Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Αŀ	or the	e 2023 calendar year, or tax year beginning and	enaing		
B c	heck if	C Name of organization		D Employer identific	cation number
	Addre	DC JUSTICE LAB			
	Name chang	Doing business as		**-***90	25
	Initial return Final return	1200 II STREET NW	Room/suite	E Telephone number 202-681-8	
	termin ated			G Gross receipts \$	2,403,446.
	Ameno			H(a) Is this a group re	
F	Applic			for subordinates	
	pendir			H(b) Are all subordinates in	····· — —
1 1	ax-exe	empt status: $X = 501(c)(3) = 501(c)(0)$ (insert no.) $4947(a)(1)(0)$	or 527	1	list. See instructions
	Vebsit			H(c) Group exemption	
K F	orm of	organization: X Corporation Trust Association Other	L Year	of formation: 2019 N	1 State of legal domicile; DC
	art I	Summary	•	<u>.</u>	
ė		Briefly describe the organization's mission or most significant activities: SEE S	SCHEDU	LE O FOR DES	SCRIPTION
Activities & Governance		OF MISSION			
ern	l	Check this box if the organization discontinued its operations or dispos		_	
Š	I			3	9
<u>«</u>		Number of independent voting members of the governing body (Part VI, line 1b)			13
ies		Total number of individuals employed in calendar year 2023 (Part V, line 2a)			9
Ęï		Total number of volunteers (estimate if necessary)			0.
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			0.
	B	Net unrelated business taxable income from Form 990-T, Part I, line 11		Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		1,392,809.	2,397,584.
	9			12,600.	3,500.
	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		604.	2,362.
	I	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,406,013.	2,403,446.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	I	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
G	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		776,346.	1,216,979.
JSe	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) 271,60	01.		
û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		433,661.	711,649.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,210,007.	1,928,628.
	19	Revenue less expenses. Subtract line 18 from line 12		196,006.	474,818.
PS			Ве	ginning of Current Year	End of Year
Net Assets or	20	Total assets (Part X, line 16)		1,145,845.	1,683,813.
t As	21	Total liabilities (Part X, line 26)		1,131.	64,281.
	22	Net assets or fund balances. Subtract line 21 from line 20		1,144,714.	1,619,532.
	art II	Signature Block			
		lties of perjury, I declare that I have examined this return, including accompanying schedules			knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer	has any knowledge.	
		Signature of officer		 Date	
Sigi				Date	
Her	е	PATRICE SULTON, EXECUTIVE DIRECTOR Type or print name and title			
			Τr	Date Check	PTIN
Paid	Ī	Preparer's signature ANDREW E. YOUNG, CPA ANDREW E. YOUNG,		if L	
	arer	Firm's name RENNER AND COMPANY CPA, P.C.	, CEAL		*-***8950
	Only	Firm's address 700 NORTH FAIRFAX STREET SUITE 40	0	FIIIII S EIN	0,50
JJC	Jiny	ALEXANDRIA, VA 22314		Phone no (7	03) 535-1200
Mar	the I	RS discuss this return with the preparer shown above? See instructions		Friione no. (7	X Yes No
ıvıay		D			21 1es NO

Pai	statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: DC JUSTICE LAB IS A TEAM OF LAW AND POLICY EXPERTS RESEARCHING,
	ORGANIZING, AND ADVOCATING FOR LARGE-SCALE CHANGES TO THE DISTRICT'S
	CRIMINAL LEGAL SYSTEM. WE DEVELOP SMARTER SAFETY SOLUTIONS THAT ARE
	EVIDENCE-DRIVEN, COMMUNITY-ROOTED, AND RACIALLY JUST. WE AIM TO FULLY
2	Did the organization undertake any significant program services during the year which were not listed on the
-	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 622,276
··u	ADVOCACY:
	WE SKILLFULLY PLAYED A LEADING ROLE IN ADVANCING REFORMS RELATED TO THE
	DECRIMINALIZATION OF STREET VENDING, THE ELIMINATION OF SOLITARY
	CONFINEMENT, THE ESTABLISHMENT OF A REPARATIONS TASK FORCE, AND THE
	<u> </u>
	IMPROVEMENT OF NUTRITIONAL STANDARDS IN LOCAL JAILS. WE CONTINUED TO
	SUPPORT PARTNER ORGANIZATIONS' WORK IN OTHER AREAS THAT LIMIT STATE
	VIOLENCE; ADVANCING OUR COMMITMENT TO COLLECTIVE IMPACT.
4b	(Code:) (Expenses \$ 437,166. including grants of \$) (Revenue \$)
710	RESEARCH:
	WE BECAME THE PREMIER SOURCE OF RESEARCH ON POLICING, PROSECUTION, AND
	PUNISHMENT IN THE DISTRICT WHEN WE LAUNCHED OUR DC JUSTICE LIBRARY IN
	2023. THE NO-COST LIBRARY IS A REPOSITORY OF THE MOST COMPREHENSIVE AND
	UP-TO-DATE RESEARCH ON PUBLIC SAFETY ISSUES IN WASHINGTON, D.C., WITH
	COLLECTIONS OF RELEVANT ARTICLES, AS WELL AS A SECTION THAT TEACHES
	READERS HOW TO UNDERSTAND THE LAWMAKING PROCESS AND EFFECTUATE CHANGE
	IN THE NATION'S CAPITAL.
4c	(Code:) (Expenses \$
	TRAINING:
	WE WELCOMED OUR FIRST CLASS OF DC JUSTICE FELLOWS, SELECTING TWO RECENT
	LAW GRADUATES THROUGH A HIGHLY COMPETITIVE PROCESS. THESE MOVEMENT
	LAWYERS IN TRAINING BEGAN AN INTENSIVE PROGRAM TO DEVELOP THEIR
	ADVOCACY SKILLS, STARTING WITH AN OVERVIEW OF D.C.'S POLICYMAKING
	·
	HISTORY AND AN IN-DEPTH ACCOUNT OF ITS IMPACT ON VULNERABLE
	POPULATIONS. WITH OUR SUPPORT, THEY ARE LEADING CAMPAIGNS TO
	DECRIMINALIZE SEX WORK, REFORM COMMUNITY SUPERVISION, REDUCE PRETRIAL
	INCARCERATION FOR FAILURE TO APPEAR IN COURT, AND ESTABLISH A
	REPARATIONS TASK FORCE.
	BUILDING ON OUR 2022 SAFETY SUMMIT, WE HOSTED OUR FIRST POLICY TRAINING
4d	Other program services (Describe on Schedule O.)
-	(Expenses \$ including grants of \$) (Revenue \$ 5,862.)
<u></u>	Total program service expenses 1, 259, 238.
70	Total program service expenses 1, 255, 250.

