Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A	For the 2	1012 calendar year, or tax year beginning $$ APR $$ $$ $$ $$ $$ $$ $$ $$ $$ $$	MAR 31, 2013	
В	Check if	C Name of organization	D Employer identific	cation number
_	applicable:			
Г	Address change	THE LAWYERS' CAMPAIGN FOR EQUAL JUSTICE		
	Name change	Doing Business As	93-1	193792
	Initial return	Number and street (or P.0. box if mail is not delivered to street address) Room/s		
F	Termin-	1515 S.W. 5TH AVENUE 602		295-8442
F	ated Amended		G Gross receipts \$	1,198,855.
F	return Applica-	PORTLAND, OR 97201	H(a) Is this a group re	
L	tiòn pending	F Name and address of principal officer: SANDRA HANSBERGER	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates inc	
	T-11-11-11			list. (see instructions)
		► WWW.CEJ-OREGON.ORG	H(c) Group exemption	,
			ear of formation: 1991 N	
		Summary	car or formation, 2002 [1	Totals of logal dominate, was
*	are r	riefly describe the organization's mission or most significant activities: SEE SCHE	DILLE O	
ç	1 B	nemy describe the organization's mission of most significant activities.		
Governance	-	neck this box if the organization discontinued its operations or disposed of r	nero than 25% of its not as	peate
Veri	2 CI		1 - 1	20
ĝ	3 N			20
ంర	1 4 191	umber of independent voting members of the governing body (Part VI, line 1b)		5
ties	5 To	otal number of individuals employed in calendar year 2012 (Part V, line 2a)		290
Activities	6 To	otal number of volunteers (estimate if necessary)		0.
Ac	7a 10	otal unrelated business revenue from Part VIII, column (C), line 12		<u> </u>
	b Ne	et unrelated business taxable income from Form 990-T, line 34	Prior Year	Current Year
			1,033,295.	1,185,924.
an	8 C	ontributions and grants (Part VIII, line 1h)	12,249.	12,495.
Revenue	9 Pi	rogram service revenue (Part VIII, line 2g)	868.	436.
Be	10 In	vestment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	1	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,046,412.	1,198,855.
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	721,507.	734,638.
	l l	rants and similar amounts paid (Part IX, column (A), lines 1-3)	721,507.	734,030.
	ŧ	enefits paid to or for members (Part IX, column (A), line 4)	246,985.	273,456.
Ses	15 S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2/3,430.
Expenses	16a Pi	rofessional fundraising fees (Part IX, column (A), line 11e)	0.	<u> </u>
Ž.	b To	otal fundraising expenses (Part IX, column (D), line 25)	174 561	100 377
ш	11/ 0	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	174,561.	190,377.
	1	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,143,053.	1,198,471.
		evenue less expenses. Subtract line 18 from line 12	-96,641.	384.
Net Assets or	2		Beginning of Current Year	End of Year
Set	20 T	otal assets (Part X, line 16)	1,214,551.	1,280,994.
TA A	21 To	otal liabilities (Part X, line 26)	727,023.	759,076.
		et assets or fund balances. Subtract line 21 from line 20	487,528.	521,918.
		Signature Block		
		es of perjury, I declare that I have examined this return, including accompanying schedules and st		ly knowledge and beliet, it is
tru	e, correct,	and complete. Declaration of preparer (other than officer) is based on all information of which pre	parer has any knowledge.	
			Date	
Si	gn 📗	Signature of officer 1	Date	
He	ere	SANDRA HARBERGER, EXECUTIVE DIRECTOR	····	
		Type are printed and a substitute and a	I Date	II PTIN
		Print/Type preparer's name Preparer's signature	Date Check	
Pa	ļ	EE LEE LO	_ //26/13 self-emplor	P01294356
		irm's name GARY MCGEE & CO. LLP	'Firm's EIN	
Us	e Only	irm's address 808 S.W. THIRD AVENUE, SUITE 700	,	E00\ 000 0E4E
		PORTLAND, OR 97204	Phone no. (503) 222-2515
ь л.	outho ID	2 discuss this return with the preparer shown above? (see instructions)		Yes No.

4d	Other program service	s (Describe in Schedule O.
	(F.,	including

(Expenses \$ including grants of \$

) (Revenue \$

Form 990 (2012) THE LAWYERS' 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	<u>X</u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			Х
_	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4	Х	
_	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4	22	
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		37	
	endowments, or 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, VIII, IX, or X			
	as applicable.			
a _.	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	11a		X
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	Ha		
D	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	112		
Ŭ	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		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
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	ļ
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	40.		X
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	<u> </u>	X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		X
	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,	14d		1
IJ	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		<u> </u>	
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? 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,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	ļ	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			77
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		+-
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	(0010)

Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the X United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX. Χ column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Χ Schedule K. If "No", go to line 25 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Χ 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Χ Schedule L, Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II X 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member X of any of these persons? If "Yes," complete Schedule L, Part III 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? X 31 If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and X 34 Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 Χ 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Х 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note. All Form 990 filers are required to complete Schedule O

