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Form	990

** PUBLIC DISCLOSURE COPY **

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.

Department of the Treasury Internal Revenue Service

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



Α	For the 2	2021 calendar year, or tax year beginning JAN 1, 2022 and o	ending MZ	AR 31, 2022	
В	Check if applicable:	C Name of organization		D Employer identifie	cation number
	Address change	INTERNATIONAL JUSTICE MISSION			
	Name change	Doing business as		54-1722887	
	Initial return	Number and street (or P.0. box if mail is not delivered to street address)	Room/suite	E Telephone number	r
	Final return/	P.O. BOX 2227		(703) 465-54	95
	return/ termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	27,875,350.
	Amende return	ARLINGTON, VA 22202		H(a) Is this a group re	
	Applica- tion pending	F Name and address of principal officer: GARY HAUGEN		for subordinates	? Yes 🗴 No
		SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
		npt status: 🗴 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) c	or 527	<i>,</i>	list. See instructions
		:▶ IJM.ORG		H(c) Group exemptio	· · · · · · · · · · · · · · · · · · ·
		rganization: X Corporation Trust Association Other	L Year of	of formation: 1994	State of legal domicile: VA
P	-	Summary			-
ė	1 B	riefly describe the organization's mission or most significant activities:	SION OF	IJM IS TO PROTECT	Ľ
anc	P	EOPLE IN POVERTY FROM VIOLENCE AND INJUSTICE.			
Activities & Governance	2 C	heck this box if the organization discontinued its operations or dispos			sets. 12
20	3 N				12
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	4 N	umber of independent voting members of the governing body (Part VI, line 1b)			409
ties	5 T	otal number of individuals employed in calendar year 2021 (Part V, line 2a)			155
tivit	6 T	otal number of volunteers (estimate if necessary) otal unrelated business revenue from Part VIII, column (C), line 12			0.
Ac	/ai	et unrelated business taxable income from Form 990-T, Part I, line 12			0.
			·····	Prior Year	Current Year
	<b>8</b> C	ontributions and grants (Part VIII, line 1h)		104,981,708.	27,624,976.
anc	9 P	rogram service revenue (Part VIII, line 2g)		206,914.	173,683.
Revenue	10 Ir	vestment income (Part VIII, column (A), lines 3, 4, and 7d)		5,265.	-11,837.
å	11 C	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-62,144.	-8,114.
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		105,131,743.	27,778,708.
		irants and similar amounts paid (Part IX, column (A), lines 1-3)		2,081,405.	1,140,938.
		enefits paid to or for members (Part IX, column (A), line 4)		0.	0.
s	<b>15</b> S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		54,249,009.	15,075,550.
Expenses	<b>16a</b> P	rofessional fundraising fees (Part IX, column (A), line 11e)		0.	Ο.
Del	<b>b</b> T	otal fundraising expenses (Part IX, column (D), line 25)	885.		
ŵ	<b>17</b> O	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		39,007,618.	19,360,446.
	<b>18</b> T	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		95,338,032.	35,576,934.
	<b>19</b> R	evenue less expenses. Subtract line 18 from line 12		9,793,711.	-7,798,226.
OC			Beg	ginning of Current Year	End of Year
Assets	<b>20</b> T	otal assets (Part X, line 16)		63,721,626.	56,067,916.
tAS	-	otal liabilities (Part X, line 26)		25,786,630.	25,931,146.
Pe		et assets or fund balances. Subtract line 21 from line 20		37,934,996.	30,136,770.
P	art II 🛛	Signature Block			

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

		Ahallah_			02/21/2023						
Sign		Signature of officer			Date						
Here		STACY MCMAHAN, CHIEF FINANCIAL OF	FICER								
		Type or print name and title									
	Prin	t/Type preparer's name	Preparer's signature	Date	Check	PTIN					
Paid	KRI	STEN BARNETT	Preparer's signature Burnett	02/14/23	3 If self-employed	P01234578					
Preparer		n's name RSM US LLP	1		Firm's EIN 🕨	42-0714325					
Use Only	Firn	n's address ▶ 1001 WATER ST. STE. 500									
	TAMPA, FL 33602 Phone no.813-316-										
May the II	RS di	scuss this return with the preparer shown abo	ve? See instructions			X Yes	No				
132001 12-0	9-21	LHA For Paperwork Reduction Act Notic	e, see the separate instructions.			Form <b>990</b>	(2021)				

	990 (2021) INTERNATIONAL JUSTICE MISSION	54-1722887	Page <b>2</b>
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	X
1	Briefly describe the organization's mission: THE MISSION OF INTERNATIONAL JUSTICE MISSION IS TO PROTECT PEOPLE IN		
	POVERTY FROM VIOLENCE BY RESCUING VICTIMS, BRINGING THE CRIMINALS TO		
	JUSTICE, RESTORING SURVIVORS TO SAFETY AND STRENGTH, AND HELPING LOCAL		
	LAW ENFORCEMENT BUILD A SAFE FUTURE THAT LASTS.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?		Yes X No
•	If "Yes," describe these new services on Schedule O.		Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		Yes 🔼 No
4	If "Yes," describe these changes on Schedule O.	and by avoar	
4	Describe the organization's program service accomplishments for each of its three largest program services, as m Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	• •	
	revenue, if any, for each program service reported.	the total expense	5, anu
4a	(Code:) (Expenses \$17,915,739. including grants of \$1,140,938. ) (Revenue	\$	173,683.)
ia	FIELD OPERATIONS	Ψ	/
	INTERNATIONAL JUSTICE MISSION'S FIELD OPERATIONS RESPOND TO A VAST AND		
	DEVASTATING CATEGORY OF NEED: VIOLENCE AGAINST PEOPLE IN POVERTY.		
	THE THREAT OF VIOLENCE IS PART OF EVERYDAY LIFE FOR PEOPLE WHO ARE		
	POOR. ACCORDING TO THE GLOBAL SLAVERY INDEX, APPROXIMATELY 50 MILLION		
	PEOPLE ARE ESTIMATED TO BE HELD AS MODERN-DAY SLAVES. THE INTERNATIONAL		
	LABOR ORGANIZATION ESTIMATES THAT HUMAN TRAFFICKING FOR SEXUAL OR LABOR		
	SLAVERY GENERATES PROFITS IN EXCESS OF MORE THAN \$150 BILLION ANNUALLY		
	FOR TRAFFICKERS AND SLAVE OWNERS; AND ACCORDING TO GLOBAL ESTIMATES OF		
	MODERN SLAVERY, 1 IN 4 VICTIMS OF MODERN SLAVERY IS A CHILD. IN MANY		
	COUNTRIES, PERPETRATORS OF ABUSE AGAINST PEOPLE IN POVERTY EXPECT NO		
4b	(Code:) (Expenses \$6, 213, 712. including grants of \$) (Revenue	\$	)
	BUILDING A MOVEMENT: IJM SEEKS TO FUEL A GLOBAL JUSTICE MOVEMENT AND ADVANCE ITS MISSION BY		
	DRAWING THE WORLD'S ATTENTION TO VIOLENCE AGAINST PEOPLE WHO ARE POOR		
	EXPANDING THE NUMBER OF PEOPLE AND INSTITUTIONS ENGAGED IN THE FIGHT		
	FOR JUSTICE, INFLUENCING LEADERS IN ALL SECTORS TO BECOME CHAMPIONS FOR		
	PROTECTING THE PEOPLE IN POVERTY AND EQUIPPING CHRISTIANS TO JOYFULLY		
	SERVE IN THE WORK OF JUSTICE.		
	IJM HAS ALMOST 1,400 STAFF WORLDWIDE, WHICH INCLUDES FULL-TIME,		
	PART-TIME, CONTRACT EMPLOYEES, INTERNS AND FELLOWS. OF THE EMPLOYEES		
	WORKING IN IJM FIELD OFFICES, 92% ARE NATIONALS OF THE COUNTRIES IN		
	WHICH THEY SERVE. IN PLACES WHERE WE WORK, MEDIA AND LOCAL CHURCHES		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$	)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses 24,129,451.		
		Fc	orm <b>990</b> (2021)

Form 990 (2021) INTERNATIONAL JUSTICE MISSION
Part IV Checklist of Required Schedules

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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		v	
	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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			v
	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			v
	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,		х	
	Part VI	11a	Δ	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	4.4%		x
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11.		x
А	assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> 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	11c		
u		11d	х	
~	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e	x	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	TIE		
•	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			
120	Schedule D, Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
5	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		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
20a	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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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	x	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	x	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	х	
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		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	x	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		X
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	)		
b				
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

(gambling) winnings to prize winners?