16331101 783690 21040.001

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Form 990 (2023) DC JUSTICE LAB Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		1
8	, ,			x
•	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			37
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	_X_	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
h	Was the organization included in consolidated, independent audited financial statements for the tax year?			
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the appropriation projection of the control of the Light of the Li	14a		X
14a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	 -a		
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
		14b		x
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		1
15		15		x
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40		_ v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			\ ₃₇
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			,,
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

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Form 990 (2023) DC JUSTICE LAB
Part IV Checklist of Required Schedules (continued)

22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, colorine, All (1997), and the properties of the Part IX, Section A. Ind. 3. 4, or 5, about compensation of the organization survert and former offices, directors, trustees, key employees, and highest compensated employees? If Y'eys, complete Schedule J. Part II				Yes	No
24 Dit the organization answer "Yes" to Part VI, Section A, line 3, 4, or 8, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? "Yes," complete Schedule J. "Yes," to the Vision of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after Decomber 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If 'Ne," to thine 25a Schedule K. If 'Ne," to thine 25a C DId the organization minimal many proceeds of tax-exempt bonds beyond a temporary period exception? 24b D DId the organization amount that man escrive account of the than a refunding secrov at any time during the year to defease any tax-exempt bonds? d DId the organization and as an 'no hehalf of' issuer for bonds outstanding story at any time during the year to defease any tax-exempt bonds? d DId the organization and as an 'no hehalf of' issuer for bonds outstanding story at any time during the year to defease any tax-exempt bonds? d DId the organization and as an 'no hehalf of' issuer for bonds outstanding story at my time during the year? 25c Section 50 (1054), 501(44), 400 50 (1054), 501(44), 400 50 (1054), 501(44), 400 50 (1054), 501(44), 400 50 (1054), 501(44), 400 50 (1054), 501(44), 400 50 (1054), 501(44), 400 50 (1054), 501(44), 400 50 (1054), 501(44), 400 50 (1054), 501(44), 400 50 (1054), 501(44), 400 50 (1054), 501(44), 501 50 (1054), 501(44), 501 50 (1054), 501(44), 501 50 (1054), 501(44), 501 50 (1054), 501(44), 501 50 (1054), 501(44), 501 50 (1054), 501(44), 501 50 (1054), 501(44), 501 50 (1054), 501(44), 501 50 (1054), 501(44), 501 50 (1054), 501(44), 501 50 (1054), 501(44), 501 50 (1054), 501(44), 501 50 (1054), 501(44), 501 50 (1054), 501(44), 501 50 (1054), 501(44), 501(44), 501 50 (1054), 501(44), 501(44), 501 50 (1054), 501(44), 501(44), 501(44), 501(44), 501(44), 501(44), 501(44), 501(44), 501(44), 501(44), 501(44), 501(44), 501(22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officers, directions, business, key employees, and highest compensated employees? If Y'es, 'complete Schedule L' Part IV. 23 X S 24a Did the organization have a tax-esempt bonds issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If Y'es, 'answer lines 240 through 24d and complete Schedule K. If Yio,' go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Did the organization minetal any exception of tax exempt bonds beyond a temporary period exception? 24d Did the organization meet as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d Did the organization available as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d Did the organization experience as an 'on behalf of' issuer for bonds outstanding at any time during the year? 25a Section 501(x)3, 501(x)4, and 501(x)20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in the present of the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction have the engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction have the engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction have the engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction have the engaged in an excess benefit transaction with an of the prior from 90 of 900 900 27 // Yes, "complete Schedule L, Part IV. 25b Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or a 35% controlled entity of one to a business transaction within and the following parties? (See the Schedule L, Part IV. 27c D		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
Schedule / Life 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? // "Yes," answer lines 24b through 24d and complete Schedule K. If "No." go to line 25e. Did the organization misses any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization misses any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization misses any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization misses any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization misses and "on behalf of" issue for bonds outstanding at any time during the year? Did the organization acts as an "on behalf of" issue for bonds outstanding at any time during the year? Did the organization acts as an "on behalf of" issue for bonds outstanding at any time during the year? Did the organization acts as an "on behalf of" issue for bonds outstanding at any time during the year? Did to the organization access benefit transaction by the organization engage in an excess benefit transaction has not been reported on any of the organization spond for forms 990 or 990-E27 // "Yes," complete Schedule L, Part I is 1. The schedule of the organization are provided and that the transaction has not been reported on any of the organization spond Forms 990 or 990-E27 // "Yes," complete Schedule L, Part I is 2. The schedule organization provide against organization and provide provide schedule L, Part I is 2. The A schedule A part is intrinsication schedule against organization access organization access organization access organization access organization access organi	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
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 Docember 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
stated day of the years, that was issued after December 31, 2002? ff "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a b Did the organization meet any proceeds of tax exempt bonds beyond a temporary period exception? c Did the organization meet any proceeds of tax exempt bonds beyond a temporary period exception? d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to deflease any tax exempt bonds? d Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 24d 25a Section 50(16)3, 501(04), 4m 501(0/29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Section 50(16)3, 501(04), 4m 501(0/29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25b Is the organization aware that tengaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete Schedule L, Part II 25c IX 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or former officer, director, fusitee, key employee thereod or family member of any of these persons? If "Yes," complete Schedule L, Part IV 10 A transportation required to a business transaction with one of the following parties? (See the Schedule L, Part IV 10 A a first formitted entity of one or more individuals and/or organizations described in line 28a or 28b // "Yes," complete Schedule II, Part I		Schedule J	23	X	
Schedule K. If "No." po to line 25a. Schedule K. If "No." po to line 25a. Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? did bid the organization act as an "on behalf of" issuer for bonds cutstanding at any time during the year? 24d Did the organization act as an "on behalf of" issuer for bonds cutstanding at any time during the year? 25a Section 501(c/3), 501(c/16), and 501(c/23) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any or the organizations prior forms 990 or 990/E2? If "Yes," complete Schedule L, Part I yes, "complete Schedule L, Part I yes, "organization prior forms or the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or substantial contributor or organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or former officer, director, trustee, key employee, creato	24a				
b Dd the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? c Dd the organization maintain an escrow account other than a refunding scrow at any time during the year to defease any tax exempt bonds? d Did the organization and at as an 'no behalf of' issuer for bonds outstanding at any time during the year? d Did the organization are said in the said of 'issuer for bonds outstanding at any time during the year? 24d		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
c Did the organization maintain an escrew account other than a refunding escrew at any time during the year to defease any tax-exempt bonds? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Saction 501(x)(3), 501(x)(4), and 501(x)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "yes," complete Schedule I., Part I 25a X b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990 EZ? If "Yes," complete Schedule I., Part I 25b X 25b Did the organization provide a grant or other assistance to any current or former officer, director, frustee, key employee, creater or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I., Part II 27 X X X X X X X X X					<u> X</u>
any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(x)3, 501(x)4, and 501(x)29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a		· · · · · · · · · · · · · · · · · · ·	24b		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 255 Section 501(2)(3), 501(4)(4), and 501(4)(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 25 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 Former \$50 or 950E-27! If "Yes," complete Schedule L, Part I 25 Did 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 Former \$50 or 950E-27! If "Yes," complete Schedule L, Part II 26 Schedule L, Part I Yes, complete Schedule L, Part II Yes, complete Schedule L, Part II 27 Zib Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a \$50 controlled entity forcluding an employee thereof) of family member of any of these persons? If "Yes, complete Schedule L, Part II 28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part II 29 Land A laminy member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 29 Land A laminy member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 29 Land The organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule II, Part IV 29 Land The organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule II, Part II 29 Land The organization receive contributions of at historical treasures, or other similar assets, or qualified conservation contributions?	С	, , ,			
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 I, Part I 25a X b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization prior Forms 900 or 900-E27 (If "Yes," complete Schedule I, Part I) 25b X 25b ID the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? (If "Yes," complete Schedule I, Part II 26b X 27c Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 95% controlled entity (Including an employee thereof) or family member of any of these persons? (If "Yes," complete Schedule I, Part II) 27c X 28b 28c					
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 organizations prior from \$90 or 990-EZ* // n*Yes,* complete Schedule L, Part I . 25b			24d		
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-E27 // 11/95," complete Schedule L, Part I	25a				\ .
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any or threes persons? If "Yes," complete Schedule L, Part III 27 X was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part III 27 X and A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28 X X A Sign controlled entity of one or more individual described in line 28a? If "Yes," complete Schedule L, Part IV 28 X X X X X X X X X X X X X X X X X X			25a		<u> </u>
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		(gambling) winnings to prize winners?	1c	000	

