					
Part III	Exclusively religious, charitable, etc., contributed more than \$1,000 for the year from any line entry. For organizations completing Pa of \$1,000 or less for the year. (Enter this into Use duplicate copies of Part III if additional space	y one contributor. Complete co art III, enter the total of exclusiv formation once. See instructio	olumns (a) through (e) and the following rely religious, charitable, etc., contributions					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-	Transferee's name, address, and ZIP 4	(e) Transfer of gift	ationship of transferor to transferee					
	Transfered hame, address, and Zir		tionomp of transferor to transferoe					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift Transferee's name, address, and ZIP 4 Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-	Transferee's name, address, and ZIP 4	(e) Transfer of gift Rela	ationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	Transferee's name, address, and ZIP 4	(e) Transfer of gift Rela	ationship of transferor to transferee					
			Schedule B (Form 990, 990-EZ, or 990-PF) (2019					

Additional Data			Return to Form
	Software ID:	19009920	
	Software Version:	2019v5.0	

ObjectId: 001 - Submission: 2015-01-16 efile Public Visual Render TIN: 20-5478191 **Political Campaign and Lobbying Activities** OMB No. 1545-0047 SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

5

Inspection

Employer identification number

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

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

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.
- If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.

 - Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)); Complete Part II-B. Do not complete Part II-A.
- If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
 - Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization

PROCLAIMING JUSTICE TO THE NATIONS INC

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for

definition of "political campaign activities")

Political campaign activity expenditures (see instructions)

Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

Enter the amount of any excise tax incurred by the organization under section 4955

1

Enter the amount of any excise tax incurred by organization managers under section 4955

2

If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 ☐ Yes

Was a correction made? ☐ Yes □ No

If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527

exempt function activities Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..........

Did the filing organization file Form 1120-POL for this year? Yes

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing 5

organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a

separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(e) Amount of (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's

political contributions funds. If none, enter received and -0-. promptly and directly delivered to a separate political organization. If none, enter -0-.

3

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ. Cat. No. 50084S Schedule C (Form 990 or 990-EZ) 2019 activity.

3

Part IV

Return Reference

filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Yes | No

Page 3

Amount

1	During the year, did the filing organization attempt to influence foreign, national, state or local			
	legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
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			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Par	t III-A Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(5)$), or		
	section 501(c)(6).		I	
	Ware substantially all (000/ or mare) dues resolved mandedustible by mambars?	1	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 expenditures from the prior year?			
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5)			
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (D) Par	τ 111-	ъ.

line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 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).

2a

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?

Taxable amount of lobbying and political expenditures (see instructions) **Supplemental Information**

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

2b Carryover from last year 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .

3

4

5

Schedule C (Form 990 or 990EZ) 2019

Software Version: 2019v5.0

efile Public Visual Render **ObjectId: 001 - Submission: 2015-01-16** TIN: 20-5478191 OMB No. 1545-0047 SCHEDULE D Supplemental Financial Statements (Form 990) ► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Open to Public Department of the Treasury Attach to Form 990. ▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information. Internal Revenue Service Inspection Name of the organization **Employer identification number** PROCLAIMING JUSTICE TO THE NATIONS INC 20-3144206 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are 5 the organization's property, subject to the organization's exclusive legal control? $\dots \dots \dots \dots$ ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d historic structure listed in the National Register . . . 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the vear Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. Schedule D (Form 990) 2019 52283D