THE LAWYERS' CAMPAIGN FOR EQUAL JUSTICE 93-1193792 Form 990 (2012) Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response to any question in this Part V Yes Nο 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a O b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 10 (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 5 filed for the calendar year ending with or within the year covered by this return 2a X 2b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Χ financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a b If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. X 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? 5с c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). X a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7c X 7e e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X 7f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? N/g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?... 7g N/A h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/Aorganization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? N/A 9a b Did the organization make a distribution to a donor, donor advisor, or related person? N/A 9b Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 N/A 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: a Gross income from members or shareholders N/A b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year $\frac{N}{A}$ 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the

Form 990 (2012)

14b

X

organization is licensed to issue qualified health plans

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

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

	Check if Schedule O contains a response to any question 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	20			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	20			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with any ot	her			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under th					
	of officers, directors, or trustees, or key employees to a management company or other person?		i	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass		,	5		X
6	Did the organization have members or stockholders?		F	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a					
	more members of the governing body?		1	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s					
-	• •		i	7b		X
8	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by the follow	vina:			
	The governing body?		ř	8a	Х	-14
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	ioned at the		9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue Code		~		-
000	tion B. 1 Onoics (This dection B requests knowledged about policies not required by the internal re	evenue oout			Yes	No
100	Did the organization have local chapters, branches, or affiliates?		I	10a	103	X
	If "Yes," did the organization have written policies and procedures governing the activities of such cl		i	104		
b	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
440	Has the organization provided a complete copy of this Form 990 to all members of its governing body			11a	X	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	ly Delote IIII1	g the form:	Ha	**	
b	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
12a	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conflicte?		12b	X	
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y			120		
С			1	400	Х	
40	in Schedule O how this was done			12c 13	- <u>X</u>	
13	Did the organization have a written whistleblower policy?			14	X	
14	Did the organization have a written document retention and destruction policy?			14	41	
15	Did the process for determining compensation of the following persons include a review and approv	•	iuent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			4 =	X	
	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization	****************		15b	77	1000 SA
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange					v
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		oation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nization's				
	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 ▶OR					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	(Section 50)1(c)(3)s only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	onflict of inte	rest policy, and	d finar	ncial	
	statements available to the public during the tax year.					
20	State the name, physical address, and telephone number of the person who possesses the books a	ind records o	of the organizat	ion: 🌬	·	
	SANDRA HANSBERGER - 503-295-8442					
	1515 S.W. 5TH AVENUE, PORTLAND, OR 97201					

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

Check if Schedule O contains a response to any question 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 instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per	(do box	not c	Pos heck	C) ition more rson	l than is bot	one th an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	institutional trustee	Officer Officer	Key employee	Highest compensated employee	stee)	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) LARRY BRISBEE	1.00									
DIRECTOR	1 00	X		<u> </u>		<u> </u>		0.	0.	0
(2) JEFFERY EDELSON	1.00	٦,						0	0	_
DIRECTOR	1.00	X		<u> </u>		-	ļ	0.	0.	0
(3) MARK FRIEL DIRECTOR	1.00	X						0.	0.	0
(4) MICHAEL HAGLUND	1.00	A		-		-		0.	0.	<u> </u>
DIRECTOR	1.00	х					}	0.	0.	0
(5) EDWIN HARNDEN	1.00		 	 	 	 				
DIRECTOR		X						0.	0.	0
(6) DENNIS KARNOPP	1.00		 	<u> </u>	 	T	Ť			
DIRECTOR		X						0.	0.	0
(7) ELIZABETH KNIGHT	1.00									
DIRECTOR		X						0.	0.	0
(8) FRANK LANGFITT, III	1.00									
DIRECTOR		X						0.	0.	0
(9) RODNEY LEWIS, JR.	1.00									
DIRECTOR	, , ,	X	<u> </u>	<u> </u>	 			0.	0.	0
(10) ERIC LINDAUER	1.00	7,							_	_
DIRECTOR	1.00	X	ــــ		 	<u> </u>	-	0.	0.	0
(11) LINDA LOVE DIRECTOR	1.00	$ \mathbf{x} $						0.	0.	0
(12) JOEL A. MULLIN	1.00	1	-	-	-	\vdash	╫	U •	0.	
DIRECTOR	1.00	x			***************************************			0.	0.	0
(13) TRACI RAY	1.00	+	\vdash	-	 	\vdash	+			
DIRECTOR		X						0.	0.	0
(14) VICKI SMITH	1.00	+==	\vdash	†	T	\vdash	†			
DIRECTOR		X						0.	0.	0
(15) NORMAN WILLIAMS	1.00	T		T	T	T				
DIRECTOR		X						0.	0.	0
(16) IRA ZAROV	1.00									
DIRECTOR		X		<u> </u>				0.	0.	0
(17) MARK WADA	1.00								_	
DIRECTOR AND PRESIDENT		X		X			<u></u>	0.	0.	0