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Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)								
			Yes	No					
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return 2a	3							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		_					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u> </u>					
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			١					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>		+					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			 ₩					
	any contributions that were not tax deductible as charitable contributions?	6a	+	<u> </u>					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
-	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	, 70		х					
a		?		+*					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	10	+	+					
C	to file Form 8282?	7c		x					
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70							
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х					
_	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?								
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							
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		\perp					
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 facilities	_							
11	Section 501(c)(12) organizations. Enter:								
	Gross income from members or shareholders	4							
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)	٠.							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	\dashv							
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a	_						
а	Note: See the instructions for additional information the organization must report on Schedule O.	136	1						
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans								
С	Enter the amount of reserves on hand	7							
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14k							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		Х					
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			1					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
	If "Ves " complete Form 6069								

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

	Check if Schedule O contains a response or note to any line in this Part VI					X				
Sec	tion A. Governing Body and Management									
					Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		9						
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.									
b	Enter the number of voting members included on line 1a, above, who are independent	1b		9						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with ar	y other							
	officer, director, trustee, or key employee?			2		X				
3	Did the organization delegate control over management duties customarily performed by or under the	direct	supervision							
				3		X				
4	Did the organization make any significant changes to its governing documents since the prior Form 99	00 was	filed?	4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's asse	ets?		5		X				
6										
7a	Did the organization have members, stockholders, or other persons who had the power to elect or app									
	more members of the governing body?			7a		Х				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto									
	persons other than the governing body?			7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year									
а	The governing body?			8a	X					
b	Each committee with authority to act on behalf of the governing body?			8b		Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read									
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		Х				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	enue C	ode.)							
			,		Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х				
	If "Yes," did the organization have written policies and procedures governing the activities of such cha									
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	before	filing the form?	11a	Х					
b	b Describe on Schedule O the process, if any, used by the organization to review this Form 990.									
12a	2a Did the organization have a written conflict of interest policy? If "No," go to line 13									
b										
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye	es," des	scribe							
	on Schedule O how this was done			12c	X					
13	Did the organization have a written whistleblower policy?			13	X					
14	Did the organization have a written document retention and destruction policy?			14	Х					
15	Did the process for determining compensation of the following persons include a review and approval	by inde	ependent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official			15a	X					
b	Other officers or key employees of the organization			15b		X				
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ent wit	n a							
	taxable entity during the year?			16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	e its pai	ticipation							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization	zation's	3							
	exempt status with respect to such arrangements?			16b						
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	d 990-T	(section 501(c)(3)s only)	availa	ble				
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X Upon request Other (explain	on Sch	edule O)							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, con	nflict of	interest policy, ar	nd finan	cial					
	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's book	ks and	records							
	THE ORGANIZATION - 202-681-8783									
	1200 U STREET, NW, WASHINGTON, DC 20009									

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

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

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

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

(A)	(B)	d organization compensated a		(D)	(E)	(F)				
Name and title	Average	(do		Pos		າ than ເ	one	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	rson i	is both or/trus	n an	compensation	compensation	amount of
	week (list any	-				T	100)	from the	from related organizations	other compensation
	hours for	direct				Ļ		organization	(W-2/1099-MISC/	from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ll trus	nal tru		loyee	om pe		1099-NEC)		and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) PATRICE SULTON	40.00	=	=	0		Ξ ω	4			
EXECUTIVE DIRECTOR		1		Х				174,200.	0.	13,085.
(2) NAIKE SAVAIN	40.00									
DIRECTOR OF POLICY						Х		125,162.	0.	10,875.
(3) EMILY TATRO	40.00									
DIRECTOR OF GOVERNMENT AND EXTERNAL						Х		123,729.	0.	11,025.
(4) JASON ZIEDENBERG	40.00								_	
DIRECTOR OF RESEARCH AND PUBLICATION						X		103,118.	0.	12,986.
(5) DONALD BRAMAN	5.00	J								
CHAIR		Х		Х		_		0.	0.	0.
(6) CHANELL AUTREY	5.00								•	•
VICE CHAIR	F 00	Х		Х		_		0.	0.	0.
(7) LAUREN JOHNSON	5.00	٠,,		,,					0	0
TREASURER	F 00	Х		Х		┝		0.	0.	0.
(8) SAMRA LAKEW SECRETARY	5.00	х		х				0.	0.	0.
(9) JULIENE JAMES	2.00	Α		^		\vdash		0.	0.	0.
FUND DEVELOPMENT DIRECTOR	2.00	Х						0.	0.	0.
(10) CLINIQUE MARSHALL CHAPMAN	2.00					\vdash		0.	0.	0.
DIRECTOR	2.00	х						0.	0.	0.
(11) JADE CHONG-SMITH	2.00								<u> </u>	
DIRECTOR		Х						0.	0.	0.
(12) KYLE DOMAN	2.00									
DIRECTOR		Х						0.	0.	0.
(13) ED LAZERE	2.00									
DIRECTOR		Х						0.	0.	0.
		<u> </u>				┞	_			
						\vdash				
				<u> </u>						000

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

(C) (D) (E) (F)

(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			than d is both	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other				
	(list any hours for related organizations below line)	Individual trustee or director	In stit utional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)		composition from the compositi	ensat m the nizati relate	e on ed
										\perp			
										\perp			
										\perp			
										\perp			
										\perp			
1b Subtotal c Total from continuation sheets to Part VI								526,209.	0).			71.
d Total (add lines 1b and 1c) Total number of individuals (including but n								526,209. eceived more than \$100,).	47	<u>,9</u>	71.
compensation from the organization												/es	No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the su and related organizations greater than \$150	ım of reportabl	е со	mpe	nsa	tion	and	oth	er compensation from t	he organization		4	x	
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	ccrue compen	satio	on fr	om	any	unre	elate	ed organization or individ	dual for services		5		Х
Section B. Independent Contractors 1 Complete this table for your five highest co	-									nsatio	on fron	n	
the organization. Report compensation for	•	•						the organization's tax y	•		(C)		
(A) Name and business	address	NC	NE	<u> </u>				(B) Description of s	ervices	Со	mpens		<u> </u>
O Tabel number of trades and the design of t	a almatica en la de	-4 "		14	Lle	!!		ale arra) urba mari di	ava the are				
Total number of independent contractors (ii \$100,000 of compensation from the organization)	•	JT IIM	iited	101)	rea	above) who received mo	ore than		orm 9	90 <i>(c</i>	2000)