Sch	edule D	(Form 990) 2019										Page 2
Par	t IIII	Organizations	Maintaining (Collection	ns of Ar	t, Histo	orical 1	reasu	res, or	Other Sir	nilar Ass	ets (continued)
3	Using	the organization's a ion items (check all	equisition, access									
а	☐ Pu	ublic exhibition				d [Loan	or exch	ange prog	ırams		
b	☐ So	cholarly research				e [Othe	r				
С	Pr	eservation for futur	e generations									
4	Provid Part X	e a description of th	e organization's	collections	and expla	in how th	ey furth	er the o	rganizatio	n's exempt	purpose in	
5		the year, did the o	ganization solici	t or receive	donation	s of art,	historical	l treasu	res or oth	er similar		
		to be sold to raise f				s part of	the orga	nization	's collection	on?	Yes	No
Pa	rt IV	Escrow and Cust Complete if the of Part X, line 21.	stodial Arran rganization an	gements swered "Y	es" on F	orm 990	O, Part I	IV, line	9, or re	ported an	amount o	n Form 990,
1a		organization an age ed on Form 990, Par									Yes	□ No
b	If "Voc	s," explain the arran	gomont in Part V	III and con	anloto the	followin	a table:			Δ	mount	
c		ning balance \dots	_		•		-		1c	<u>^</u>	inounc	
d	-	ons during the year							1d			
e		outions during the year							1e			
f		balance							1f			
_	_	•							<u> </u>			□ No
2a	Did the	e organization includ	le an amount on	Form 990,	Part X, II	ne 21, fo	r escrow	or cust	odial acco	unt liability	? Tes	I40
b	If "Yes	," explain the arran	gement in Part X	III. Check	here if th	e explana	ition has	been p	rovided in	Part XIII	🗆	
Pa	rt V	Endowment Fu										
		Complete if the o	rganization an							1		
1-	Poginni	ng of year balance		(a) Curre	ent year	(b) Pri	or year	(c) Iwo	years back	(d) Three ye	ears back (e)	Four years back
	_	ng of year balance										
		utions	sing and league									
C	wer mve	estment earnings, g	ains, and iosses				l					
d	Grants	or scholarships .					ĺ					
е		xpenditures for faci	lities									
f	Adminis	strative expenses										
g	End of y	ear balance										
2	Provid	e the estimated perd	entage of the cu	rrent year	end balan	ce (line 1	g, colum	nn (a)) h	neld as:			
а	Board	designated or quasi	-endowment 🕨									
b	Perma	nent endowment 🛌										
С	Tempo	rarily restricted end	owment 🕨									
		ercentages on lines		-								
3a		ere endowment fund zation by:	s not in the poss	ession of th	ne organiz	ation tha	t are hel	d and a	dministere	ed for the		Yes No
	_	elated organizations									3a(i)	162 140
	` '	ated organizations									3a(ii)	
b		" on 3a(ii), are the	-	ions listed	as requir	ed on Sch	nedule R	?			3b	
4		be in Part XIII the in		tho organiz	ation's on	dowmont	funds					
		Land, Buildings			ation's en	idowinein	. Tullus.					
Га		Complete if the o			es" on F	orm 990), Part 1	۷, line	11a. Se	e Form 99	0, Part X,	line 10.
		tion of property	(a) Cost or oth (investme	ner basis		or other ba				depreciation		Book value
1a	Land .											
		js										
		old improvements										
		ent					17,596	5		17,481		115
							6,696	5		6,696		
		nes 1a through 1e.	(Column (d) must	eaual Form	990, Part	X, columr	(B), line	10(c),)		•		115

Complete if the organization answered "Yes" on Form 990			
(a) Description of security or category (including name of security)	(b) Book value		d of valuation: f-year market value
	value	Cost or end-or	i-year market value
(1) Financial derivatives			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part Investments—Program Related.		/ line 11c Coc Form	000 Part V Jine 12
Complete if the organization answered 'Yes' on Form 990 (a) Description of investment	u, Part IV	(b) Book value	(c) Method of valuation:
(a) Bescription of investment		(B) Book value	Cost or end-of-year market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)			
Part IX Other Assets.		<u> </u>	
Complete if the organization answered 'Yes' on Form 990 (a) Description), Part IV	, line 11d. See Form 99	0, Part X, line 15. (b) Book value
(1)Contributed Antiques			6,000
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)			6,000
Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990	, Part IV	, line 11e or 11f.	
See Form 990, Part X, line 25. 1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)		•	82,479
2. Liability for uncertain tax positions. In Part XIII, provide the text of the foo organization's liability for uncertain tax positions under FIN 48 (ASC 740). Ch		-	•
XIII			