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1c

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Par	τV	Statements Regarding Other IRS Filings and Tax Compliance (continued)				
0-	<b>F</b>				Yes	No
2a			0			
h			20			
D				20		
3a				39		x
b						
			•	4a	x	
b			,			
	See	ar the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, to the calendar year ending with or within the year covered by this return 2.2 0 0 returns the result of the calendar year ending with or within the year covered by this return 2.2 0 0 returns the regulated field and engloyment tax returns? 2.2 0 returns the organization have unrelated business gross income of \$1,000 or more during the year? 3.3 0 returns the organization fave unrelated business gross income of \$1,000 or more during the year? 3.3 returns the organization fave unrelated business gross income of \$1,000 or more during the year? 3.3 returns the organization taxe unrelated business gross income of \$1,000 or more during the year? 4.3 returns the annel of the organization have an interest in, or a signature or other authority over, a during the calendar year, did the organization have an interest in, or a signature or other authority over, a during the calendar year, did the organization have an interest in, or a signature or other authority over, a during the organization party to a prohibid tax shelter transaction at any team of the organization fiel form 88867? 5.5 returns and the argenization societ fave and the very solicitation and party to a prohibid tax shelter transaction at any team of the organization fiel form 88867? 5.5 made partly sa porthibid tax shelter than societ approximation societ fave, and the organization function with very solicitation and party to a prohibid tax shelter the societ approximation societ fave, and the organization function with very solicitation and party to a prohibid tax shelter the very officiant of the partly sa a contributions or gifts and to do refue year approximation and party to a prohibid tax shelter the very solicitation societ fave, and the very solicitation and party to a prohibid tax shelter the partly fave approximation fave approximation fave access of 35 made partly as a contributions or gifts and to do refue year? The organization mate approximation mate any				
5a	Was	the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
b	Did a	any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac	tion?	5b		Х
с	lf "Y	es" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does	s 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	ļ	Х
b	lf "Y		•			
	were	e not tax deductible?		6b	L	
7	-					
а					<u> </u>	X
b				7b	<u> </u>	
С			•	_		v
				70		X
d				7-		x
e f						X
f g		rice the number of employees reported on Form W43, Transmittal of Wage and Tax Statements, 2a 0 at least one is reported on line 2a, did the organization line alrequired learned employment tax returns? 24 before the sum of lines 1 and 2a is greater than 250, you may be required to estils, See instructions. 25 before the sum of lines 1 and 2a is greater than 250, you may be required to estils, See instructions and a form 990. To this year? /************************************				
9 h						
8						
•				8		
9	-					
а	-			9a		
b				9b		
10	Sect	tion 501(c)(7) organizations. Enter:				
а	Initia	ation fees and capital contributions included on Part VIII, line 12	10a			
b	Gros	ss receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	_		
11	Sect	tion 501(c)(12) organizations. Enter:				
а	Gros	ss income from members or shareholders	11a	-		
b		· · · ·				
				12a		
			12b	-		
13				10-		
а				13a		
h						
b			13h			
c				-		
14a				14a		x
15 15						
				15		х
16			income?	16		х
	lf "Y	es," complete Form 4720, Schedule O.				
17	Sect	tion 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in a	any			
	activ	vities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	lf "Y	es " complete Form 6069				

Form	990 (2021) INTERNATIONAL JUSTICE MISSION		54-172288			age <b>6</b>
Pa	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 th	rough	7b below, and for a	"No" r	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.					
	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	12			
	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 0.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	11			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	ny other			
	officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under the	direct	supervision			
	of officers, directors, trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 99	90 was	filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's asse	ets?		5		Х
6	Did the organization have members or stockholders?			6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point c	one or			
	more members of the governing body?			7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st					
	persons other than the governing body?			7b		Х
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	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					
<u></u>	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 Re	/enue	Code.)			
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such characteristic and procedures governing the activities			101		
			filing a the offerman O	10b	x	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	Delon		11a	А	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			10-	х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Y			12b	А	
с		,		12c	x	
12	on Schedule O how this was done Did the organization have a written whistleblower policy?			13	x	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approval			17		
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	by inc				
а	The organization's CEO, Executive Director, or top management official			15a	х	
b	Other officers or key employees of the organization			15b	х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ient wi	th a			
	taxable entity during the year?			16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat					
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	•				
	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 SEE SCHEDULE 0					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, an	d 990	T (section 501(c)(3)	only)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.		,	• ·		
	X Own website Another's website X Upon request Other (explain	on Sc	hedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, con		,	d finano	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 boo	ks and	records			
	STACY MCMAHAN - (703) 465-5495					
	P.O. BOX 2227, ARLINGTON, VA 22202					

Form 990 (		54-1722887	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest C	ompensated	
	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 Comple	te 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, 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.

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

(A)	(B)				C)			(D)	(E)	(F)		
Name and title	Average	(do			Position (do not check more than one				one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss per	rson i	s both r/trus	n an	compensation	compensation	amount of		
	week (list any	<u> </u>						from the	from related organizations	other compensation		
	hours for	direct				g		organization	(W-2/1099-MISC/	from the		
	related	tee or	ustee			ensate		(W-2/1099-MISC/	1099-NEC)	organization		
	organizations	l trust	nal tru		oyee	ompe		1099-NEC)		and related		
	below	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations		
(1) NDC NTEN	line)	Pul	lns	0#	Ke	em Hig	- F					
(1) MARC ALLEN	1.00									•		
BOARD CHAIR	1 00	x		X				0.	0.	0.		
(2) RACHEL BRAND	1.00							0		•		
DIRECTOR	1 00	X						0.	0.	0.		
(3) JAMES ABRAHAM DIRECTOR	1.00	x						0.	0.	0.		
(4) JAMES PETERS	1.00											
DIRECTOR		x						0.	0.	0.		
(5) LINDA RANZ	1.00											
DIRECTOR		x						0.	٥.	0.		
(6) NICHOLAS SENSLEY	1.00											
DIRECTOR		x						0.	٥.	0.		
(7) PATTY SISON-ARROYO	1.00											
DIRECTOR		X						0.	0.	0.		
(8) MELANIE LANE	1.00											
DIRECTOR		x						0.	٥.	0.		
(9) NICOLE BIBBINS-SEDACA	1.00											
DIRECTOR		X						0.	٥.	0.		
(10) RUTH OKEDIJI	1.00											
DIRECTOR		X						0.	0.	0.		
(11) KEVIN KEITH	1.00											
DIRECTOR		X						0.	0.	0.		
(12) GARY HAUGEN	40.00											
CEO		X		X				0.	0.	0.		
(13) STACY MCMAHAN	40.00											
CFO				X				0.	0.	0.		
(14) ERIC HA	40.00											
CAO				Х				0.	0.	0.		
(15) JEANNIE ROSE BARKSDALE	40.00											
VP, GENERAL COUNSEL				X				0.	0.	0.		
(16) STEPHANIE VILLATORO	40.00	-										
GLOBAL OFFICER, TREASURY				X				0.	0.	0.		
(17) DEANNA MALMQUIST	40.00	-										
MANAGER, GLOBAL GOV. & COMPLIANCE				Х				0.	0.	0.		

	990 (2021) INTERNATIONAL	JUSTICE M	ISS	ION						54-1722	2887	1	Page <b>8</b>	
Par	t VII Section A. Officers, Directors, Trust	ees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
	<b>(A)</b> Name and title	<b>(B)</b> Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					one 1 an	<b>(D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from related		(F) Estimated amount of other		
		hours for related organizations below line)	In dividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC 1099-NEC)	/	compen from organiz and rel organiza	the ation ated	
											_			
											+			
											_			
											-			
											+			
	-													
	-													
1b	Subtotal								0.		0.		0.	
	Total from continuation sheets to Part VII,		•••••						0.		0.		0.	
d 2	Total (add lines 1b and 1c) Total number of individuals (including but no										0.		0.	
2	compensation from the organization		056	IISLE	u au	ove	) wii	016	ceived more than \$100,				0	
3	Did the organization list any former officer, of	-			•			Ŭ	• • •			Ye		
4	line 1a? <i>If</i> "Yes," <i>complete Schedule J for su</i> For any individual listed on line 1a, is the sur	m of reportable	e co	mpe	ensa	tion	and	oth	ner compensation from the	ne organization		3	X	
5	and related organizations greater than \$150, Did any person listed on line 1a receive or ac	ccrue compen	sati	on fr	om	any	unre	elate	ed organization or individ	lual for services		4	X	
Sec	rendered to the organization? If "Yes," comp tion B. Independent Contractors	olete Schedule	e J fo	or su	ich r	oers	on .					5	X	
1	Complete this table for your five highest con the organization. Report compensation for th	•	•							· ·	nsati	on from		
	(A) Name and business a		NO		<u>.g</u>				(B) Description of s		С	(C) ompensat	ion	
2	Total number of independent contractors (in	cluding but pr	ot lin	niter	t o t	thos	e lie	ted	above) who received mo	ore than				
_	\$100,000 of compensation from the organize						) )							

	: VIII	Check if Schedule O			nse	or note to any line		(B)	(C)	
							<b>(A)</b> Total revenue	(B) Related or exempt function revenue		<b>(D)</b> Revenue exclud from tax unde sections 512 - 3
Ś	1 a	Federated campaigns		1a						
In		Membership dues								
Ĕ	с	Fundraising events								
ar A		Related organizations				1,432,739.				
<u>nii</u>		Government grants (contr								
ŝ	f	All other contributions, gifts,	grant	s, and						
the		similar amounts not included	abov	re 1f		26,192,237.				
ò	g	Noncash contributions included in	lines 1	a-1f <b>1g</b>	6	306,676.				
and Other Similar Amounts	h	Total. Add lines 1a-1f					27,624,976.			
						Business Code				
	2 a	PROGRAM REVENUE				900099	173,683.	173,683.		
đ	b									
Řevenue	с									
eve	d									
,œ	е									
	f	All other program service	rever	nue						
	g	Total. Add lines 2a-2f					173,683.			
	3	Investment income (includ	ding o	dividends, i	ntere	st, and				
		other similar amounts)				►				
	4	Income from investment of	of tax	exempt bo	nd p	roceeds 🕨 🕨				
	5	Royalties	······			►				
				(i) Rea		(ii) Personal				
		Gross rents	6a	28,8						
	b	Less: rental expenses $\dots$	6b	36,9						
	С	Rental income or (loss)	6c	-8,1	.14.					
	d	Net rental income or (loss	)			►	-8,114.			-8,1
	7 a	Gross amount from sales of		(i) Securit	ies	(ii) Other				
		assets other than inventory	7a			47,878.				
	b	Less: cost or other basis								
enue		and sales expenses	7b			59,715.				
	С	Gain or (loss)	7c			-11,837.				
		Net gain or (loss)				►	-11,837.			-11,8
	8 a	Gross income from fundraisi	-	-						
5		including \$								
		contributions reported on		,	_					
		Part IV, line 18			8a					
		Less: direct expenses			8b					
		Net income or (loss) from				····· ►				
	эa	Gross income from gamin								
	Ŀ	Part IV, line 19			9a 9b					
		Less: direct expenses								
		Net income or (loss) from			s <u>.</u> .	▶				
	iu a	Gross sales of inventory, I			10-					
	h	and allowances Less: cost of goods sold			10a 10b					
	С	Net income or (loss) from	Sales		у	Business Code				
	11 ~					Dusiness Oule				
an	I1а ь					+				
Revenue	b					+				
1	С									
Ř	ام	All other revenue								