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Form 990 (2023) DC JUSTICE LAB
Part VIII Statement of Revenue

			Check if Schedule O contains a resp	onse (or note to any lin	e in this Part VIII			
			Officer if Correcting Contains a resp	01130 (or riote to arry iii	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded
							function revenue	business revenue	from tax under sections 512 - 514
									SECTIONS 212 - 214
Contributions, Gifts, Grants and Other Similar Amounts	1		Federated campaigns 1a						
iz on			Membership dues 1b						
S, O		С	Fundraising events1c						
ij.k		d	Related organizations 1d						
s, C		е	Government grants (contributions) 1e						
Sign		f	All other contributions, gifts, grants, and						
he			similar amounts not included above 1f	2,	397,584.				
즐		a	Noncash contributions included in lines 1a-1f		-				
Š		_	Total. Add lines 1a-1f	*		2,397,584.			
<u> </u>		<u> </u>	Total Add in 65 Ta 11		Business Code				
_	- DDOCDAM CUDDODM 0				812900	3,500.	3,500.		
ice	2				012300	3,300.	3,300.		
e er		b							
n S		С							
rar Se		d							
Program Service Revenue		е							
٩			All other program service revenue						
		g	Total. Add lines 2a-2f			3,500.			
	3		Investment income (including dividends,	intere	st, and				
			other similar amounts)						
	4		Income from investment of tax-exempt b	ond p	roceeds				
	5		Royalties						
			(i) Rea	al	(ii) Personal				
	6	а	Gross rents 6a						
			Less: rental expenses 6b						
			Rental income or (loss) 6c						
			Net rental income or (loss)						
			Gross amount from sales of (i) Secur	ties	(ii) Other				
	′	a	(7	1100	(ii) Other				
			assets other than inventory 7a						
		D	Less: cost or other basis						
Revenue			and sales expenses						
ě			Gain or (loss) 7c						
æ			Net gain or (loss)		 I				
her	8	а	Gross income from fundraising events (not						
ŏ			including \$ of						
			contributions reported on line 1c). See						
			Part IV, line 18	8a					
		b	Less: direct expenses	8b					
		С	Net income or (loss) from fundraising even	nt <u>s</u>					
	9	а	Gross income from gaming activities. Se	e					
			Part IV, line 19	9a					
		b	Less: direct expenses						
			Net income or (loss) from gaming activitie						
			Gross sales of inventory, less returns						
		_	and allowances	10a					
		h	Less: cost of goods sold						
			Net income or (loss) from sales of inventor						
$\overline{}$		_	THE INCOME OF GOSSI HOM Sales OF HIVEHILL	, y	Business Code				
ns	44	_	OTHER INCOME		900099	2,362.	2,362.		
Miscellaneous Revenue	11				700077	2,302.	2,302.		
llar en		b							
sce Be		C	All other versus						
Ξ̈́			All other revenue			2 262			
		e	Total. Add lines 11a-11d			2,362.	E 0.00		^
	12		Total revenue. See instructions			2,403,446.	5,862.	0.	0.

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Form 990 (2023) DC JUSTICE LAB Part IX Statement of Functional Expenses

Costion 501/a)/(1) and 501/a)/(4) associations must complete all columns All other exeminations must complete column (A)												
Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX											
		se or note to any line in		(C)								
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses							
1	Grants and other assistance to domestic organizations											
	and domestic governments. See Part IV, line 21											
2	Grants and other assistance to domestic											
_	individuals. See Part IV, line 22											
3	Grants and other assistance to foreign											
3												
	organizations, foreign governments, and foreign											
	individuals. See Part IV, lines 15 and 16											
4	Benefits paid to or for members											
5	Compensation of current officers, directors,	107 005	140 200	22 (55	15 041							
	trustees, and key employees	187,285.	149,389.	22,655.	15,241.							
6	Compensation not included above to disqualified											
	persons (as defined under section 4958(f)(1)) and											
	persons described in section 4958(c)(3)(B)	000 10-		100 515								
7	Other salaries and wages	828,485.	660,846.	100,216.	67,423.							
8	Pension plan accruals and contributions (include											
	section 401(k) and 403(b) employer contributions)											
9	Other employee benefits	112,427.	91,609.	17,583.	3,235.							
10	Payroll taxes	88,782.	71,181.	10,788.	6,813.							
11	Fees for services (nonemployees):											
а	Management											
	Legal											
	Accounting	60,260.		60,260.								
	Lobbying	,		,								
	Professional fundraising services. See Part IV, line 17											
f	Investment management fees				-							
	Other. (If line 11g amount exceeds 10% of line 25,											
9	column (A), amount, list line 11g expenses on Sch O.)	410,078.	178,892.	108,206.	122,980.							
12	Advertising and promotion	120 / 0 / 0 0	270,0320	200,2000								
13		72,847.	35,861.	33,747.	3,239.							
14	Office expenses	2,440.	512.	1,558.	370.							
15	Information technology	2,110.	312.	1,330.	370.							
	Royalties	6,848.		6,848.								
16	Occupancy	29,985.	13,882.	15,450.	653.							
17	Travel	27,703.	13,002.	13,430.	055•							
18	Payments of travel or entertainment expenses											
	for any federal, state, or local public officials	120,540.	53,717.	15,176.	51,647.							
19	Conferences, conventions, and meetings	140,340.	55,/1/•	13,170.	JI,04/.							
20	Interest											
21	Payments to affiliates	2 014	2 000	015								
22	Depreciation, depletion, and amortization	3,914.	3,099.	815.								
23	Insurance	4,487.		4,487.								
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If											
	line 24e amount exceeds 10% of line 25, column (A),											
	amount, list line 24e expenses on Schedule 0.)											
а	DONATIONS	250.	250.									
b												
С												
d												
	All other expenses	1 000 600	1 050 030	207 700	071 601							
25	Total functional expenses. Add lines 1 through 24e	1,928,628.	1,259,238.	397,789.	271,601.							
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)				000							