Part VII Section A. Officers, Directors, Trus	***************************************	****	_	-		anna ainmeirich	-	Compensated Employe			7 2
(A)	(B)	picy	ccs	, <u>an</u>		giic	31 0	(D)	(E)		(F)
Name and title	Average			Posi	ition	1		Reportable	Reportable	,	Estimated
Tamo ara tao	hours per	box	, unie	ss pe	rson	than is bot	h an	compensation	compensation	ļ	amount of
	week		cer an	id a d	irecto	or/trus	tee)	from	from related	1	other
	(list any	rector						the	organization		compensation
	related	or di	99			sated		organization (W-2/1099-MISC)	(W-2/1099-MI	SC)	from the organization
	organizations	rustee	Itrus		eg/	ubbeu		(44-2/1099-141130)			and related
	below	Individual trustee or director	Institutional trustee	<u>=</u>	Key employee	est co	lei.				organizations
	line)	Indi	Instit	Officer	Key e	Highest compensated employee	Former				
(18) SARAH CROOKS	1.00										
DIRECTOR AND VICE PRESIDENT		X	<u> </u>	X				0.		0.	0.
(19) RONALD GREENMAN	1.00										
DIRECTOR AND TREASURER		X		X		<u> </u>	<u> </u>	0.		0.	0.
(20) GERRY GAYDOS	1.00			,,					And the state of t	_	0
DIRECTOR AND SECRETARY	40.00	X	ļ	X		 		0.		0.	0.
(21) SANDRA HANSBERGER	40.00	-		٠,,				04 500		_	00 000
EXECUTIVE DIRECTOR			ļ	X	ļ	ļ	ļ	94,500.		0.	23,332.
		-									
		-	-	-	ļ	-					
		-							No. of the control of		
		 	 	-	ļ	-	-				
		-									
	-	 	-		-	┼					
		-									
		┼	-	┼─	-	╁	 				
		+									
th Cub total				1	J			94,500.		0.	23,332.
1b Sub-total c Total from continuation sheets to Part V	II Section A	• • • • • •				D		0.		0.	0.
d Total (add lines 1b and 1c)								94,500.		0.	23,332.
Total number of individuals (including but r							ho re	 		ole	<u> </u>
compensation from the organization						-,			,		C
Market and the Market and the State of the S	Approximation of the second			*****		*******	***********	AND THE PROPERTY OF THE PROPER			Yes No
3 Did the organization list any former officer	, director, or tr	uste	e, k	ey er	mple	oyee	, or	highest compensated e	mployee on		
line 1a? If "Yes," complete Schedule J for s						-					3 X
4 For any individual listed on line 1a, is the s	um of reportat	ole c	omp	ens	atio	n an	d otl	her compensation from	the organization		
and related organizations greater than \$15											4 X
5 Did any person listed on line 1a receive or	accrue compe	nsa	tion	from	an	y un	relat	ted organization or indiv	ridual for service:	3	
rendered to the organization? If "Yes," con	nplete Schedu	le J	for s	uch	per	son			44.45.1.4.1.4.4.4.4.4.4.4.4.4.4.4.4.4.4.		5 X
Section B. Independent Contractors											
1 Complete this table for your five highest co	ompensated in	dep	end	ent d	cont	ract	ors t	that received more than	\$100,000 of cor	npens	ation from
the organization. Report compensation for	the calendar	year	end	ing v	with	or v	vithir	n the organization's tax	year.		
(A)								(B)			(C)
Name and business	s address	N	ON	E				Description of	services		Compensation

								·			
2 Total number of independent contractors		not l	limite	ed to			isted	d above) who received r	nore than		
\$100,000 of compensation from the organ	nization 📂					0					

Pai	t VI							[]
		Check if Schedule O conta	ins a response t	to any question i	n this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	o e f	Membership dues Fundraising events Related organizations Government grants (contribution All other contributions, gifts, grants similar amounts not included above	1b 1c 1d 1d 1e s, and e 1f 1, la-1f: \$	185,924.	1,185,924.			
	2 a	ANNUAL LUNCHEON		Business Code 900099	12,495.	12,495.		
Program Service Revenue	0 6 6							
		Total. Add lines 2a-2f	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	>	12,495.			
	3	Investment income (including of other similar amounts)	dividends, intere	est, and 	436.			436.
	5	Royalties					l	
	k	Gross rents Less: rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
		d Net rental income or (loss) Gross amount from sales of	(i) Securities	(ii) Other				
	k	assets other than inventory Less: cost or other basis and sales expenses		(II) Othor				
/enne	C	Gain or (loss) Net gain or (loss) Gross income from fundraising including \$	g events (not					
Other Reve		contributions reported on line Part IV, line 18	a					
	9 a	a Gross income from gaming ac Part IV, line 19 b Less: direct expenses	tivities. See a b					
	10 a	Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold	returns a					
		Net income or (loss) from sales	s of inventory					
	44 -	Miscellaneous Revenu	<u>e</u>	Business Code				
	11 a	a						
		C						
	(d All other revenue						
		Total Add lines 11a-11d			1,198,855.	12,495.	0.	436.
23200 12-10	12 9 12	Total revenue. See instructions.			11,120,033.	1		Form 990 (2012)