#### INTERNATIONAL JUSTICE MISSION 54-1722887 Page 10 Form 990 (2021) 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). Х Check if Schedule O contains a response or note to any line in this Part IX (C) Management and general expenses (D) (B) (A) Do not include amounts reported on lines 6b. Total expenses Program service expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses 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 organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 1,140,938. 1,140,938. Benefits paid to or for members 4 5 Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 1,548,241. Other salaries and wages 9,679,930. 6,483,635. 1,648,054. 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 1,772,342. 1,187,118. 301,750. 283,474. 3,088,112. 2,068,423. 525,766, 493,923. Other employee benefits 9 535,166. 358,455. 91,115 85,596. 10 Payroll taxes 11 Fees for services (nonemployees): Management а 90,410. 60,557, 15,393, 14,460. b Legal 29,107. 19,496, 4,956, 4,655. С Accounting Lobbying d Professional fundraising services. See Part IV, line 17 е Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, g 11,001,892. 7,267,577. 1,925,465. 1,808,850. column (A), amount, list line 11g expenses on Sch 0.) 847,660. 567,764, 144,318, 135,578. Advertising and promotion 12 571,942. 383,088. 97,376. 91,478. Office expenses 13 1,364,493. 913,940. 232,311. 218,242. Information technology 14 15 Royalties 1,552,459. 1,064,574. 233,673, 254,212. 16 Occupancy 168,942. 1,056,261. 707.486. 179,833, 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 163,207. 958,606. 642,076. 153,323. Conferences, conventions, and meetings 19 313,828. 210,202, 53,431, 50,195. 20 Interest Payments to affiliates 21 392,237. 262,721, 66,780, 62,736. Depreciation, depletion, and amortization ..... 22 89,330. 15,209 59,833. 14,288. 23 Insurance Other expenses. Itemize expenses not covered 24 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.) DEVELOPMENT & TRAINING 657,414. 440,337. 111,928, 105,149. а CLIENT EXPENSES 305,335. 204,514. 51,985. 48,836. h

DUES & SUBSCRIPTION 89,737. 60,106. 15,278. С INTERNSHIP EXPENSES 5,058. 3,388. 861. d 34,677. 5,909, 23,223, All other expenses е 35,576,934, 24,129,451. Total functional expenses. Add lines 1 through 24e 5,884,598 25 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 X if following SOP 98-2 (ASC 958-720) 587,891 253,597.

334,294.

0.

14,353.

809.

5,545.

5,562,885.

<u>_+</u>			
	INTERNATIONAL	JUSTICE	MISSION

		Check if Schedule O contains a response or not	e to any li	ne in this Part X			
					<b>(A)</b> Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			5,833,984.	1	4,204,709.
	2	Savings and temporary cash investments			41,146,920.	2	34,088,753.
	3	Pledges and grants receivable, net			0.	3	
	4	Accounts receivable, net			1,066,738.	4	1,467,150.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst	antial con	tributor, or 35%			
		controlled entity or family member of any of thes	e persons	S		5	
	6	Loans and other receivables from other disqualit	ied perso	ns (as defined			
		under section 4958(f)(1)), and persons described				6	
Ŋ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9				2,704,073.	9	4,050,254.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	10,381,743.			
	b	Less: accumulated depreciation	10b	6,524,020.	3,942,668.	10c	3,857,723.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line ⁻	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			9,027,243.	15	8,399,327.
	16	Total assets. Add lines 1 through 15 (must equa			63,721,626.	16	56,067,916.
	17	Accounts payable and accrued expenses		10,586,252.	17	13,494,180.	
	18	Grants payable		18			
	19	Deferred revenue			4,222,192.	19	2,332,765.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I				21	
ŝ	22	Loans and other payables to any current or form	er officer,	, director,			
Liabilities		trustee, key employee, creator or founder, subst	antial con	tributor, or 35%			
abi		controlled entity or family member of any of thes	s		22		
-	23	Secured mortgages and notes payable to unrela	0.	23			
	24	Unsecured notes and loans payable to unrelated	d third par	ties		24	
	25	Other liabilities (including federal income tax, pa	yables to	related third			
		parties, and other liabilities not included on lines	17-24). C	Complete Part X			
		of Schedule D	10,978,186.	25	10,104,201.		
	26	Total liabilities. Add lines 17 through 25			25,786,630.	26	25,931,146.
		Organizations that follow FASB ASC 958, che	ck here				
ces		and complete lines 27, 28, 32, and 33.					
lan	27	Net assets without donor restrictions	8,559,966.	27	9,361,025.		
Ba	28	Net assets with donor restrictions	29,375,030.	28	20,775,745.		
pun		Organizations that do not follow FASB ASC 9					
Ē		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds				29	
se	30	Paid-in or capital surplus, or land, building, or ec				30	
t As	31	Retained earnings, endowment, accumulated in				31	
Ne	32	Total net assets or fund balances			37,934,996.	32	30,136,770.
	33	Total liabilities and net assets/fund balances			63,721,626.	33	56,067,916.

Form **990** (2021)

Form 990 (2021)
Part X Balance Sheet

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Form	1990 (2021) INTERNATIONAL JUSTICE MISSION	54-1722887	,	Pa	_{ge} 12
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	27,	778,	708.
2	Total expenses (must equal Part IX, column (A), line 25)	2	35,	576,	934.
3	Revenue less expenses. Subtract line 2 from line 1	3	-7,	798,	226.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	37,	934,	996.
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			٥.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	30,	136,	770.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		X
		Г		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	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			x	
b	b Were the organization's financial statements audited by an independent accountant?				
	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 X 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				
	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 Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit			
	Act and OMB Circular A-133?	·····	3a	х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2021)

Department of the Treasury Internal Revenue Service

(Form 990)

Ι

### **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.

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

OMB No. 1545-0047
2021
Open to Public

Inspection

Name of the	e organization	

Van	ne of t	he organization						Employer	identification number
	INTERNATIONAL JUSTICE MISSION 54-1722887							54-1722887	
Pa	Int I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.								
Гhe	organ	ization is not a private found	ation because it is: (F	For lines 1 through 12, cl	heck only	one box.)			
1		A church, convention of chu	urches, or associatio	n of churches described	in sectio	n 170(b)(1	)(A)(i).		
2	Щ	A school described in secti	on 170(b)(1)(A)(ii). (	Attach Schedule E (Form	ו 990).)				
3	Ц	A hospital or a cooperative					-		
4		A medical research organiza	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)	(iii). Enter	the hospital's name,
_		city, and state:							
5		An organization operated for		lege or university owned	l or operat	ed by a go	vernmental ui	hit describe	ed in
~		section 170(b)(1)(A)(iv). (C		and a low the share of the solution					
6	X	A federal, state, or local gov	-						auchtia alaganika al in
'	Δ	An organization that normal	-	itial part of its support in	om a gove	ernmental (	unit or from tr	le general p	public described in
8		section 170(b)(1)(A)(vi). (Control A community trust describe		1)(A)(vi) (Complete Par	них				
9	H	An agricultural research org				ad in coniu	nction with a	land-grant	college
5		or university or a non-land-g				-		-	-
		university:	and conego of agrica			ianio, org		the conege	
10		An organization that normal	lly receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	is, membersh	ip fees, and	d gross receipts from
		activities related to its exem							
		income and unrelated busir		-					-
		See section 509(a)(2). (Cor	nplete Part III.)						
11		An organization organized a	and operated exclusi	vely to test for public sat	fety. See	section 50	9(a)(4).		
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	he functior	ns of, or to ca	rry out the	purposes of one or
		more publicly supported or	ganizations describe	d in <b>section 509(a)(1)</b> o	r section	509(a)(2).	See section &	509(a)(3). (	Check the box on
		_lines 12a through 12d that o	describes the type of	supporting organizatior	and com	plete lines	12e, 12f, and	12g.	
а		<b>Type I.</b> A supporting orga	inization operated, si	upervised, or controlled	by its supp	ported orga	anization(s), ty	pically by	giving
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority c	of the direc	tors or trustee	es of the su	upporting
		organization. You must c	-						
b		<b>Type II.</b> A supporting orga	-				-		-
		control or management o			ame perso	ns that cor	ntrol or manag	je the supp	oorted
_	_	organization(s). You mus	-						
С		J Type III functionally inter						ly integrate	ea with,
d		its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.							
u		<b>Type III non-functionally integrated.</b> 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 instructi			•			anattentit	1033
е		¬ · ·		•				II. Type III	
-	e 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.								
f	Ente	er the number of supported c	rganizations	, , , , , , , , , , , , , , , , , , , ,					
g		vide the following information							
	(	i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(IV) Is the orga in your governi	anization listed ng document?	(v) Amount of		(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see in	structions)	support (see instructions)
Cot-									
Fota									1

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.)