Form 990 (2023) Part X | Balance Sheet

Par	tΧ	Balance Sheet					
		Check if Schedule O contains a response or no	ote to an	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	523,751.	1	158,190		
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net				3	1,493,642
	4	Accounts receivable, net			593,307.	4	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub					
		controlled entity or family member of any of the	ese pers	ns		5	
	6	Loans and other receivables from other disqua	lified per	sons (as defined			
		under section 4958(f)(1)), and persons describe	ed in sec	ion 4958(c)(3)(B)		6	
ę l	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
₹	9	Prepaid expenses and deferred charges			16,667.	9	13,333
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		26,409.			
	b	Less: accumulated depreciation		7,761.	12,120.	10c	18,648
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			1 1 1 5 5 1 5	15	4 600 040
_	16	Total assets. Add lines 1 through 15 (must eq			1,145,845.	16	1,683,813
	17	Accounts payable and accrued expenses	1,131.	17	64,281		
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to any current or for					
┋╽		trustee, key employee, creator or founder, sub				00	
Liabilities	00	controlled entity or family member of any of the				22	
	23	Secured mortgages and notes payable to unre		· · · · · · · · · · · · · · · · · · ·		23 24	
	24 25	Unsecured notes and loans payable to unrelate		Г		24	
	23	Other liabilities (including federal income tax, p parties, and other liabilities not included on line					
				·		25	
	26	of Schedule D Total liabilities. Add lines 17 through 25		Г	1,131.	26	64,281
	20	Organizations that follow FASB ASC 958, ch				20	01/201
es		and complete lines 27, 28, 32, and 33.					
ဋ	27	Net assets without donor restrictions			1,144,714.	27	-18,324
, ga	28	Net assets with donor restrictions			, , ,	28	1,637,856
ᅙ		Organizations that do not follow FASB ASC					
Ξ∣		and complete lines 29 through 33.					
ğ	29	Capital stock or trust principal, or current fund	S			29	
sets 	30	Paid-in or capital surplus, or land, building, or e				30	
As	31	Retained earnings, endowment, accumulated i				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			1,144,714.	32	1,619,532
_	33	Total liabilities and net assets/fund balances			1,145,845.	33	1,683,813

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,40				
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,92				
3	Revenue less expenses. Subtract line 2 from line 1	3		4,8			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,14	4, 7	14.		
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	1,61	9,5	32.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				X		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.						
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X			
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b				
			Form	990	(2023)		

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

Open to Published Inspection

OMB No. 1545-0047

QUZJ
Open to Public

Name of the organization **Employer identification number** DC JUSTICE LAB **-***9025 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")		490,646.	1220714.	1392809.	2397584.	5501753.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3		490,646.	1220714.	1392809.	2397584.	5501753.
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)						2560844.
6	Public support. Subtract line 5 from line 4.						2940909.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4		490,646.	1220714.	1392809.	2397584.	5501753.
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.)					2,362.	2,362.
11	Total support. Add lines 7 through 10						5504115.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	22,100.
13	First 5 years. If the Form 990 is for th	ne organization's fi				01(c)(3)	
	organization, check this box and stop) here					X
Se	ction C. Computation of Publi						
14	Public support percentage for 2023 (I	ine 6, column (f), d	livided by line 11, o	olumn (f))		14	%
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2023. If the	organization did no	ot check the box or	n line 13, and line	14 is 33 1/3% or m	ore, check this box	c and
	stop here. The organization qualifies	as a publicly supp	orted organization				
k	33 1/3% support test - 2022. If the o						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	on qualifies as a pu	blicly supported or	rganization		
k	10% -facts-and-circumstances test	-	•		-		
	more, and if the organization meets the	-					
	organization meets the facts-and-circu				-		
18	Private foundation. If the organization						<u> </u>
							(Form 990) 2023

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	etion A. Public Support	siow, picase comp	oloto i dit ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
		(a) 2013	(6) 2020	(6) 2021	(d) ZOZZ	(6) 2020	(i) rotai
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is						
12	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organizatio	on,
	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2023 (li	ne 8, column (f), c	divided by line 13,	column (f))		15	%
	Public support percentage from 2022					16	%
Sec	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20	23 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from 2	2022 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2023. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization qual	ifies as a publicly s	supported organiza	ation	
b	33 1/3% support tests - 2022. If the line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization						

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
_		
1		
2		
2		
За		
- Ou		
3b		
3с		
4a		
4b		
4c		
F -		
5a		
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5c		
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9a		
9b		
36		
9с		
33		
10a		
10b		
ule A (Forn	n 990)	2023

332024 12-21-23

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations			
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	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,			
C1	supervised, or controlled the supporting organization.	2		
Sect	tion C. Type II Supporting Organizations			
			Yes	No
	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			
<u> </u>	the supported organization(s).	1		
Sect	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ns).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instruction		
	Activities Test. Answer lines 2a and 2b below.		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b	i l	

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on I	Nov. 20, 1970 (explain in l	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu		·	•
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8_	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrate	ed Type III supporting orga	nization (see

Schedule A (Form 990) 2023

instructions).

Schedule A (Form 990) 2023

b Excess from 2020 c Excess from 2021 d Excess from 2022 e Excess from 2023 DC JUSTICE LAB **-***9025

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2023

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
PUBLIC WELFARE FOUNDATION	801,000.	690,918.
DIANE AND NORMAN BERNSTEIN FOUNDATION	150,000.	39,918.
CHARLES AND LYNN SCHUSTERMAN FAMILY FOUNDATION	325,000.	214,918.
HUMANITY UNITED	275,000.	164,918.
ACTION NOW INITIATIVE LLC	200,500.	90,418.
LIBERATED CAPITAL DECOLONIZING WEALTH FUND	140,000.	29,918.
MEYER FOUNDATION	800,000.	689,918.
FWD.US EDUCATION FUND	750,000.	639,918.
Total Excess Contributions to Schedule A, Part II, Line 5		2,560,844.

Schedule B

(Form 990)

Schedule of Contributors

OMB No. 1545-0047

-*9025

Department of the Treasury Internal Revenue Service

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

Name of the organization **Employer identification number**

DC JUSTICE LAB Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions 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 \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2023)

Name of organization

Employer identification number

DC JUSTICE LAB

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GREATER WASHINGTON COMMUNITY FOUNDATION 1325 G ST NW #480	\$1,000,000.	Person X Payroll
_	WASHINGTON, DC 20005		noncash contributions.)
(a) <u>N</u> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	PUBLIC WELFARE FOUNDATION		Person X Payroll
	1200 U STREET NW #3 WASHINGTON, DC 20009	\$ 601,000.	Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3	DIANE AND NORMAN BERNSTEIN FOUNDATION 5301 WISCONSIN AVE NW, SUITE 500	\$ <u>150,000.</u>	Person X Payroll Noncash (Complete Part II for
(a)	WASHINGTON, DC 20015 (b)	(c)	noncash contributions.) (d)
No. 4	Name, address, and ZIP + 4 CHARLES AND LYNN SCHUSTERMAN FAMILY FOUNDATION	Total contributions	Type of contribution Person X Payroll
	P.O. BOX 51 TULSA, OK 74101	\$ 125,000.	Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	LIBERTED CAPITAL DECOLONIZING WEALTH FUND SOCIAL GOOD FUND 12651 SAN PABLO AVE #5473	\$ 100,000.	Person X Payroll Noncash
	RICHMOND, CA 94805		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	HUMANITY UNITED		Person X
	1700 PENNSYLVANIA AVE NW	\$\$	Payroll Noncash (Complete Part II for
	WASHINGTON, DC 20006		noncash contributions.)