9

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response to any question in this Part IX **(D)** Fundraising (A) Total expenses Do not include amounts reported on lines 6b, Management and general expenses Program service 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and 734,638 734,638 organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 ... Benefits paid to or for members Compensation of current officers, directors, 117,709. 82,396. 11,771. 23,542. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 13,433. 53,202. 115,302. 48,667. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 19,230. 6,239. 3,639. 9,352. Other employee benefits 9 21,215. 7,028. 11,188. 2,999. Payroll taxes 11 Fees for services (non-employees): a Management b Legal 15,059. 15,059. c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, 47,698. 34,891. 3,006. 9,801. column (A) amount, list line 11g expenses on Sch O.) 2,501. 1,156. 3,657. 12 Advertising and promotion 4,404. 72,177. 36,342. 31,431. Office expenses Information technology 14 Royalties 15 24,738. 13,110. 3,466. 8,162. 16 Occupancy _____ 6,920. 644. 1,416. 4,860. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 309. 2,818. 1,623. 886. Conferences, conventions, and meetings 19 Interest 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 2,065. 2,065. 23 Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 2,127. 1,491. 15,245. 11,627. MISCELLANEOUS b e All other expenses 1,198,471. 978,582. 62,863. 157,026. 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined

Check here

educational campaign and fundraising solicitation.

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

Par		Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	393,340.	1	328,330.
	2	Savings and temporary cash investments	153,658.	2	311,791.
- 1	3	Pledges and grants receivable, net	233,808.	3	156,752.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
	•	trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
ets	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
_	9	Prepaid expenses and deferred charges	6,670.	9	6,987.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D10a			All and a second and
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities	500.	11	250.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	156.004
	15	Other assets. See Part IV, line 11	426,575.	15	476,884.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,214,551.	16	1,280,994.
	17	Accounts payable and accrued expenses	6,735.	17	24,438.
	18	Grants payable	720,288.	18	734,638.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,			
<u> </u>		key employees, highest compensated employees, and disqualified persons.		-00	
		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of		25	
	00	Schedule D Total liabilities. Add lines 17 through 25	727,023.	26	759,076.
BANK TO THE REAL PROPERTY.	26	Organizations that follow SFAS 117 (ASC 958), check here		20	
ro.		complete lines 27 through 29, and lines 33 and 34.			
Ç	27	Unrestricted net assets	225,886.	27	187,431.
an	28	Temporarily restricted net assets	45,497.		103,367.
B	29	Permanently restricted net assets	216,145.	29	231,120.
ŭ	25	Organizations that do not follow SFAS 117 (ASC 958), check here			
الله م		and complete lines 30 through 34.			
ts o	30	Capital stock or trust principal, or current funds		30	
sse	30	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
Se	33	Total net assets or fund balances	487,528.		521,918.
	34	Total liabilities and net assets/fund balances	1,214,551.		1,280,994.
-	J-7			50-1-10-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	Form 990 (2012)

orm	990 (2012) THE LAWYERS' CAMPAIGN FOR EQUAL JUSTICE	93-11	93792	Pag	_{je} 12
Pai	t XI Reconciliation of Net Assets				
221024	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,198		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,198		
3	Revenue less expenses. Subtract line 2 from line 1	3			84.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	487	, 5:	28.
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 in Schedule O)	9	3.4	.,0	06.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	521	.,9:	<u> 18.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te 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	ne audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ingle Audit			

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

За

Х

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

Employer identification number

			THE LAV	VYERS' CAMPAI	GN FO	R EQU.	AL JU	STICE		93	3-119:	3792		
Pa	art I	Reason	for Public Cha	r ity Status (All organiz	ations mus	st complet	e this part	.) See inst	ructions.		AND DESCRIPTION OF THE PERSON OF	***********	**************************************	
The	organ	ization is not a	private foundation	because it is: (For lines	1 through 1	11, check o	only one b	ox.)						
1		A church, cor	nvention of churche	es, or association of chur	ches desci	ribed in se	ction 170	(b)(1)(A)(i)						
2		A school des	cribed in section 1	70(b)(1)(A)(ii). (Attach Sc	hedule E.)									
3		A hospital or	a cooperative hosp	ital service organization o	described i	in section	170(b)(1)(A)(iii).						
4		A medical res	search organization	operated in conjunction	with a hos	pital descr	ibed in se	ction 170	(b)(1)(A)(iii	i). Enter t	he hospita	al's nam	ie,	
		city, and stat	e:											
5		An organizati	ion operated for the	benefit of a college or ur	niversity ov	wned or op	erated by	a governi	mental unit	describe	ed in			
		section 170	(b)(1)(A)(iv). (Comp	lete Part II.)										
6		A federal, sta	ite, or local governn	nent or governmental uni	t described	d in sectio	n 170(b)(1)(A)(v).						
7	X	An organizati	ion that normally red	ceives a substantial part	of its supp	ort from a	governme	ntal unit c	or from the	general	public des	cribed i	n	
		section 170(b)(1)(A)(vi). (Complete Part II.)												
8		A community	trust described in	section 170(b)(1)(A)(vi).	(Complete	Part II.)								
9		An organizati	ion that normally red	ceives: (1) more than 33	1/3% of its	support fi	rom contri	butions, n	nembership	o fees, ar	nd gross re	eceipts	from	
		activities rela	ted to its exempt fu	ınctions - subject to certa	ain exception	ons, and (2	2) no more	than 33 1	1/3% of its	support	from gros	s invest	.ment	
		income and u	unrelated business	taxable income (less sect	tion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nization a	after June	30, 197	'5.	
			509(a)(2). (Complet											
10		-	-	perated exclusively to te										
11				perated exclusively for the		' '			•				or	
			•	ations described in secti		*		?). See se o	ction 509(a	a)(3). Che	ck the bo	x that		
			. , , , , , , , , , , , , , , , , , , ,	organization and compl		-								
		a L Type I		, .	ype III - Fui	•	-				n-functiona	-	_	
е	الـــا			at the organization is not										
				than one or more publicly						3(a)(1) or	section 50	19(a)(2).		
f				itten determination from										
				his box									, L	
ç	i	-		organization accepted ar			-						T	
				directly controls, either a								Yes	No	
				supported organization?								-	 	
				on described in (i) above?										
				a person described in (i)							11g(iii	<u>1) </u>	<u></u>	
r	l	Provide the t	ollowing information	n about the supported or	ganization	(S).								
			(1) (1)	(11) T	(iv) le the c	rganization	(v) Did you	ı notify the	(vi) ls	the	/ /// A			
1)	,	of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9		sted in your			lorganizátic	n in col. I	(vii) Amoui		netary	
	urya	ınization		above or IRC section		document?			(i) organizi U.S.	.?	Su	ipport		
				(see instructions))	Yes	No	Yes	No	Yes	No				
					†				 				***************************************	
										-				