2       Tax revenues levied for the organization's benefit and either paid to or expended on its behalf       Image: constraint of the organization's benefit and either paid to or expended on its behalf         3       The value of services or facilities furnished by a governmental unit to rubilicly supported organization) included on ine 1 that exceeds 2% of the amount shown on line 11, column (f)       68, 272, 193, 73, 983, 260, 87, 542, 861, 104, 981, 708, 27, 624, 976, 362, 404, 9         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)       Image: constraint of the second 2% of the amount shown on line 11, column (f)       Image: constraint of the constraint on the constraint of the constraint on the c	Se	ction A. Public Support						
membership fees received. (Do not include any 'unusual grants.')       68, 272, 193.       73, 983, 260.       87, 542, 861.       104, 981, 708.       27, 624, 976.       362, 404, 9         2       Tax revenues levied for the organ- tization's benefit and either paid to or expended on its bahal       68, 272, 193.       73, 983, 260.       87, 542, 861.       104, 981, 708.       27, 624, 976.       362, 404, 9         3       The value of services or facilities furnished by a governmental unit to the organization without charge of the organization included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       68, 272, 193.       73, 983, 260.       87, 542, 861.       104, 981, 708.       27, 624, 976.       362, 404, 9         6       Public support. Selection B, Total Support section B, Total Support.       68, 272, 193.       73, 983, 260.       87, 542, 861.       104, 981, 708.       27, 624, 976.       362, 404, 9         7       Amounts from ine 11, column (f)       68, 272, 193.       73, 983, 260.       87, 542, 861.       104, 981, 708.       27, 624, 976.       362, 404, 9         7       Amounts from ine 4       69, 2017       (b) 2018       (c) 2019       (d) 2020.       (e) 2021       (f) Total         6       Public support.       Selection B, Total Support       84, 797.       277, 525.       222, 927.       125, 689.       28, 813.       899, 7	Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
include any 'unusual grants.')       68, 272, 193, 73, 983, 260, 87, 542, 861, 104, 981, 708, 27, 624, 976, 362, 404, 9         2 Tax revenues levide for the organization without charge       68, 272, 193, 73, 983, 260, 87, 542, 861, 104, 981, 708, 27, 624, 976, 362, 404, 9         3 The value of services or facilities future interest, dividences of the than a governmental unit to publicly supports. Subtractions for the exceeds 2% of the amount shown on line 11, column (f)       68, 272, 193, 73, 983, 260, 87, 542, 861, 104, 981, 708, 27, 624, 976, 362, 404, 9         6 Public support. Subtractine from the 4       68, 272, 193, 73, 983, 260, 87, 542, 861, 104, 981, 708, 27, 624, 976, 362, 404, 9       14, 425, 8         6 Public support. Subtractine from the 4       68, 272, 193, 73, 983, 260, 87, 542, 861, 104, 981, 708, 27, 624, 976, 362, 404, 9       14, 425, 8         6 Public support. Subtractine from the 4       347, 978, 1       14, 426, 8         6 Public support. Subtractine from the 4       347, 978, 1       14, 426, 8         6 Cass income from interest, dividences, payments received on securities losines, rents, royatties, and income from similar sources activities, whether or not the business activities, whether or not the business activities, whether or not the business activities, etc. (see instructions)       12, 1, 160, 2       355, 8         10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)       338, 288, 14, 940, 141, 677, 60, 915, 555, 8       355, 8         11 Total support. Add lines 7 through 10       1338, 288, 14, 940, 141, 677, 60, 915,	1	Gifts, grants, contributions, and						
2       Tax revenues levied for the organization's benefit and either paid to or expended on its behalf       Image: constraint of the organization's benefit and either paid to or expended on its behalf         3       The value of services or facilities furnished by a governmental unit to rubilicly supported organization) included on ine 1 that exceeds 2% of the amount shown on line 11, column (f)       68, 272, 193, 73, 983, 260, 87, 542, 861, 104, 981, 708, 27, 624, 976, 362, 404, 9         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)       Image: constraint of the second 2% of the amount shown on line 11, column (f)       Image: constraint of the constraint on the constraint of the constraint on the c		membership fees received. (Do not						
ization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit or the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 68, 272, 193. 73, 983, 260. 87, 542, 861. 104, 981, 708. 27, 624, 976. 362, 404, 9 68, 272, 193. 73, 983, 260. 87, 542, 861. 104, 981, 708. 27, 624, 976. 362, 404, 9 68, 272, 193. 73, 983, 260. 87, 542, 861. 104, 981, 708. 27, 624, 976. 362, 404, 9 7 Amounts from line 4 68, 272, 193. 73, 983, 260. 87, 542, 861. 104, 981, 708. 27, 624, 976. 362, 404, 9 69, Public support. Subtractiles 5 from line 4. 69, 2019 (d) 2020 (e) 2021 (f) Total 68, 272, 193. 73, 983, 260. 87, 542, 861. 104, 981, 708. 27, 624, 976. 362, 404, 9 68, 272, 193. 73, 983, 260. 87, 542, 861. 104, 981, 708. 27, 624, 976. 362, 404, 9 7 Amounts from line 4 business and income from universet, dividends, payments received on securities loars, rents, royalites, and income from universet business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of captal assets (Explain in Part Ni) 11 Total support. Add lines 7 through 10 12 Other income. Do not include gain or loss from treated activities, etc. (see instructions) 12 Other income. Do not include gain or loss from treated activities, etc. (see instructions) 12 Intel support. Add lines 7 through 10 14 Diblic support percentage for 2020 (line 6, column (l), divided by line 11, column (l)) 14 Other income and stop here. Section C. Computation of Public Support Percentage 49 Public support percentage for 2020 (line 6, column (l), divided by line 14 is 33 1/3% or more, check this box and stop here. The organization dualities as a publicly support dorganization fuel or check abox on line 13 or 16a, and lin		include any "unusual grants.")	68,272,193.	73,983,260.	87,542,861.	104,981,708.	27,624,976.	362,404,998.
or expended on its behalf	2	Tax revenues levied for the organ-						
3 The value of services or facilities furnished by a governmental unit to the organization without charge       68,272,193,73,983,260,87,542,861,104,981,708,27,624,976,362,404,9         4 Total. Add lines 1 through 3       68,272,193,73,983,260,87,542,861,104,981,708,27,624,976,362,404,9         5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 256 of the amount shown on line 11, column (f)       68,272,193,73,983,260,87,542,861,104,981,708,27,624,976,362,404,9         6 Public support. Exercise 5 from time 4.       3447,978,1         Section B. Total Support       68,272,193,73,983,260,87,542,861,104,981,708,27,624,976,362,404,9         7 Amounts from line 4.       68,272,193,73,983,260,87,542,861,104,981,708,27,624,976,362,404,9         8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from interest, dividends, payments received on securities loans, rents, royalties, and income from interest, dividends, payments received on securities loans, rents, royalties, and income from interest, dividends, payments received on securities loans, rents, royalties, and income from interest, dividends in Part VI)       338,288,14,940,141,677,60,915,355,8         10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)       338,288,14,940,141,677,60,915,355,8         12 Gross receipts from related activities, etc. (see instructions)       12       1,160,2         13 First 5 years. If the Form 90 is for the organization's first, second, third, fourth, or fifth tax year as as se		ization's benefit and either paid to						
furnished by a governmental unit to the organization without charge       68, 272, 193, 73, 983, 260, 87, 542, 861, 104, 981, 708, 27, 524, 976, 362, 404, 9         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)       68, 272, 193, 73, 983, 260, 87, 542, 861, 104, 981, 708, 27, 524, 976, 362, 404, 9         6       Public support. Subtract time 5 from time 4.       58         Section B. Total Support.       Subtract time 5 from time 4.         Section B. Total Support.       68, 272, 193, 73, 983, 260, 87, 542, 861, 104, 981, 708, 27, 524, 976, 362, 404, 9         6       Public support.       68, 272, 193, 73, 983, 260, 87, 542, 861, 104, 981, 708, 27, 524, 976, 362, 404, 9         6       Gross income from interest, dividends, payments received on securities loans, rents, royatties, and income from interest, dividends, payments received on securities loans, rents, royatties, and income from unrelated business activities, whether or not the business is regularly carried on ro loss from the sale of capital assets (Explain in Part VI)       338, 288, 14, 940, 141, 677, 60, 915, 363, 860, 5         12       Cale organization, check this box and step here       12       1, 1, 60, 2         7       Public support percentage from 2010 for the organization first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and step here       14       95, 64         14       Public support percentage from 2020 S		or expended on its behalf						
the organization without charge       4       1       4       1       4       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1	3	The value of services or facilities						
4       Total. Add lines 1 through 3       68, 272, 193.       73, 983, 260.       87, 542, 861.       104, 981, 708.       27, 624, 976.       362, 404, 9         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)       14, 426, 8       347, 978, 1         6       Public support. Subtract time 5 rom time 4.       347, 978, 1       347, 978, 1         Section B. Total Support       (a) 2017       (b) 2018       (c) 2019       (d) 2020       (e) 2021       (f) Total         7       Amounts from line 4       68, 272, 193.       73, 983, 260.       87, 542, 861.       104, 981, 708.       27, 624, 976.       362, 404, 9         68       Public support. Subtract time 6 from interest, dividends, payments received on securities loans, rents, royatties, and income from winelade business activities, whether or not the business activities, whether or not include gain or loss from the sale of capital assets (Explain in Part VI.)       338, 288.       14, 940.       141, 677.       60, 915.       555, 8         10       Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       338, 288.       14, 940.       141, 677.       60, 915.       5555, 8         12		furnished by a governmental unit to						
4       Total. Add lines 1 through 3       68, 272, 193.       73, 983, 260.       87, 542, 861.       104, 981, 708.       27, 624, 976.       362, 404, 9         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)       14, 426, 8       347, 978, 1         6       Public support. Subtract time 5 rom time 4.       347, 978, 1       347, 978, 1         Section B. Total Support       (a) 2017       (b) 2018       (c) 2019       (d) 2020       (e) 2021       (f) Total         7       Amounts from line 4       68, 272, 193.       73, 983, 260.       87, 542, 861.       104, 981, 708.       27, 624, 976.       362, 404, 9         68       Public support. Subtract time 6 from interest, dividends, payments received on securities loans, rents, royatties, and income from winelade business activities, whether or not the business activities, whether or not include gain or loss from the sale of capital assets (Explain in Part VI.)       338, 288.       14, 940.       141, 677.       60, 915.       555, 8         10       Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       338, 288.       14, 940.       141, 677.       60, 915.       5555, 8         12		the organization without charge						
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)       14,426,8         6       Public support, Subtract time 5 mom the 4.       347,978,1         Section B. Total Support       (a) 2017       (b) 2018       (c) 2019       (d) 2020       (e) 2021       (f) Total         Calendar year (or fiscal year beginning in)       (a) 2017       (b) 2018       (c) 2019       (d) 2020       (e) 2021       (f) Total         Section B. Total Support       68, 272, 193.       73,983,260.       87,542,861.       104,981,708.       27,624,976.       362,404,9         7       Amounts from line 4       68,272,193.       73,983,260.       87,542,861.       104,981,708.       27,624,976.       362,404,9         8       Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from nurelated business activities, whether or not the business is regularly carried on       244,797.       277,525.       222,927.       125,689.       28,813.       899,7         10       Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       338,288.       14,940.       141,677.       60,915.       555,8         12       Gross receipts from related activities, etc. (see instructions)       <	4		68,272,193.	73,983,260.	87,542,861.	104,981,708.	27,624,976.	362,404,998.
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) 14,426,8 347,978,1 Section B. Total Support Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2017 (b) 2018 (c) 2019 (c) 2020 (e) 2021 (f) Total (c) 2020 (e) 2021 (f) Total (c) 2019 (c) 2021 (c) 202 (c) 2021 (c) 2021 (c) 202 (c) 2021 (c) 2021 (c) 202 (c) 202 (c) 2021 (c) 202 (c) 20		•	. ,	, ,		, ,	, ,	, ,
governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       14,426,8         6 Public support.       347,978,1         Section B. Total Support       68,272,193,73,983,260,87,542,861,104,981,708,27,624,976,362,404,9         6 Grass income from interest, dividends, payments received on securities loans, rents, royatties, and income from similar sources.       244,797,277,525,222,927,125,689,28,813,899,7         9 Net income from unrelated business activities, whether or not the business is regularly carried on or loss form the sale of capital assets (Explain in Part VI).       338,288,14,940,141,677,60,915,555,8         11 Total support. Add lines 7 through 10       338,288,14,940,141,677,60,915,555,8         12 Gross receipts from related activities, etc. (see instructions)       12         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.       14         9 Net loc support percentage for 2021 (line 6, column (f), divided by line 11, column (f))       14       95,64         13 First 5 yeaps. If the Form 9202 Schedule A, Part II, line 14       95,64         14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))       14       95,64         15 Ayak support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly support dorganization	Ŭ	·						
supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       14,426,8         6       Public support. Subtract line 5 from line 4.       347,978,1         Section B. Total Support         Calendar year (or fiscal year beginning in) ►       (a) 2017       (b) 2018       (c) 2019       (d) 2020       (e) 2021       (f) Total         A mounts from line 4       68,272,193,73,983,260.       87,542,861.       104,981,708.       27,624,976.       362,404,9         8       Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       244,797.       277,525.       222,927.       125,689.       28,813.       899,7         9       Net income from similar sources activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI)       338,288.       14,940.       141,677.       60,915.       555,8         11       Total support. Add lines 7 through 10       338,288.       14,940.       141,677.       60,915.       555,8         12       Gross receipts from related activities, etc. (see instructions)       12       1,160,2       2         13       First 5 years. If the Form 900 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)       363,860,5       5								
on line 1 that exceeds 2% of the amount shown on line 11, column (f)       14,426,8         6 Public support. Subtract line 5 from line 4.       347,978,1         Section B. Total Support         Calendar year (or fiscal year beginning in) ►       (a) 2017       (b) 2018       (c) 2019       (d) 2020       (e) 2021       (f) Total         7 Amounts from line 4         6 Gross income from interest, dividends, payments received on securities loans, rents, royatties, and income from similar sources.         9 Net income from unrelated business activities, whether or not the business is regularly carried on		•						
amount shown on line 11, column (f)       14,426,8         6 Public support.       347,978,1         Section B. Total Support       347,978,1         Calendar year (or fiscal year beginning in) ►       (a) 2017       (b) 2018       (c) 2019       (d) 2020       (e) 2021       (f) Total         7 Amounts from line 4       68,272,193.       73,983,260.       87,542,861.       104,981,708.       27,624,976.       362,404,9         8 Gross income from interest, dividends, payments received on securities loans, rents, royatties, and income from similar sources       244,797.       277,525.       222,927.       125,689.       28,813.       899,7         9 Net income from unrelated business activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.)       338,288.       14,940.       141,677.       60,915.       555,8         11 Total support. Add lines 7 through 10       338,288.       14,940.       141,677.       60,915.       555,8         12 Gross receipts from related activities, etc. (see instructions)       12       1,616,2         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)       organization, check this box and stop here.       14       95.64         15 Public support percentage for 2021 (line 6, column (f), dividide by line 11, column (f)) <td< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>								