Name of organization

Employer identification number

DC JUSTICE LAB

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	ACTION NOW INITIATIVE LLC 1717 WEST LOOP S HOUSTON, TX 77027	\$\$0,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	THE JORDAN BRAND BLACK COMMUNITY ONE BOWERMAN DRIVE BEAVERTON, OR 97005	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	MICHAEL JORDAN P.O. BOX 7082 NEW YORK, NY 10008	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	NATIONAL RELIGIOUS CAMPAIGN AGAINST TORTURE UNLOCK THE BOX C PO BOX 91820 WASHINGTON, DC 20090	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	IF, A FOUNDATION FOR RADICAL POSSIBILITY 1200 U STREET NW WASHINGTON, DC 20009	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	LOIS AND RICHARD ENGLAND FAMILY FOUNDATION 3 BETHESDA METRO CTR NO. 960 BESTHESDA, MD 20814	\$ 25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

DC JUSTICE LAB

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	ECHOING GREEN FELLOWSHIP 462 7TH AVENUE, 13TH FLOOR NEW YORK, NY 10018	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4 MORDER AND CHENDOLYN, CAEDING	(c) Total contributions	(d) Type of contribution
14	MORRIS AND GWENDOLYN CAFRITZ FOUNDATION 1825 K STREET NW SUITE 1400 WASHINGTON, DC 20006	\$ <u>20,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15	FIDELITY DONOR ADVISED FUND 245 SUMMER ST BOSTON, MA 02210	\$ 10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	THE MILLER-WEHRLE FAMILY FOUNDATION 5448 33RD ST NW WASHINGTON, DC 20015	\$ 10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>17</u>	SOUTH ASIAN BAR ASSOCIATION OF WASHINGTON D.C. P.O. BOX 65349 WASHINGTON, DC 20035	s6,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
323452 12,295		- - \$	Person Payroll Complete Part II for noncash contributions.

Name of organization

Employer identification number

DC JUSTICE LAB

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

Schedule B (Form 990) (2023) Page 4 Name of organization **Employer identification number** **-***9025 DC JUSTICE LAB Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

323454 12-26-23

Schedule B (Form 990) (2023)

SCHEDULE C

Department of the Treasury

Internal Revenue Service

(Form 990)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

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:

Tax) (see separate instructions), then:

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

Name of organization

Employer identification numbers

Name of organization	итсе тар		E	Employer identification number * * - * * * 9 0 2 5		
	TICE LAB rganization is exempt und	der section 501(c)	or is a section 527			
 Provide a description of the orga Political campaign activity exper Volunteer hours for political cam 	nization's direct and indirect politi ditures	cal campaign activities	in Part IV.	. \$		
Part I-B Complete if the c	rganization is exempt und	der section 501(c)	(3).			
 Enter the amount of any excise t Enter the amount of any excise t If the organization incurred a sec Was a correction made? If "Yes," describe in Part IV. 	ax incurred by organization manag tion 4955 tax, did it file Form 4720	gers under section 4955) for this year?	5	Yes No		
Part I-C Complete if the c	rganization is exempt und	der section 501(c)	, except section 50)1(c)(3).		
 2 Enter the amount of the filing orgen exempt function activities 3 Total exempt function expendituline 17b 4 Did the filing organization file Footen Enter the names, addresses, and made payments. For each organ contributions received that were 	1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$ 4 Did the filing organization file Form 1120-POL for this year? Yes No.					
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization funds. If none, enter	's contributions received and		

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

Schedule C (Form 990) 2023

	nedule C (Form 990) 2023 DC JUSTICE LAB **-***9025 Page 2							
Pa	art II-A	Complete if the org	anization is e	xempt ı	under section	501(c)(3) and file	d Form 5768 (ele	ction under
	<u> </u>	section 501(h)).				D 107 1 500 1 1		
Α	Check		-			Part IV each affiliated	group member's name	e, address, EIN,
_	011-	expenses, and shar	,	•	,	. data a a a a a b		
<u>B</u> _	Check	if the filing organiza Limi (The term "expendent	(a) Filing organization's totals	(b) Affiliated group totals				
1	a Total lob	bbying expenditures to influ	ience public opin	ion (grassi	roots lobbying)		2,353.	
		bying expenditures to influ			t. I . I . I		12,094.	
		obying expenditures (add li	•		, ,,		14,447.	
		cempt purpose expenditure					1,244,541.	
		empt purpose expenditure					1,258,988.	
		g nontaxable amount. Ente	-				200,899.	
		ount on line 1e, column (a) o			nontaxable am			
	not over	\$500,000,	209	% of the ar	mount on line 1e.			
	over \$50	00,000 but not over \$1,000	,000, \$10	00,000 plu	ıs 15% of the exce	ess over \$500,000.		
	over \$1,	000,000 but not over \$1,50	00,000, \$17	75,000 plu	s 10% of the exce	ess over \$1,000,000.		
	over \$1,	500,000 but not over \$17,0	000,000, \$22	25,000 plu	s 5% of the exces	ss over \$1,500,000.		
	over \$17	7,000,000,	\$1,	000,000.				
	g Grassro	ots nontaxable amount (en	ter 25% of line 1f)				50,225.	
	h Subtrac	t line 1g from line 1a. If zer	o or less, enter -0-				0.	
	i Subtrac	t line 1f from line 1c. If zero	or less, enter -0-				0.	
	j If there i	s an amount other than ze	ro on either line 1	h or line 1	i, did the organiza	tion file Form 4720	_	
	reportin	g section 4911 tax for this	year?					Yes No
		(Some organizations the	nat made a secti	on 501(h)		` '	of the five columns be	elow.
			Lobbying E	xpenditu	res During 4-Yea	r Averaging Period		
		Calendar year al year beginning in)	(a) 2020		(b) 2021	(c) 2022	(d) 2023	(e) Total
2	a Lobbyin	g nontaxable amount			133,874.	196,001.	200,899.	530,774.
	•	g ceiling amount f line 2a, column(e))						796,161.

2,353. 20,335. Schedule C (Form 990) 2023

47,064.

132,694.

199,041.

14,447

50,225.

6,000.

33,469.

1,500.

c Total lobbying expenditures

d Grassroots nontaxable amount e Grassroots ceiling amount

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

f Grassroots lobbying expenditures

26,617.

49,000.

16,482.

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

1 Du loo or a Vo b Pa c M d M e Pu f G g Di h Ra i Ott	bibying activity. uring the year, did the filing organization attempt to influence foreign, national, state, or cal legislation, including any attempt to influence public opinion on a legislative matter referendum, through the use of: blunteers? aid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes	No	Amo	ount
loo or a Vo b Pa c M d M e Po f Go g Di h Ra i Ot	cal legislation, including any attempt to influence public opinion on a legislative matter referendum, through the use of: ollunteers? aid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
orra volument of the control of the	referendum, through the use of: olunteers? aid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
a Volume Puf Gin Rai Onto	olunteers? sid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
b Pa c M d M e Pu f Gi g Di h Ra i Ot	aid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c M d M e Pu f Gi g Di h Ra i Of					
d M e Pu f Gi g Di h Ra i Ot	edia advertisements?				
e Pu f Gi g Di h Ra i Ot					
f Gi g Di h Ra i Ot	ailings to members, legislators, or the public?				
g Di h Ra i Ot	ıblications, or published or broadcast statements?				
h Ra i Ot	ants to other organizations for lobbying purposes?				
i Ot	rect contact with legislators, their staffs, government officials, or a legislative body?				
	allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	her activities?				
	tal. Add lines 1c through 1i				
	d the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
	'Yes," enter the amount of any tax incurred under section 4912				
	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?	501(a)(5)	or coc	tion	
Faiti	501(c)(6).	1 30 1 (0)(3)	, or sec	LIOII	
	(-)(-)			Yes	No
1 W	ere substantially all (90% or more) dues received nondeductible by members?		1		
	d the organization make only in-house lobbying expenditures of \$2,000 or less?				
	d the organization agree to carry over lobbying and political campaign activity expenditures from the		3		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."			A, IIIIC	J, 15
	ues, assessments and similar amounts from members		. 1		
	ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	aı			
	penses for which the section 527(f) tax was paid).		20		
	urrent year				
	arryover from last year				
	otal gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
-	notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce				
	es the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po				
	penditures next year?		4		
	xable amount of lobbying and political expenditures. See instructions	5			
Part I			. , -		
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 I	ist); Part II-A	lines 1 a	nd 2 (see	
instructi	ons); and Part II-B, line 1. Also, complete this part for any additional information.				