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. .					1505	1		1						

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

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 THE LAWYERS' CAMPAIGN FOR EQUAL JUSTICE 93-1193792 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

OCC	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 📂	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,185,443.	1,025,943.	1,214,170.	1,033,295.	1,185,924.	5,644,775.
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						
	Total. Add lines 1 through 3	1,185,443.	1,025,943.	1,214,170.	1,033,295.	1,185,924.	5,644,775.
	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)						184,026.
	Public support, Subtract line 5 from line 4.						5,460,749.
STATE OF THE OWNER, WHEN	tion B. Total Support				to an annual contract of the second		
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	1,185,443.	1,025,943.	1,214,170.	1,033,295.	1,185,924.	5,644,775.
	Gross income from interest.			,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	dividends, payments received on						
	., ,						
	securities loans, rents, royalties	3,350.	4,042.	3,418.	868.	436.	12,114.
	and income from similar sources	3,330.	1,012.	3/410.	000.	250.	10/113
	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
	Total support. Add lines 7 through 10						5,656,889.
	Gross receipts from related activities	•				12	73,674.
13	First five years. If the Form 990 is fo	•	s first, second, thir	d, fourth, or fifth ta	ix year as a sectio	n 501(c)(3)	
	organization, check this box and stor				On the Control of the		
	tion C. Computation of Publ				·····	,	
	Public support percentage for 2012 (14	96.53 %
	Public support percentage from 2017					15	95 . 93 %
	33 1/3% support test - 2012. If the						(
	stop here. The organization qualifies						
	33 1/3% support test - 2011. If the						
	and stop here. The organization qua						
17a	10% -facts-and-circumstances tes	it - 2012. If the org	anization did not d	check a box on line	13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstan	ices" test, check ti	his box and stop h	ere. Explain in Pa	rt IV how the organ	ization
	meets the "facts-and-circumstances"	test. The organiza	ition qualifies as a	publicly supported	d organization		▶ □
b	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets t	he "facts-and-circu	ımstances" test, cl	heck this box and	stop here. Explair	n in Part IV how the	:
	organization meets the "facts-and-cir	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anization	>
18	Private foundation. If the organization						

Schedule A (Form 990 or 990-EZ) 2012 | Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	and the same of th					
Cale	ndar year (or fiscal year beginning in) 📂	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,				-		
	merchandise sold or services per-	1					
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose	l					
2	Gross receipts from activities that				<u> </u>		<u> </u>
3	are not an unrelated trade or bus-						
	iness under section 513						
				-	·		
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf		<u> </u>				
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5			<u> </u>		<u> </u>	
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						
С	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support	hannan an a	ingli ya na sana kana sana sana sa kana maran sana sana sana sana sana sana sana	**************************************			The second secon
Cale	ndar year (or fiscal year beginning in) 📂	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						ALL
	Unrelated business taxable income			 			
D							
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
דר	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carried on			,			
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is fo	r the organization	's first, second, th	ird, fourth, or fifth	tax year as a sect	ion 501(c)(3) organi	zation,
	check this box and stop here	*******		************)
Sec	tion C. Computation of Pub	lic Support Pe	ercentage				
15	Public support percentage for 2012	line 8, column (f)	divided by line 13,	column (f))		15	
16	Public support percentage from 201	1 Schedule A, Par	t III, line 15			16	
	tion D. Computation of Inve						
	Investment income percentage for 20					17	
	Investment income percentage from						
	33 1/3% support tests - 2012. If the						
ıya	more than 33 1/3%, check this box						
	33 1/3% support tests - 2011. If the						
D		_					
	line 18 is not more than 33 1/3%, ch						
20	Private foundation. If the organization	on ala not check a	a box on line 14, 1	Sa, or 190, check	uns dox and see I	HSTRUCTIONS	

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

Employer identification number

2012

T	HE LAWYERS' CAMPAIGN FOR EQUAL JUSTICE 93-1193792						
Organization type (check	one):						
Filers of:	Section:						
Form 990 or 990-EZ	X = 501(c)(-3) (enter number) organization						
	4947(a)(1) nonexempt charitable trust 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						
	is covered by the General Rule or a Special Rule.)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.						
General Rule							
-	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one plete Parts I and II.						
Special Rules							
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections (b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year							
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), in Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