_	Subtract line 20 from line 2 f	_		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a			
b	Other (Describe in Part XIII.)			
С	Add lines 4a and 4b	4c		
5	Total revenue, Add lines 2 and 4c (This must equal Form 990, Part I, line 12.)	-		

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements . 1

1,470,425 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities . . 2a Prior year adjustments 2b Other losses 2c

4,895 1,313,758

Schedule D (Form 990) 2019

Other (Describe in Part XIII.) 2d Add lines **2a** through **2d** 2e 3 Subtract line 2e from line 1 3 1,470,425 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a

4,895 Other (Describe in Part XIII.) 4b 4,895 Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 1,475,320

Part 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.

Return Reference Explanation

NON-CASH AIRLINE MILES DONATED \$4895

Part XI, Line 4b: Other revenue amounts included on 990 but not included in F/S

DONATED AIRLINE MILES UTILIZED \$4895

Part XII, Line 4b: Other revenue

amounts included on 990 but not

included in F/S

efile Public Visual Rei	nder	ObjectId: (001 - Submis	ssion: 2015-01-16			TIN: 20-5478191		
SCHEDULE F	tement of	Activities	Outside the Uni	ted St	ates	OMB No. 1545-0047			
(Form 990) Department of the Treasury		ete if the organiz		2019 Open to Public Inspection					
Internal Revenue Service Name of the organization						Employer iden	tification number		
PROCLAIMING JUSTICE TO	O THE N	IATIONS INC							
Part I General Info	rmatio	on on Activit	ies Outside i	the United States. (Complete	20-3144206 e if the organi	zation answered		
"Yes" on Form				the officed states (Jonnpiec	e ii tiie organii	zacion answered		
	e grante	ees' eligibility	for the grants	ds to substantiate the or assistance, and the		-	l ✓ Yes		
2 For grantmakers. Do assistance outside the			organization's	procedures for monito	ring the	use of its grar	nts and other		
3 Activites per Region. (7	The follo	wing Part I, line	3 table can be	duplicated if additional s	pace is ne	eeded.)			
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	region)	program	vity listed in (d) is a n service, describe ecific type of e(s) in the region	(f) Total expenditures for and investments in the region		
(1) MIDDLE EAST AND NO AFRICA	ORTH	0	0	PROGRAM	TV AND PRODUC		30,055		
(2) SUB-SAHARAN AFRIC	:A	0	0	PROGRAM	CONFER		21,163		
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(
(
11)									
(
13)									
14)									
15)									
16)									
(17)									
3a Sub-total b Total from continuation to Part I	sheets						51,218		
c Totals (add lines 3a and	d 3b)						51,218		
For Paperwork Reduction Act N		e the Instruction	s for Form 990.	Cat	. No. 500)82W Sched	dule F (Form 990) 2019		

					1. 1.4	1		"
Part II Grants Part IV	s and Other Ass ', line 15, for any	sistance to Orga recipient who red	anizations or Entit ceived more than \$5	ies Outside the U ,000. Part II can be	nited States. Come duplicated if addition	plete if the organiza onal space is neede	ation answered "Yes d.	" on Form 990,
(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
			ted above that are re				ıs	,

(1) (2) (3) (4) (5) (6) (7) (8) (9)

> 10) 11) 12) 13) 14) 15) 16) 17) 18)

appraisal, other)