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

DC JUSTICE LAB

Employer identification number **-***9025

Pa	rt I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		imilar Funds or <i>F</i>	Accounts. Complete if the
		(a) Donor advise	ed funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets he	eld in donor advised fu	nds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for ar	y other purpose confe	erring
	impermissible private benefit?			Yes No
Pai	rt II Conservation Easements. Complete if the organic	anization answered "Ye	s" on Form 990, Part I	V, line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).		
	Preservation of land for public use (for example, recreati	ion or education)	Preservation of a his	storically important land area
	Protection of natural habitat		Preservation of a ce	rtified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contrib	ution in the form of a	conservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				
С				
d	Number of conservation easements included on line 2c acquir	red after July 25, 2006,	and not	
	on a historic structure listed in the National Register	•		2d
3	Number of conservation easements modified, transferred, rele			
	year	-		-
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the period		tion, handling of	
	violations, and enforcement of the conservation easements it l	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h			
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and en	forcing conservation e	easements during the year
8	Does each conservation easement reported on line 2d above s	satisfy the requirements	of section 170(h)(4)(B	(i)
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's	financial statements t	that describes the
	organization's accounting for conservation easements.			
Pa	rt III Organizations Maintaining Collections of	Art, Historical Tre	asures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	B, not to report in its rev	enue statement and ba	alance sheet works
	of art, historical treasures, or other similar assets held for publ	lic exhibition, education	, or research in further	ance of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that des	cribes these items.	
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue	e statement and balan	ce sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, o	r research in furtheran	ce of public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
	(m)			•
2	If the organization received or held works of art, historical trea-	sures, or other similar a	ssets for financial gair	ı, provide
	the following amounts required to be reported under FASB AS	SC 958 relating to these	items:	
а	Revenue included on Form 990, Part VIII, line 1			\$
	Assets included in Form 990, Part X			<u> </u>
LHA	For Paperwork Reduction Act Notice, see the Instructions		<u></u>	Schedule D (Form 990) 2023

	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or	Other S	Similar	Assets	(contin		.gc —
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that n	nake sign	ificant us	se of its			
	collection items (check all that apply).									
а	Public exhibition	d	Loan or exc	hange progran	n					
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how they further th	e organization	's exemp	t purpos	e in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations o	f art, historical treas	sures, or other	similar as	sets				
	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arran		te if the organization	answered "Ye	es" on Fo	rm 990, I	Part IV, li	ne 9, or		
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodi							7		ı
	on Form 990, Part X?						L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	lowing table:							
								Amount		
	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f		-	_	
	Did the organization include an amount on Fo		*		•	?	L	Yes	Ш	No
	If "Yes," explain the arrangement in Part XIII.									
Par	T V Endowment Funds Complete if					1 Thron w	oro book	(a) Four	vooro b	
		(a) Current year	(b) Prior year	(c) Two years	Dack (a) Tillee ye	ears back	(e) Four	years n	<u>ack</u>
	Beginning of year balance	714,000.	714 000							
b	Contributions	1,350,000.	714,000.							
С.	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities	426 144								
	and programs	426,144.								
	Administrative expenses	1,637,856.	714 000							
g	End of year balance	· · · ·	714,000.	\						
2	Provide the estimated percentage of the curr	ent year end balance) neid as:						
a	Board designated or quasi-endowment	0.4	_%							
b	Permanent endowment Term endowment 100	%								
С										
2-	The percentages on lines 2a, 2b, and 2c shows the response of the percentages on lines 2a, 2b, and 2c shows the response of the percentages of the percentage of the per	•	tion that are hold an	d administars	d for the					
Sa	Are there endowment funds not in the posse	SSION OF THE Organiza	tion that are neid ar	iu auriiriisteret	u ioi tile			Г	Yes	No
	organization by: (i) Unrelated organizations?							3a(i)		X
	(m) = 1 · · · · · · · · · · · · · · · · · ·							3a(ii)		X
h	If "Yes" on line 3a(ii), are the related organiza	tions listed as require						3b		
4	Describe in Part XIII the intended uses of the							- GD		
	t VI Land, Buildings, and Equipm		willent fulfus.							
	Complete if the organization answere		, Part IV, line 11a. S	ee Form 990, F	Part X, lin	e 10.				
	Description of property	(a) Cost or o	ther (b) Cost	or other	(c) Acc	umulated	- I	(d) Book	value	
	2000	basis (investm		(other)		eciation	_	(4, 200.		
1a	Land	<u> </u>								
	Buildings									
c	Leasehold improvements									
d	Equipment		2	6,409.		7,76	1.	18	,64	8.
	Other			-					-	
	l. Add lines 1a through 1e. <i>(Column (d) must</i> e		X. line 10c column	(B))				18	,64	8.
		<u>, , , , , , , , , , , , , , , , , , , </u>		;			Schedule			

Schedule D (Form 990) 2023 DC JUSTICE	LAB	**	-***9025 Page
Part VII Investments - Other Securities			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 000 Part IV line	11d Soo Form 990 Part V line 15	
	Description	Tru. Gee Form 930, Fart X, line 13.	(b) Book value
	Description		(b) Book value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, co	I. (B))		
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	i.
1. (a) Description of liability	, , , , , , , , , , , , , , , , , , , ,	,	(b) Book value
······································			(D) Doon Tallace
· · · · · · · · · · · · · · · · · · ·			
(2)			
(3)			
(4)			1
(5)			
(6)			
(7)			
(8)			
(9)			1
			<u> </u>
Total. (Column (b) must equal Form 990. Part X, line 25. co	I. (B))		