THE LAWYERS' CAMPAIGN FOR EQUAL JUSTICE

93-1193792

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		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$60,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$25,025.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$25,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$Sahadula B / Earm	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

THE LAWYERS' CAMPAIGN FOR EQUAL JUSTICE

93-1193792

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	f 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
		-	
and the second s		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		\$	Audithus Anna Anna Anna Anna Anna Anna Anna Ann
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	

223453 12-2	1-12	Schedule B (Form	990, 990-EZ, or 990-PF) (2012

Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Name of organization

Employer identification number

	WYERS' CAMPAIGN FOR EQ	UAL JUSTICE	93-1193792
Part III	Exclusively religious, charitable, etc., indiverse year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if addition	ndual contributions to section 50 to ne following line entry. For organizati c., contributions of \$1,000 or less fo al space is needed.	c)(/), (8), or (10) organizations that total more than \$1,000 for the ions completing Part III, enter or the year. (Enter this information once.)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gi	ift Relationship of transferor to transferee
-	Transfer ee 3 Hame, address, a		Treatment of transfer of the transfer of
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of g	ift Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, a	(e) Transfer of g	gift Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Tunnafaurala noma addusas a	(e) Transfer of g	
	Transferee's name, address, a	IIIU ZIP + 4	Relationship of transferor to transferee

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047
2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

See separate instructions.

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

Section	on 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
	organization			i	Employer identification number
	THE LAW	YERS' CAMPAIGN FO	R EQUAL JUS	TICE	93-1193792
Part I-	4 Complete if the org	anization is exempt unde	r section 501(c) c	or is a section 52	27 organization.
2 Politi 3 Volui	cal expendituresnteer hours	ation's direct and indirect political			
Part I-	B Complete if the org	anization is exempt unde	r section 501(c)(3	3).	
1 Ente	r the amount of any excise tax	incurred by the organization under	r section 4955		\$
2 Ente	r the amount of any excise tax	incurred by organization managers	s under section 4955		\$
3 If the	organization incurred a sectio	n 4955 tax, did it file Form 4720 fo	r this year?		Yes No
				************	Yes No
b lf "Y	es," describe in Part IV.		· · · · · · · · · · · · · · · · · · ·		=01/a\/2\
	5780	janization is exempt unde	······································		
		by the filing organization for sect			> \$
		ization's funds contributed to othe			.
		A (18)			\$
		. Add lines 1 and 2. Enter here and			> •
line 1	l/b	4400 DOL for this year?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Yes No
		1120-POL for this year?nployer identification number (EIN)			
		tion listed, enter the amount paid			
		omptly and directly delivered to a			
		additional space is needed, provid			-1
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fr	om (e) Amount of political
	(a) Name	(5) / (6)	(0) 2	filing organization	n's contributions received and
				funds. If none, ente	
					delivered to a separate political organization.
					If none, enter -0
				TARREST AND THE STATE OF THE ST	

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

Schedule C (Form 990 or 990-EZ) 2012

LHA

Schedule C (Form 990 or 990-EZ) 2012 ¹ Part II-A Complete if the orga	anization is exen	CAMPAIGN Inpt under section	FOR EQUAL JU n 501(c)(3) and file	USTICE 93-1 ed Form 5768	193792 Page 2
(election under sect					
	_		Part IV each affiliated	group member's nam	e, address, EIN,
	e of excess lobbying e				
B Check 🕨 📖 if the filing organizat	ion checked box A an	d "limited control" pro	visions apply.		
	s on Lobbying Expen itures" means amou	ditures nts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence public opinion (c	rass roots lobbying)		6,425.	
b Total lobbying expenditures to influ			T T	275.	**************************************
c Total lobbying expenditures (add lir			ī.	6,700.	
d Other exempt purpose expenditure			T T	1,034,745.	The state of the s
e Total exempt purpose expenditures			r e	1,041,445.	NO. OF THE PARTY O
f Lobbying nontaxable amount. Ente			T	179,145.	
If the amount on line 1e, column (a) or		ying nontaxable amo			
Not over \$500,000		he amount on line 1e.			
Over \$500,000 but not over \$1,000		plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,50		0 plus 10% of the exc	······································		
Over \$1,500,000 but not over \$17,		0 plus 5% of the exce			
Over \$17,000,000	\$1,000,0				
OVG. \$17,000,000	1 4.,000,0				
g Grassroots nontaxable amount (en	ter 25% of line 1f)			44,786.	
h Subtract line 1g from line 1a. If zero				0.	CONTRACTOR OF THE RESIDENCE OF THE PARTY OF
i Subtract line 1f from line 1c. If zero				0.	
j If there is an amount other than zer					
reporting section 4911 tax for this					Yes No
(Some organiz	4-Year Ave ations that made a s	raging Period Under ection 501(h) election		olete all of the five	
	Lobbying Exper	ditures During 4-Yea	r Averaging Period		,
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount	162,223.	171,646.	174,282.	179,145.	687,296.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,030,944.
c Total lobbying expenditures	1,573.	3,950.	7,930.	6,700.	20,153.
d Grassroots nontaxable amount	40,556.	42,912.	43,571.	44,786.	171,825.
e Grassroots ceiling amount (150% of line 2d, column (e))					257,738.
f Grassroots lobbying expenditures	960.	237.	3,790.	6,425.	11,412.