Schedule F (Form 990) 2019

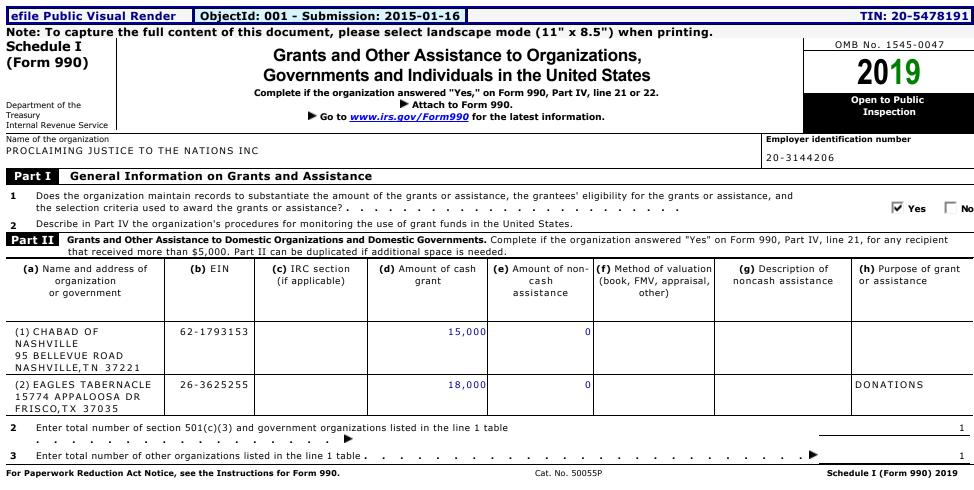
Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III Part III can be duplicated if additional space is needed (e) Manner of cash (f) Amount of (g) Description (h) Method of disbursement noncash of noncash valuation assistance (book, FMV, assistance

Fait III can be duplicated if additional space is fleeded.										
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant							

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

Schedule F (Form 990) 2019	Page 5								
Provide the information method; amounts of inv (accounting method); ar	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (account method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part I (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also comp this part to provide any additional information. See instructions.								
ReturnReference	Explanation								
Part I, Line 3f - Investments and Expenditures	TRANSPORTATION,LODGING, MEALS & INCIDENTALS AND CONTRACT LABOR AS NEEDED TO ACCOMPLISH BROADCASTING AND PRODUCTION PROGRAM TASKS								
	Schedule F (Form 990) 2019								

Additional Data Software ID: 19009920 Software Version: 2019v5.0



(4) (5)

(6)

(7)

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

Part IV

Explanation

Return Reference

Additional Supplemental ELIGIBLE GRANTEES MUST HAVE A MISSION CONSISTENT WITH THE ORGANIZATION'S MISSION

Information

Grantmaker's Description of How THE BOARD APPROVES BUDGET ITEMS FOR SUBSTANTIAL GRANTS AND DONATIONS PRIOR TO DISBURSEMENT OF FUNDS.

Grants are Used

Schedule I (Form 990) 2019

Software Version: 2019v5.0

efile Public	Visual Re	nder	ObjectId	: 001 -	Submission	: 2015-01	-16				TIN	: 20	-5478	8191	
Schedule L Trans				actio	ns with Int	erested	Persons				ОМЕ	OMB No. 1545-0047			
(Form 990 or 99	Form 990 or 990-EZ) Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. Attach to Form 990 or Form 990-EZ.									6, 27,	2019				
Department of the Treas	ury	▶G	o to www.irs.		h to Form 990 o m990 for instru			natio	on.				o Pu		
Internal Revenue Service	-			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									ectio		
Name of the or PROCLAIMING JUST		NATIONS I	INC					Em	ploye	r ident	ificati	on nu	mber		
TROCEATING 30.	STICE TO THE I	VATIONS	iive					20-	-3144	1206					
Part I Exc	ess Benef	fit Tra	nsactions (section 5	01(c)(3), sectio	n 501(c)(4)	, and section 5				nizatio	ns on	ly).		
Com	plete if the o	organiza	tion answered	"Yes" or	Form 990, Part	IV, line 25a	or 25b, or For	m 99							
1 (a) Name of disqualified person				((b) Relationship between disqualified persor and organization					Descri	•			1)	
					and	п		τ	ransad	ction	.1011		cted?		
														No	
								1							
2 Enter the	amount of ta	ax incurr	ed by the orga	nization	managers or dis	qualified per	rsons during th	e yea	ar und	der					
section 4 3 Enter the		ıx, if any	, on line 2, ab	ove, reim	nbursed by the o	rganization .			• •\$ •	•					
Part II Lo	oans to ar	nd/or	From Inter	ested I	Persons.										
Co	mplete if the	e organi	zation answer	ed "Yes"	on Form 990-EZ		e 38a, or Form	990,	, Part	IV, lin	e 26;	or if t	he		
), Part X, line 5,		(6) P. I		.						
(a) Name of interested	with	nsnip (loan	(d) Loan to or from the organization? (e) (f) Balance due				(g) In (h) default? Appro		n) roved					
person	organizat	ion				principal	440			by bo	by board or				
						amount				committee?		†			
(1) CTANLEY	0551050	0.5	DED ATTONO	To From		150,000 102,53		Yes		Yes	No	Yes	N	lo	
(1) STANLEY OFFICER TATE		OI	PERATIONS	X		130,000	102,334		No	Yes		Yes			
Total		· ·			▶	\$	102,534								
					erested Pers Yes" on Form		V. line 27.								
(a) Name of			Relationship be		(c) Amount of a	1	(d) Type of a	assis	tance	(e)) Purp	ose o	fassis	tance	
pers			ested person a	nd the						()					
		-	organization			+									
		-				+				-					
		+				+									
		+													
-		1													
For Paperwork R	eduction Act	Notice, s	ee the Instruct	ions for F	orm 990 or 990-I	EZ. Cat.	No. 50056A		Sched	ule L (Form 9	90 or	990-E	Z) 2019	