column (f)       14,426,8         6 Public support. Subtract line 5 from line 4.       347,978,1         Section B. Total Support         Calendar year (or fiscal year beginning in) ►         (a) 2017       (b) 2018       (c) 2019       (d) 2020       (e) 2021       (f) Total         7 Amounts from line 4       68,272,193.       73,983,260.       87,542,861.       104,981,708.       27,624,976.       362,404,9         8 Gross income from interest, dividends, payments received on securities loans, rents, royatties, and income from similar sources       244,797.       277,525.       222,927.       125,689.       28,813.       899,7         9 Net income from unrelated business activities, whether or not the business is regularly carried on       10       010       10       010 erioneme. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       338,288.       14,940.       141,677.       60,915.       555,8         11 Total support. Add lines 7 through 10       338,288.       14,940.       141,677.       60,915.       555,8         12 Gross receipts from related activities, etc. (see instructions)       12       1,160,2       1,160,2         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here       14       95.64								
6       Public support. Subtract line 5 from line 4.       347,978,1         Section B. Total Support         Calendar year (or fiscal year beginning in) ►       (a) 2017       (b) 2018       (c) 2019       (d) 2020       (e) 2021       (f) Total         7 Amounts from line 4         6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from unrelated business activities, whether or not the business is regularly carried on       244,797.       277,525.       222,927.       125,689.       28,813.       899,7         9       Net income from unrelated business activities, whether or not the business is regularly carried on       338,288.       14,940.       141,677.       60,915.       555,8         11       Total support. Add lines 7 through 10       338,288.       14,940.       141,677.       60,915.       555,8         12       Gross receipts from related activities, etc. (see instructions)       12       1,160,2         13       First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)       organization, check this box and stop here       \$         14       Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))       14       95.64         15       95.47       15       95.47		column (f)						14 426 800
Section B. Total Support         Calendar year (or fiscal year beginning in) ▶         (a) 2017       (b) 2018       (c) 2019       (d) 2020       (e) 2021       (f) Total         7 Amounts from line 4       68, 272, 193.       73, 983, 260.       87, 542, 861.       104, 981, 708.       27, 624, 976.       362, 404, 9         8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       244, 797.       277, 525.       222, 927.       125, 689.       28, 813.       899, 7         9 Net income from unrelated business activities, whether or not the business is regularly carried on       338, 288.       14, 940.       141, 677.       60, 915.       555, 8         11 Total support. Add lines 7 through 10       338, 288.       14, 940.       141, 677.       60, 915.       363, 860, 5         12 Gross receipts from related activities, etc. (see instructions)       12       1, 160, 2         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)       j         organization, check this box and stop here       14       95.64         14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))       14       95.64         15 995.47       16a 33 1/3% support test - 2020. If the organization did n	6							
Calendar year (or fiscal year beginning in) ▶       (a) 2017       (b) 2018       (c) 2019       (d) 2020       (e) 2021       (f) Total         7       Amounts from line 4       68, 272, 193.       73, 983, 260.       87, 542, 861.       104, 981, 708.       27, 624, 976.       362, 404, 9         8       Gross income from interest, dividends, payments received on securities loans, rents, royatties, and income from similar sources       244, 797.       277, 525.       222, 927.       125, 689.       28, 813.       899, 7         9       Net income from unrelated business activities, whether or not the business is regularly carried on       338, 288.       14, 940.       141, 677.       60, 915.       555, 8         10       Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       338, 288.       14, 940.       141, 677.       60, 915.       555, 8         12       Gross receipts from related activities, etc. (see instructions)       12       1, 160, 2         13       First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)       organization, check this box and stop here       14       95.64         14       Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))       14       95.64         15       Public support test - 2021. If the organization d								547,570,150.
7       Amounts from line 4       68, 272, 193.       73, 983, 260.       87, 542, 861.       104, 981, 708.       27, 624, 976.       362, 404, 9         8       Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       244, 797.       277, 525.       222, 927.       125, 689.       28, 813.       899, 7         9       Net income from unrelated business activities, whether or not the business is regularly carried on       100.       141, 677.       60, 915.       555, 8         10       Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       338, 288.       14, 940.       141, 677.       60, 915.       555, 8         11       Total support. Add lines 7 through 10       338, 288.       14, 940.       141, 677.       60, 915.       555, 8         12       Gross receipts from related activities, etc. (see instructions)       12       1,160, 2         13       First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(0(3) organization, check this box and stop here       14       95.64         14       Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))       14       95.64         15       95.47       163 33 1/3% support test - 2021. If the organization did not check the box on line 13 or 1		••	(2) 2017	(b) 2018	(a) 2010	(4) 2020	(a) 2021	(f) Total
8       Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       244,797.       277,525.       222,927.       125,689.       28,813.       899,7         9       Net income from unrelated business activities, whether or not the business is regularly carried on       244,797.       277,525.       222,927.       125,689.       28,813.       899,7         10       Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       338,288.       14,940.       141,677.       60,915.       555,8         11       Total support. Add lines 7 through 10       363,860,5       12       1,160,2         12       Gross receipts from related activities, etc. (see instructions)       12       1,160,2         13       First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here       [         4       Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))       14       95.64         15       Public support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box								
dividends, payments received on securities loans, rents, royalties, and income from similar sources       244,797.277,525.222,927.125,689.28,813.899,7         9 Net income from unrelated business activities, whether or not the business is regularly carried on       338,288.14,940.141,677.60,915.55,8         10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       338,288.14,940.141,677.60,915.55,8         11 Total support. Add lines 7 through 10       363,860,5         12 Gross receipts from related activities, etc. (see instructions)       12 1,160,2         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here       14 95.64         15 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))       14 95.64         15 Public support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization         b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box				, , , , , , , , , , , , , , , , , , , ,	07,012,001.	101,301,700.	27,021,970.	562,161,556.
securities loans, rents, royalties, and income from similar sources 244, 797. 277, 525. 222, 927. 125, 689. 28, 813. 899, 7 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.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage from 2020 Schedule A, Part II, line 14 15 95.47 16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box	0	,						
and income from similar sources       244,797.       277,525.       222,927.       125,689.       28,813.       899,7         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.)       338,288.       14,940.       141,677.       60,915.       555,8         11 Total support. Add lines 7 through 10       338,288.       14,940.       141,677.       60,915.       555,8         12 Gross receipts from related activities, etc. (see instructions)       12       1,160,2         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)       organization, check this box and stop here       []         14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))       14       95,64         15 Public support percentage from 2020 Schedule A, Part II, line 14       95,64       15       95,47         16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box								
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.)       338,288.       14,940.       141,677.       60,915.       555,8         11 Total support. Add lines 7 through 10       363,860,5       12       12       1,160,2         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)       14       95.64         15 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))       14       95.64         15 Public support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       1         b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box       1			244 797	277 525	222 027	125 689	28 813	800 751
activities, whether or not the business is regularly carried on	-		244,757.	277,525.	222,927.	125,009.	20,013.	899,751.
business is regularly carried on	9							
10       Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       338,288.       14,940.       141,677.       60,915.       555,8         11       Total support. Add lines 7 through 10       363,860,5       12       363,860,5         12       Gross receipts from related activities, etc. (see instructions)       12       1,160,2         13       First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)       •         organization, check this box and stop here       •       •       •         Section C. Computation of Public Support Percentage       •       •       •         14       95.64       95.47       •       •       •         15       Public support percentage from 2020 Schedule A, Part II, line 14       15       95.47         16a 33       1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here.       •         b 33       1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box								
or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 2 Gross receipts from related activities, etc. (see instructions) 12 Gross receipts from related activities, etc. (see instructions) 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) 14 95.64 15 95.47 16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box		• • •						
assets (Explain in Part VI.)       338,288.       14,940.       141,677.       60,915.       555,8         11 Total support. Add lines 7 through 10       363,860,5       363,860,5         12 Gross receipts from related activities, etc. (see instructions)       12       1,160,2         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)       reganization, check this box and stop here         Section C. Computation of Public Support Percentage       14       95.64         15 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))       14       95.64         15 Public support percentage from 2020 Schedule A, Part II, line 14       15       95.47         16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       [         b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box       [	10	u de la companya de la company						
11 Total support. Add lines 7 through 10       363,860,5         12 Gross receipts from related activities, etc. (see instructions)       12       1,160,2         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)       organization, check this box and stop here         Section C. Computation of Public Support Percentage       14       95.64         15 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))       14       95.47         16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization           b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box		-						
12       Gross receipts from related activities, etc. (see instructions)       12       1,160,2         13       First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)         organization, check this box and stop here       Image: Computation of Public Support Percentage         14       95.64         15       Public support percentage from 2020 Schedule A, Part II, line 14         16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization         b       33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box			338,288.	14,940.	141,677.	60,915.		555,820.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)         organization, check this box and stop here         Section C. Computation of Public Support Percentage         14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))         15 Public support percentage from 2020 Schedule A, Part II, line 14         16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization         b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box								
organization, check this box and stop here Section C. Computation of Public Support Percentage I4 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) I4 95.64 I5 Public support percentage from 2020 Schedule A, Part II, line 14 I5 95.47 I6a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box		-						1,160,226.
Section C. Computation of Public Support Percentage         14       95.64         15       Public support percentage for 2020 Schedule A, Part II, line 14       15       95.47         16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <ul> <li>b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box</li> </ul>	13	First 5 years. If the Form 990 is for the	e organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
14       Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))       14       95.64         15       Public support percentage from 2020 Schedule A, Part II, line 14       15       95.47         16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       ▶         b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box       ▶								
<ul> <li>15 Public support percentage from 2020 Schedule A, Part II, line 14</li> <li>15 95.47</li> <li>16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</li> <li>b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box</li> </ul>								
<ul> <li>16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</li> <li>b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box</li> </ul>							14	,,,
<ul> <li>stop here. The organization qualifies as a publicly supported organization</li> <li>b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box</li> </ul>								70
<b>b 33 1/3% support test - 2020.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box	<b>16</b> a	a 33 1/3% support test - 2021. If the c	organization did no	t check the box on	line 13, and line	14 is 33 1/3% or m	ore, check this bo	
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and stan have. The experimetion explicition as a sublish, experimetion	b	<b>33 1/3% support test - 2020.</b> If the c	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
and stop here. The organization qualifies as a publicly supported organization								►∟
17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,	17a	a 10% -facts-and-circumstances test	- 2021. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10% o	or more,
and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization		and if the organization meets the fact	s-and-circumstance	es test, check this	box and <b>stop he</b>	<b>re.</b> Explain in Part '	VI how the organiz	ation
meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization $igstarrow [$		meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pul	olicly supported o	rganization		
b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or	b	o 10% -facts-and-circumstances test	- 2020. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is [.]	10% or
more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the		more, and if the organization meets th	e facts-and-circum	stances test, chec	k this box and <b>st</b>	t <b>op here.</b> Explain ir	n Part VI how the	
organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	ation	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	18	Private foundation. If the organizatio	n did not check a b	box on line 13, 16a	., 16b, 17a, or 17b	o, check this box ar	nd see instructions	