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2012 THE LAWYERS' CAMPAIGN FOR EQUAL JUSTICE 93-1193792 Page 3 [Part II-B] Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(8	3)	(b)
of the	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
	Mailings to members, legislators, or the public?			**************************************	
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
g g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
-	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
 i	Other activities?				
ì	Total. Add lines 1c through 1i			Mary - Sharmon and Market	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912	the company of the co			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	till-A Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)	(5), or se	ction	
	501(c)(6).		(-),		
	301(0)(0)		 	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying expenditures or \$2,000 or loss: Did the organization agree to carry over lobbying and political expenditures from the prior year?		1		
	tiliable Complete if the organization is exempt under section 501(c)(4), section 501(c)(4			ction	<u></u>
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				ne 3. is
	answered "Yes."	,	(6)	,	,
			1		
1	Dues, assessments and similar amounts from members				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures).	Cai			
	expenses for which the section 527(f) tax was paid).		0-		
	Current year				
	Carryover from last year		ا م		nymentili sissemo kelevynyski yalini Astriko:
С	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
	expenditure next year?			ļ	
5	Taxable amount of lobbying and political expenditures (see instructions)		5		COMPONENT NEWSCHAP AND
Pai					
	olete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; F	art II-A (affil	iated group	list); Part I	I-A, line 2;
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," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

Open to Public Inspection

Name of the organization

THE LAWYERS' CAMPAIGN FOR EQUAL JUSTICE

Employer identification number 93-1193792

Par	t l Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)	·	
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	ised funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can b	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpos	e conferring
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an h	istorically 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 quali	fied conservation contribution in the form	n 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	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
	year >		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling o	f
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, and enforcing conservation easements	during the year >
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 17	'O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	ion easements in its revenue and expens	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describe	s the organization's accounting for
	conservation easements.		
Pai	t III Organizations Maintaining Collections o		Other Similar Assets.
	Complete if the organization answered "Yes" to Form	1 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue state	ement and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	chibition, education, or research in furthe	rance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that described	ribes these items.	
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue stateme	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of p	bublic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		» \$
b	Assets included in Form 990, Part X		

Schedule D (Form 990) 2012

	dule D (Form 990) 2012 THE LAWYERS' CAMPAIGN FOR E	THE PERSON NAMED IN COLUMN			1193792 Pag	_{le} 4
Pai	t XI Reconciliation of Revenue per Audited Financial Statemer	nts Wi	th Revenue per R	eturn		
1	Total revenue, gains, and other support per audited financial statements			1	1,234,23	4.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1				
а	Net unrealized gains on investments	2a				
b	Donated services and use of facilities	2b	1,373.			
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d	34,006.			
е	Add lines 2a through 2d			2e	35,37	
3	Subtract line 2e from line 1		***************************************	3	1,198,85	<u>5.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				_
С	Add lines 4a and 4b			4c		<u>0.</u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,198,85	٥.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme			Retu		
1	Total expenses and losses per audited financial statements			1	1,199,84	4.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	4 0 7 0			
а	Donated services and use of facilities		1,373.			
b	Prior year adjustments	1				
С	Other losses	2c				
d	Other (Describe in Part XIII.)	2d			4 6 5	_
е	Add lines 2a through 2d			2e	1,37	
3	Subtract line 2e from line 1			3	1,198,47	1.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				_
С	Add lines 4a and 4b			4c		0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,198,47	1.
Pa	rt XIII Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,				2b; Part V, line 4; Pa	ırt
	e 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p					
PAI	RT V, LINE 4: NET ENDOWMENT RETURN IS INTEN	IDED	TO PROVIDE	SUP:	PORT	
FOI	R THE CAMPAIGN'S CIVIL LEGAL SERVICES FOR T	HE	POOR, A PORT	ION	OF WHICH	
IS	SET ASIDE TO SUPPORT LEGAL SERVICES PROVID	ED '	TO THE ELDER	LY Z	AND LEGAL	
SEI	RVICES PROVIDED FOR THE CITIZENS OF JACKSON	CO	JNTY, AS WEL	L A	S SUPPORT	
OF	THE CAMPAIGN'S GENERAL OPERATIONS.					-
PAI	RT XI, LINE 2D - OTHER ADJUSTMENTS:					
			, m m m m	T. C. C.	7 0015	
1 N (TREASE IN BENEFICIAL INTEREST IN THE ASSETS	HE.	PD RX LHE OK	ヹĠひ』	N COMMUNIT	Y

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 Part XIII Supplemental Info	THE LAWYERS	CAMPAIGN	FOR EQ	UAL JUSTICE	93-119379	2 Page 5
Part XIII Supplemental Info	rmation (continued)		······································			***************************************
FOUNDATION					વ	4,006.
POSIDATION				<u> </u>		1 ,000 ;
					······································	
	4.016-6.00					
	The state of the s					
			**			***************************************
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SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public Inspection