(a) Name of interested person

Schedule L (Form 990 or 990-EZ) 2019

organization's

Page 2

Νo

Νo

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (b) Relationship (c) Amount of (d) Description of transaction between interested transaction

revenues? person and the organization Yes No (1) LAURIE CARDOZA-MOORE OFFICER 40,637 OCCUPANCY EXPENSE Νo

OFCR SPOUSE BUS 85,241 PRODUCTION EXPENSE OFFICER'S CHILD 1,000 CONTRACT LABOR

OFFICER'S CHILD 5,618 CONTRACT LABOR OFFICER'S CHILD 47,876 WAGE

Νo Νo OFFICER 1,500 CONTRACT LABOR Νo

(5) JOSEPHINE MOORE

(6) DOUG STECKBECK

Supplemental Information Part V

Return Reference

(2) MP FILMS INC

(3) CHRISTINA MOORE

(4) JESSICA MOORE

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

Explanation

efile Public Visual Render ObjectId: 001 - Submission: 2015-01-16 TIN: 20-5478191 OMB No. 1545-0047 SCHEDULE O Supplemental Information to Form 990 or 990-EZ 2019 (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. Department of the Treasury Attach to Form 990 or 990-EZ. Open to Public ► Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service Inspection **Employer identification number** Name of the organization PROCLAIMING JUSTICE TO THE NATIONS INC 20-3144206 Return **Explanation** Reference Form 990. OTHER PROGRAM SERVICES 4: OTHER PROGRAM SERVICES 5: PJTN'S GOAL FOR THIS INITIATIVE IS TO REVIEW AND Part III. Line EXPOSE TEXTBOOKS AND CURRICULUM FOR ANTI-SEMITIC. ANTI-ISRAEL. ANTI-AMERICAN AND ANTI-JUDEO CHRISTIAN 4d: Other BIAS. WE USE THE INFORMATION TO EDUCATE PARENTS. EDUCATORS AND ELECTED OFFICIALS ABOUT THE CONTENT TO Program ENSURE THE TEXTBOOKS ARE NOT BIASED AND REFLECT THE VALUES OF OUR COMMUNITIES. Services Description Form 990. The current treasurer, Barbara Wilson, reviews the tax return. Part VI. Line 11b: Form 990 Review **Process** Form 990. The organization's expenditures are reviewed during the annual board meeting. In addition, the financials are reviewed line-by-Part VI. Line line annually by board member Barbara Wilson. 12c: Explanation of Monitorina and Enforcement of Conflicts Form 990. President's salary is based on industry standards. Part VI. Line 15a: Compensation Review & Approval Process -CEO. Top Management Form 990. Governing documents, conflict of interest policy and financial statements are available upon request. Part VI. Line 19: Other Organization **Documents Publicly** Available

Cat. No. 51056K

Schedule O (Form 990 or 990-EZ) 2019

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