Schedule A (Form 990) 2021

# Schedule A (Form 990) 2021 INTERNATIONAL JUSTICE MISSION 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.) o oti o m

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	<b>(f)</b> Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions,						
Z	merchandise sold or services per- formed, or facilities furnished in any activity that is related to the						
2	organization's tax-exempt purpose Gross receipts from activities that						
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						
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						
L	3 received from disqualified persons						
L	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.)						
See	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6						
10a	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 regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for th	-					
Ser	check this box and stop here ction C. Computation of Publi						
	Public support percentage for 2021 (I	• •		column (f))		15	%
	Public support percentage from 2020		-			16	<u>%</u>
	ction D. Computation of Inves						///
17	Investment income percentage for 20	21 (line 10c, colur	nn (f), divided by li	ne 13, column (f))		17	%
18	Investment income percentage from 2					18	%
<b>19</b> a	<b>33 1/3% support tests - 2021.</b> If the					3 1/3%, and line 17	7 is not
	more than 33 1/3%, check this box ar	nd <b>stop here.</b> The	organization quali	fies as a publicly s	upported organiza	tion	
k	<b>33 1/3% support tests - 2020.</b> If the						nd
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	tructions	<b>&gt;</b>

1

2

3a

Yes

No

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If* "Yes." *complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **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.)

3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

#### INTERNATIONAL JUSTICE MISSION

Yes No

Yes No

1

2

1

		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a 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>b</b> A family member of a person described on line 11a above?	11b		
c 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		

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,
	directors, or trustees at all times during the tax year? If "No," describe in 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.
•	Did the eventimation and wate for the homefit of any supervised events the other than the event of

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

#### supervised, or controlled the supporting organization. Section C. Type II Supporting Organizations

Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

#### Section 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.	3		

#### Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** ____ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b 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.*
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a 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.**
- **b** 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.*