OMB No. 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Schedule I (Form 990) (2012) [∞] Employer identification number 93-1193792 (h) Purpose of grant or assistance OPERATING SUPPORT DPERATING SUPPORT DEERATING SUPPORT DPERATING SUPPORT DPERATING SUPPORT X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) 634. 84,557 43,394 15,000 420,053 (e) Amount of assistance non-cash 171, Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. FOR EQUAL JUSTICE °. ö Ö Ö o. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) CAMPAIGN Enter total number of other organizations listed in the line 1 table 93-1189114 93-1194564 93-0686170 93-0635480 93-7227761 General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? THE LAWYERS' 921 S.W. WASHINGTON STREET, SUITE 1 (a) Name and address of organization 921 S.W. WASHINGTON STREET, SUITE SERVICES - 2250 WEST MAIN STREET 610 S.W. BROADWAY, SUITE 200 LEGAL AID SERVICES OF OREGON CENTER FOR NON-PROFIT LEGAL LANE COUNTY LAW & ADVOCACY DISABILITY RIGHTS OREGON or government 376 EAST 11TH AVENUE Name of the organization PORTLAND, OR 97205 PORTLAND, OR 97205 PORTLAND, OR 97205 OREGON LAW CENTER OR 97501 EUGENE, OR 97401 MEDFORD, Part I Part N

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

232101 12-18-12

93-1193792 Schedule I (Form 990) (2012) THE LAWYERS' CAMPAIGN FOR EQUAL JUSTICE

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed. THE LAWYERS' CAMPAIGN FOR EQUAL JUSTICE

Page 2

Schedule I (Form 990) (2012)

SCHEDULE O (Form 990 or 990-EZ)

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 990-EZ.

OMB No. 1545-0047
2012
Open to Public Inspection

Name of the organization

THE LAWYERS' CAMPAIGN FOR EQUAL JUSTICE

Employer identification number 93-1193792

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

THE LAWYERS' CAMPAIGN FOR EQUAL JUSTICE ("THE CAMPAIGN") WORKS TO

INCREASE CIVIL ACCESS TO JUSTICE FOR LOW-INCOME OREGONIANS BY

INCREASING RESOURCES FOR OREGON'S STATEWIDE LEGAL AID PROGRAMS.

FORM 990, PART VI, SECTION B, LINE 11: THE TAX RETURN IS PREPARED BY AN INDEPENDENT ACCOUNTANT AND REVIEWED BY THE EXECUTIVE DIRECTOR AND THE FINANCE COMMITTEE OF THE BOARD. ALL MEMBERS OF THE BOARD OF DIRECTORS RECEIVE A DRAFT OF THE FORM, ARE ASKED TO COMMENT AND REVIEW THE FORM FOR ACCURACY, AND THEN RECEIVE ANOTHER COPY INCORPORATING ANY CHANGES BEFORE IT IS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST POLICY DISCLOSURE OF CONFLICTS IS IMPLICIT IN THE ORGANIZATION'S WRITTEN CONFLICTS
OF INTEREST POLICY, WHICH IS A PART OF THE ORGANIZATION'S BYLAWS. THE
ORGANIZATION HAS ADOPTED A POLICY EXPLICITLY REQUIRING THAT THE CONFLICT OF
INTEREST POLICY BE MONITORED FOR COMPLIANCE BY BEING DISTRIBUTED TO BOARD
MEMBERS ON AN ANNUAL BASIS FOR REVIEW AND SIGNATURE.

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD PERSONNEL COMMITTEE AND
BOARD PRESIDENT REVIEW THE PERFORMANCE OF THE EXECUTIVE DIRECTOR, REVIEW
COMPARABLE COMPENSATION DATA, DELIBERATE, AND PRESENT RECOMMENDATIONS
REGARDING SALARY TO THE BOARD FOR APPROVAL. ALL DECISIONS ARE
CONTEMPORANEOUSLY RECORDED IN THE BOARD MINUTES.

THE EXECUTIVE DIRECTOR MAKES RECOMMENDATIONS REGARDING COMPENSATION FOR THE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012)

Name of the organization THE LAWYERS' CAMPAIGN FOR EQUAL JUSTICE	Employer identification number 93-1193792
ASSISTANT DIRECTOR AND REVIEWS THOSE RECOMMENDATIONS WITH	THE BOARD
PRESIDENT AND THE PERSONNEL COMMITTEE. SALARIES ARE ALSO	APPROVED DURING
THE BUDGETING PROCESS BY THE FINANCE COMMITTEE AND THE BO	ARD.
FORM 990, PART VI, SECTION C, LINE 19: THE LAWYERS' CAMPA	IGN FOR EQUAL
JUSTICE MAKES ITS GOVERNING DOCUMENTS, FINANCIAL STATEMEN	TS AND CONFLICT OF
INTEREST POLICY AVAILABLE TO THE PUBLIC UPON REQUEST. TH	E FINANCIAL
STATEMENTS ARE ALSO AVAILABLE ON THE ORGANIZATION'S WEBSI	TE.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
INCREASE IN THE BENEFICIAL INTEREST IN ASSETS HELD	34,006.
BY THE OREGON COMMUNITY FOUNDATION	
TOTAL TO FORM 990, PART XI, LINE 9	34,006.