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII Schedule D (Form 990) 2023

	edule D (Form 990) 2023 DC JUSTICE LAB		**-**9U25	Page 4
Par	rt XI Reconciliation of Revenue per Audited Financial Sta		e per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV,			
1			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2a		
	3 (,			
b				
_	1 , 0			
d	,			
	•			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	45		
_	Investment expenses not included on Form 990, Part VIII, line 7b			
b	,		4.	
	Add lines 4a and 4b			
5 Par	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 1: rt XII Reconciliation of Expenses per Audited Financial S	2.) tatements With Exnen	ses ner Return	
ı aı			ses per rieturn	
	Complete if the organization answered "Yes" on Form 990, Part IV,		T T	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	Donated services and use of facilities			
b	, , , , , , , , , , , , , , , , , , , ,			
С.	Other losses			
d	, , , , , , , , , , , , , , , , , , , ,	•		
	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1		
	Investment expenses not included on Form 990, Part VIII, line 7b			
		<u> </u>		
	Add lines 4a and 4b			
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information	<u>18.)</u>	5	
		14.5 . 19.7		
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and		art 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.		
ם גם	om v time).			
PAR	RT X, LINE 2:			
T NT	ACCOUNTING FOR INCERTAINING IN INCOME	INVEC ACCOUNTE	NG GMANDADDG	
TIA	ACCOUNTING FOR UNCERTAINTY IN INCOME T	AXES, ACCOUNTI	NG STANDARDS	
D E1/C	NITE AN ENGINE MO DECOGNIZE MUE ETNANC	NTAI OMAMBMBAM		
KEÇ	QUIRE AN ENTITY TO RECOGNIZE THE FINANC	TAL STATEMENT	IMPACT OF A TAX	
D C C	TIMION WHEN IM IC MODE LIVELY MINN NOM	MIIAM MIIE DOCTM	TON WILL NOW DE	
PUS	SITION WHEN IT IS MORE-LIKELY-THAN-NOT	THAT THE PUSIT	TOW MILL NO.L BE	
a tt c				
SUS	STAINED UPON EXAMINATION. MANAGEMENT E	VALUATED THE O	RGANIZATION S TAX	
D 0 0				_
POS	SITIONS AND CONCLUDED THERE ARE NO UNCE	RTAIN TAX POSI	TIONS THAT REQUIR	<u>. Ei</u>
ADJ	JUSTMENT TO THE FINANCIAL STATEMENTS TO	COMPLY WITH T	HE PROVISIONS OF	
	ra automan			
THI	IS GUIDANCE.			

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

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

Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

DC JUSTICE LAB

Employer identification number **-**9025

Pa	art I Questions Regarding Compensation					
			Yes	No		
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,					
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or charter travel Housing allowance or residence for personal use					
	Travel for companions Payments for business use of personal residence					
	Tax indemnification and gross-up payments Health or social club dues or initiation fees					
	Discretionary spending account Personal services (such as maid, chauffeur, chef)					
				l		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or					
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b				
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,					
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2				
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's					
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to					
	establish compensation of the CEO/Executive Director, but explain in Part III.					
	Compensation committee X Written employment contract					
	Independent compensation consultant Compensation survey or study					
	Form 990 of other organizations X Approval by the board or compensation committee			l		
				l		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing					
	organization or a related organization:					
а	Receive a severance payment or change-of-control payment?	4a		_X_		
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х		
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation					
	contingent on the revenues of:					
		5a		X		
b	Any related organization?	5b		<u> </u>		
	If "Yes" on line 5a or 5b, describe in Part III.			l		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation					
	contingent on the net earnings of:	_		37		
	The organization?	6a		X		
b	Any related organization?	6b		X		
_	If "Yes" on line 6a or 6b, describe in Part III.					
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			37		
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			37		
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in					
	Regulations section 53.4958-6(c)?	9	I	i		

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

Schedule J (Form 990) 2023

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

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

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

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NE compensation			(C) Retirement and other deferred benefits (E) T		compensation other deferred benefits (in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990		
(1) PATRICE SULTON	(i)	174,200.	0.	0.	4,357.	8,728.	187,285.	0.		
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.		
	(i)									
	(ii)									
	(i)									
	(ii)									
	(i)									
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	(ii)									
	(i)									
	(ii)									
	(i)									
	(ii)				l	l		<u> </u>		

Page 2

Schedule J (Form 990) 2023

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

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023
Open to Public Inspection

Name of the organization

DC JUSTICE LAB

Employer identification number **-***9025

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TRANSFORM THE DISTRICT'S APPROACH TO PUBLIC SAFETY AND MAKE IT A
NATIONAL LEADER IN JUSTICE REFORM.
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
ACADEMY AND COMMUNITY SAFETY FAIR. WE TRAINED DOZENS OF COMMUNITY
LEADERS IN RESEARCH AND ADVOCACY, EQUIPPING THEM WITH CULTURALLY
COMPETENT TOOLS TO CREATE AND PRESENT THEIR IDEAS FOR A SAFER, FREER,
AND MORE EQUAL DISTRICT OF COLUMBIA. PARTICIPANTS LEFT WITH
WELL-SUPPORTED PROPOSALS TO PRESENT TO DECISION-MAKERS, THE MEDIA, AND
GENERAL PUBLIC; ALONG WITH NEW RELATIONSHIPS AND CONNECTIONS TO
LIKEMINDED ADVOCATES THAT CREATED A STRONG FOUNDATION TO FIGHT FOR
CHANGE IN THE DISTRICT.
FORM 990, PART VI, SECTION A, LINE 8B:
NO COMMITTEES OF THE BOARD HAVE BEEN ESTABLISHED TO DATE.
FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM 990 WAS DISTRIBUTED TO THE BOARD OF DIRECTORS AND REVIEWED BEFORE
FILING.
FORM 990, PART VI, SECTION B, LINE 12C:
THE BOARD OF DIRECTORS ROUTINELY MONITORS AND EVALUATES CONFLICTS OF
INTEREST AS THEY ARISE WITHIN THE COURSE OF ITS OPERATIONS.
INTEREST AS THEY ARISE WITHIN THE COURSE OF ITS OPERATIONS.

FORM 990, PART VI, SECTION B, LINE 15A:

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

Schedule O (Form 990) 2023

Name of the organization **Employer identification number** **-***9025 DC JUSTICE LAB COMPENSATION FOR THE EXECUTIVE DIRECTOR WAS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS UPON THE BASIS OF COMPARISONS TO COMPARABLE ENTITIES AND VETTED COMPENSATION DATA. COMPENSATION AMOUNTS WERE DOCUMENTED CONTEMPORANEOUSLY UPON APPROVAL BY THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION C, LINE 19: DC JUSTICE LAB'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS WILL BE MADE AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART IX, LINE 11G, OTHER FEES: PROFESSIONAL FEES: PROGRAM SERVICE EXPENSES 178,892. MANAGEMENT AND GENERAL EXPENSES 108,206. FUNDRAISING EXPENSES 122,980. TOTAL EXPENSES 410,078. TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 410,078. FORM 990, PART XII, LINE 2C: THE BOARD OF DIRECTORS AND MANAGEMENT IS RESPONSIBLE FOR THE SELECTION OF THE INDEPENDENT AUDITORS AND OVERSIGHT OF THE INDEPENDENT REVIEW. PART I, LINE I, DESCRIPTION OF ORGANIZATION'S MISSION DC JUSTICE LAB DEVELOPS SMARTER SAFETY SOLUTIONS THAT ARE EVIDENCE-DRIVEN, COMMUNITY-ROOTED, AND RACIALLY JUST.