Yes No

short-term capital gain       1         poveries of prior-year distributions       2         er gross income (see instructions)       3         lines 1 through 3.       4         reciation and depletion       5         ion of operating expenses paid or incurred for production or exction of gross income or for management, conservation, or extenance of property held for production of income (see instructions)       6         er expenses (see instructions)       7         isted Net Income (subtract lines 5, 6, and 7 from line 4)       8	1970 ( explain in F	Part VI). See instructions
All other Type III non-functionally integrated supporting organizations must complete Sections       (A)         - Adjusted Net Income       (A)         short-term capital gain       1         overies of prior-year distributions       2         er gross income (see instructions)       3         lines 1 through 3.       4         reciation and depletion       5         ion of operating expenses paid or incurred for production or       6         ction of gross income or for management, conservation, or       6         thenance of property held for production of income (see instructions)       6         er expenses (see instructions)       7         sisted Net Income (subtract lines 5, 6, and 7 from line 4)       8         - Minimum Asset Amount       (A)         regate fair market value of all non-exempt-use assets (see       2         uctions for short tax year or assets held for part of year):       1a         age monthly value of securities       1b         market value of other non-exempt-use assets       1c         u(add lines 1a, 1b, and 1c)       1d         uisition indebtedness applicable to non-exempt-use assets       2         instructions).       4         value of non-exempt-use assets (subtract line 4 from line 3)       5         iply line 5 by 0.03	s A through E.	Part VI). See instructions
- Adjusted Net Income       (A)         short-term capital gain       1         overies of prior-year distributions       2         er gross income (see instructions)       3         lines 1 through 3.       4         reciation and depletion       5         ion of operating expenses paid or incurred for production or control of gross income or for management, conservation, or tenance of property held for production of income (see instructions)       6         er expenses (see instructions)       7         isted Net Income (subtract lines 5, 6, and 7 from line 4)       8         - Minimum Asset Amount       (A)         regate fair market value of all non-exempt-use assets (see uctions for short tax year or assets held for part of year):       1a         age monthly value of securities       1a         age monthly value of securities       1a         ia age monthly cash balances       1b         market value of other non-exempt-use assets       1c         ii (add lines 1a, 1b, and 1c)       1d         sount claimed for blockage or other factors       2         iain in detail in Part VI):       1a         usitation indebtedness applicable to non-exempt-use assets       2         tract line 2 from line 1d.       3         n deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, inst	~	
short-term capital gain 1 short term capital	Prior Year	
overies of prior-year distributions       2         er gross income (see instructions)       3         lines 1 through 3.       4         reciation and depletion       5         ion of operating expenses paid or incurred for production or toction of gross income or for management, conservation, or thenance of property held for production of income (see instructions)       6         er expenses (see instructions)       7         issted Net Income (subtract lines 5, 6, and 7 from line 4)       8         - Minimum Asset Amount       (A)         regate fair market value of all non-exempt-use assets (see uctions for short tax year or assets held for part of year): age monthly value of securities       1a         age monthly use of securities       1a         id (add lines 1a, 1b, and 1c)       1d         orount claimed for blockage or other factors       1d         line 1 (in detail in Part VI): uisition indebtedness applicable to non-exempt-use assets       2         tract line 2 from line 1d.       3       1         n deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).       4         value of non-exempt-use assets (subtract line 4 from line 3)       5         iply line 5 by 0.035.       6         overies of prior-year distributions       7         mum Asset Amount       8         - Distri		(B) Current Year (optional)
r gross income (see instructions)          ar gross income (see instructions)       3         lines 1 through 3.       4         reciation and depletion       5         ion of operating expenses paid or incurred for production or ction of gross income or for management, conservation, or thenance of property held for production of income (see instructions)       6         er expenses (see instructions)       7         isted Net Income (subtract lines 5, 6, and 7 from line 4)       8         - Minimum Asset Amount       (A)         regate fair market value of all non-exempt-use assets (see uctions for short tax year or assets held for part of year): age monthly value of securities       1a         age monthly cash balances       1b         market value of other non-exempt-use assets       1c         id add lines 1a, 1b, and 1c)       1d         count claimed for blockage or other factors       2         thract line 2 from line 1d.       3         in deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).       4         value of non-exempt-use assets (subtract line 4 from line 3)       5         jiply line 5 by 0.035.       6         overies of prior-year distributions       7         mum Asset Amount       7         mum Asset Amount (add line 7 to line 6)       8         - Distributable Amount	1	
lines 1 through 3.       4         reciation and depletion       5         ion of operating expenses paid or incurred for production or or ottion of gross income or for management, conservation, or thenance of property held for production of income (see instructions)       6         or expenses (see instructions)       7         isted Net Income (subtract lines 5, 6, and 7 from line 4)       8         - Minimum Asset Amount       (A)         regate fair market value of all non-exempt-use assets (see uctions for short tax year or assets held for part of year): age monthly value of securities       1a         age monthly cash balances       1b         market value of other non-exempt-use assets       1c         id (add lines 1a, 1b, and 1c)       1d         current line 2 from line 1d.       3         in deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).       4         value of non-exempt-use assets (subtract line 4 from line 3)       5         iply line 5 by 0.035.       6         overies of prior-year distributions       7         mum Asset Amount (add line 7 to line 6)       8         - Distributable Amount       1		
reciation and depletion 5 ion of operating expenses paid or incurred for production or action of gross income or for management, conservation, or thenance of property held for production of income (see instructions) 6 er expenses (see instructions) 7 isted Net Income (subtract lines 5, 6, and 7 from line 4) 8 - Minimum Asset Amount (A) regate fair market value of all non-exempt-use assets (see uctions for short tax year or assets held for part of year): age monthly value of securities 1 age monthly cash balances 1 Ib market value of other non-exempt-use assets 1 it (add lines 1a, 1b, and 1c) 1 it (add lines 1a, 1b, and 1c) 1 it (add lines 1a, 1b, and 1c) 1 it areat line 2 from line 1d. 3 in deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions). 4 value of non-exempt-use assets (subtract line 4 from line 3) 5 iply line 5 by 0.035. 6 iply line 5 by 0.035. 7 mum Asset Amount (add line 7 to line 6) 7 mum Asset Amount (add line 7 to line 6) 7 mum Asset Amount (add line 7 to line 6) 1 sted net income for prior year (from Section A, line 8, column A) 1		
ion of operating expenses paid or incurred for production or       incurred for production of income (see instructions)         intenance of property held for production of income (see instructions)       6         intenance of property held for production of income (see instructions)       7         insted Net Income (subtract lines 5, 6, and 7 from line 4)       8         - Minimum Asset Amount       (A)         regate fair market value of all non-exempt-use assets (see uctions for short tax year or assets held for part of year):       1a         age monthly value of securities       1a         age monthly cash balances       1b         market value of other non-exempt-use assets       1c         id (add lines 1a, 1b, and 1c)       1d         count claimed for blockage or other factors       2         tract line 2 from line 1d.       3         in deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).       4         value of non-exempt-use assets (subtract line 4 from line 3)       5         iply line 5 by 0.035.       6         overies of prior-year distributions       7         mum Asset Amount (add line 7 to line 6)       8         - Distributable Amount       1		
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attenance of property held for production of income (see instructions)       6         ar expenses (see instructions)       7         issted Net Income (subtract lines 5, 6, and 7 from line 4)       8         - Minimum Asset Amount       (A)         regate fair market value of all non-exempt-use assets (see uctions for short tax year or assets held for part of year):       1a         age monthly value of securities       1a         age monthly cash balances       1b         market value of other non-exempt-use assets       1c         id (add lines 1a, 1b, and 1c)       1d         count claimed for blockage or other factors       2         tract line 2 from line 1d.       3         in deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).       4         value of non-exempt-use assets (subtract line 4 from line 3)       5         iply line 5 by 0.035.       6         overies of prior-year distributions       7         mum Asset Amount (add line 7 to line 6)       8         - Distributable Amount       1		
er expenses (see instructions)       7         insted Net Income (subtract lines 5, 6, and 7 from line 4)       8         - Minimum Asset Amount       (A)         regate fair market value of all non-exempt-use assets (see uctions for short tax year or assets held for part of year): age monthly value of securities       1a         age monthly cash balances       1b         market value of other non-exempt-use assets       1c         id (add lines 1a, 1b, and 1c)       1d         eount claimed for blockage or other factors       2         tract line 2 from line 1d.       3         in deemed held for exempt-use assets (subtract line 4 from line 3)       5         igly line 5 by 0.035.       6         overies of prior-year distributions       7         mum Asset Amount (add line 7 to line 6)       8         - Distributable Amount       1		
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- Minimum Asset Amount       (A)         regate fair market value of all non-exempt-use assets (see uctions for short tax year or assets held for part of year):       1a         age monthly value of securities       1a         age monthly cash balances       1b         market value of other non-exempt-use assets       1c         II (add lines 1a, 1b, and 1c)       1d         count claimed for blockage or other factors       1         lain in detail in Part VI):       1         uisition indebtedness applicable to non-exempt-use assets       2         tract line 2 from line 1d.       3         n deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).       4         value of non-exempt-use assets (subtract line 4 from line 3)       5         iply line 5 by 0.035.       6         overies of prior-year distributions       7         mum Asset Amount (add line 7 to line 6)       8         - Distributable Amount       1		
regate fair market value of all non-exempt-use assets (see uctions for short tax year or assets held for part of year): age monthly value of securities age monthly cash balances market value of other non-exempt-use assets 1c ul (add lines 1a, 1b, and 1c) to count claimed for blockage or other factors lain in detail in Part VI): uisition indebtedness applicable to non-exempt-use assets tract line 2 from line 1d. n deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions). value of non-exempt-use assets (subtract line 4 from line 3) iply line 5 by 0.035. overies of prior-year distributions <b>7</b> mum Asset Amount (add line 7 to line 6) <b>7</b> sted net income for prior year (from Section A, line 8, column A) <b>1</b>		
uctions for short tax year or assets held for part of year):       1a         age monthly value of securities       1a         age monthly cash balances       1b         market value of other non-exempt-use assets       1c         II (add lines 1a, 1b, and 1c)       1d         count claimed for blockage or other factors       1d         auisition indebtedness applicable to non-exempt-use assets       2         tract line 2 from line 1d.       3         an deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).       4         value of non-exempt-use assets (subtract line 4 from line 3)       5         iply line 5 by 0.035.       6         overies of prior-year distributions       7         mum Asset Amount (add line 7 to line 6)       8         - Distributable Amount       1	) Prior Year	(B) Current Year (optional)
age monthly value of securities1aage monthly cash balances1bmarket value of other non-exempt-use assets1cII (add lines 1a, 1b, and 1c)1dcount claimed for blockage or other factors1daution in detail in Part VI):1duisition indebtedness applicable to non-exempt-use assets2tract line 2 from line 1d.3n deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).4value of non-exempt-use assets (subtract line 4 from line 3)5iply line 5 by 0.035.6coveries of prior-year distributions7mum Asset Amount (add line 7 to line 6)8- Distributable Amount1		
age monthly cash balances       1b         market value of other non-exempt-use assets       1c         il (add lines 1a, 1b, and 1c)       1d         count claimed for blockage or other factors       1d         lain in detail in Part VI):       2         uisition indebtedness applicable to non-exempt-use assets       2         tract line 2 from line 1d.       3         n deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).       4         value of non-exempt-use assets (subtract line 4 from line 3)       5         iply line 5 by 0.035.       6         overies of prior-year distributions       7         mum Asset Amount (add line 7 to line 6)       8         - Distributable Amount       1		
market value of other non-exempt-use assets       1c         market value of other non-exempt-use assets       1d         il (add lines 1a, 1b, and 1c)       1d         count claimed for blockage or other factors       1d         lain in detail in Part VI):       2         uisition indebtedness applicable to non-exempt-use assets       2         tract line 2 from line 1d.       3         n deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).       4         value of non-exempt-use assets (subtract line 4 from line 3)       5         iply line 5 by 0.035.       6         overies of prior-year distributions       7         mum Asset Amount (add line 7 to line 6)       8         - Distributable Amount       1		
II (add lines 1a, 1b, and 1c)       1d         isount claimed for blockage or other factors       1         dain in detail in Part VI):       2         uisition indebtedness applicable to non-exempt-use assets       2         tract line 2 from line 1d.       3         in deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).       4         value of non-exempt-use assets (subtract line 4 from line 3)       5         iply line 5 by 0.035.       6         overies of prior-year distributions       7         mum Asset Amount (add line 7 to line 6)       8         - Distributable Amount       1		
sount claimed for blockage or other factors       Image: Sount claimed for blockage or other factors         lain in detail in Part VI):       Image: Sound claimed for Part VI):         uisition indebtedness applicable to non-exempt-use assets       2         tract line 2 from line 1d.       3         in deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).       4         value of non-exempt-use assets (subtract line 4 from line 3)       5         iply line 5 by 0.035.       6         overies of prior-year distributions       7         mum Asset Amount (add line 7 to line 6)       8         - Distributable Amount       1		
lain in detail in Part VI):     2       uisition indebtedness applicable to non-exempt-use assets     2       tract line 2 from line 1d.     3       in deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).     4       value of non-exempt-use assets (subtract line 4 from line 3)     5       iply line 5 by 0.035.     6       overies of prior-year distributions     7       mum Asset Amount (add line 7 to line 6)     8       - Distributable Amount     1		
uisition indebtedness applicable to non-exempt-use assets       2         tract line 2 from line 1d.       3         in deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).       4         value of non-exempt-use assets (subtract line 4 from line 3)       5         iply line 5 by 0.035.       6         overies of prior-year distributions       7         mum Asset Amount (add line 7 to line 6)       8         - Distributable Amount       1		
tract line 2 from line 1d.     3       in deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).     4       value of non-exempt-use assets (subtract line 4 from line 3)     5       iply line 5 by 0.035.     6       overies of prior-year distributions     7       mum Asset Amount (add line 7 to line 6)     8       - Distributable Amount     1		
n deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, instructions).     4       value of non-exempt-use assets (subtract line 4 from line 3)     5       iply line 5 by 0.035.     6       overies of prior-year distributions     7       mum Asset Amount (add line 7 to line 6)     8       - Distributable Amount     1		
instructions).     4       value of non-exempt-use assets (subtract line 4 from line 3)     5       iply line 5 by 0.035.     6       overies of prior-year distributions     7       mum Asset Amount (add line 7 to line 6)     8       - Distributable Amount     1		
value of non-exempt-use assets (subtract line 4 from line 3)       5         iply line 5 by 0.035.       6         overies of prior-year distributions       7         mum Asset Amount (add line 7 to line 6)       8         - Distributable Amount       1		
iply line 5 by 0.035.     6       overies of prior-year distributions     7       mum Asset Amount (add line 7 to line 6)     8       - Distributable Amount     1		
byeries of prior-year distributions     7      mum Asset Amount (add line 7 to line 6)     8      - Distributable Amount      sted net income for prior year (from Section A, line 8, column A)     1		
mum Asset Amount (add line 7 to line 6)     8       - Distributable Amount     1		
- Distributable Amount  sted net income for prior year (from Section A, line 8, column A)		
sted net income for prior year (from Section A, line 8, column A) 1		
		Current Year
mum asset amount for prior year (from Section B, line 8, column A) 3		
r greater of line 2 or line 3.		
me tax imposed in prior year 5		
ributable Amount. Subtract line 5 from line 4, unless subject to		
rgency temporary reduction (see instructions).		
Check here if the current year is the organization's first as a non-functionally integrated Type I		nization (see

Schedule A (Form 990) 2021

instructions).

b Excess from 2018 c Excess from 2019 d Excess from 2020 e Excess from 2021

chedule A (Fo					4-1722887	Paç
	vpe III Non-Functionally Integrated 50	9(a)(3) Supporting Orga	nizations (continue	ed)		
ection D - Dis					Current \	fear
	paid to supported organizations to accomplish ex			1		
	paid to perform activity that directly furthers exen	npt purposes of supported				
Ŭ	ions, in excess of income from activity			2		
	ative expenses paid to accomplish exempt purpo	ses of supported organizations	6	3		
	paid to acquire exempt-use assets			4		
	set-aside amounts (prior IRS approval required - _µ	provide details in Part VI)		5		
6 Other dis	tributions ( <i>describe in Part VI</i> ). See instructions.			6		
7 Total and	ual distributions. Add lines 1 through 6.			7		
	ons to attentive supported organizations to which	the organization is responsive				
(provide d	details in Part VI). See instructions.			8		
9 Distributa	ble amount for 2021 from Section C, line 6			9		
0 Line 8 an	nount divided by line 9 amount			10		
ection E - Dis	tribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	5	(iii) Distributa Amount foi	
1 Distributa	ble amount for 2021 from Section C, line 6					
2 Underdis	tributions, if any, for years prior to 2021 (reason-					
	e required - explain in Part VI). See instructions.					
	stributions carryover, if any, to 2021					
a From 201						
<b>b</b> From 201						
c From 201						
d From 201						
e From 202						
	nes 3a through 3e					
	o underdistributions of prior years					
	o 2021 distributable amount					
	r from 2016 not applied (see instructions)					
	er. Subtract lines 3g, 3h, and 3i from line 3f.					
	ons for 2021 from Section D,					
line 7:	\$					
	o underdistributions of prior years					
	o 2021 distributable amount					
	er. Subtract lines 4a and 4b from line 4.					
	g underdistributions for years prior to 2021, if					
	ract lines 3g and 4a from line 2. For result greater					
-	, explain in <b>Part VI.</b> See instructions.					
	g underdistributions for 2021. Subtract lines 3h					
	om line 1. For result greater than zero, explain in					
	See instructions.					
	listributions carryover to 2022. Add lines 3j					
and 4c.						
	vn of line 7:					

Schedule A (Form 990) 2021

Part VI       Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 12; and 12; both U, Section D, lines 2; and 3; both U, Section E, lines 12; 2b; 2d; and 13c; Part V, Section D, lines 12; and 2d; and Part V, Section E, lines 12; 2b; 2d; and 3d; Part V, line 1; Part V, Section D, lines 2d; and 8; and Part V, Section E, lines 12; 2b; 2d; and 3d; Part V, line 1; Part V, Section D, lines 5; and 8; and Part V, Section E, lines 12; 2b; 2d; and 3d; Part V, line 1; Part V, Section D, lines 5; and 8; and Part V, Section E, lines 12; 2b; 3d; and 3d; Part V, line 1; Part V, Section E, lines 12; 2d; 2d; 2d; 2d; 2d; 2d; 2d; 2d; 2d; 2
OTHER INCOME 2017 AMOUNT: \$ 272,253. 2019 AMOUNT: \$ 141,677. 2020 AMOUNT: \$ 141,677. 2020 AMOUNT: \$ 46,175.  FUNDRAISING INCOME 2017 AMOUNT: \$ 66,035. 2018 AMOUNT: \$ 14,940. 2020 AMOUNT: \$ 14,940. 2020 AMOUNT: \$ 14,940. 2020 AMOUNT: \$ 14,740.  SCHEDULE A, PART II: DURING 2022, IJM CHANGED FROM A CALENDAR YEAR END TO A FISCAL YEAR END (03/31/2022). IN SCHEDULE A, PART II, COLUMN (A) REPRESENTS THE YEAR ENDED 12/31/18, COLUMN (B) REPRESENTS THE YEAR ENDED 12/31/19, COLUMN (C) REPRESENTS THE YEAR ENDED 12/31/20, COLUMN (D) REPRESENTS THE YEAR ENDED 12/31/21, COLUMN (E) REPRESENTS THE SHORT YEAR 01/01/2022 -
2017 AMOUNT: \$ 272,253. 2019 AMOUNT: \$ 141,677. 2020 AMOUNT: \$ 46,175. 2020 AMOUNT: \$ 46,175. FUNDRAISING INCOME 2017 AMOUNT: \$ 66,035. 2018 AMOUNT: \$ 14,940. 2020 AMOUNT: \$ 14,740. 2020 AMOUNT: \$ 14,740. SCHEDULE A, PART II: DURING 2022, IJM CHANGED FROM A CALENDAR YEAR END TO A FISCAL YEAR END (03/31/2022). IN SCHEDULE A, PART II, COLUMN (A) REPRESENTS THE YEAR ENDED 12/31/18, COLUMN (B) REPRESENTS THE YEAR ENDED 12/31/19, COLUMN (C) REPRESENTS THE YEAR ENDED 12/31/20, COLUMN (D) REPRESENTS THE YEAR ENDED 12/31/21, COLUMN (E) REPRESENTS THE SHORT YEAR 01/01/2022 -
2013 AMOUNT: § 141,677. 2020 AMOUNT: § 146,175. FUNDRAISING INCOME 2017 AMOUNT: § 66,035. 2018 AMOUNT: § 14,940. 2020 AMOUNT: § 14,940. 2020 AMOUNT: § 14,740. 2020 AMOUNT: § 14,740. SCHEDULE A, PART II: DURING 2022, JJM CHANGED FROM A CALENDAR YEAR END TO A FISCAL YEAR END (03/31/2022). IN SCHEDULE A, PART II, COLUMN (A) REPRESENTS THE YEAR ENDED 12/31/18, COLUMN (B) REPRESENTS THE YEAR ENDED 12/31/19, COLUMN (C) REPRESENTS THE YEAR ENDED 12/31/20, COLUMN (D) REPRESENTS THE YEAR ENDED 12/31/21, COLUMN (E) REPRESENTS THE SHORT YEAR 01/01/2022 -
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FUNDRAISING INCOME 2017 AMOUNT: \$ 66,035. 2018 AMOUNT: \$ 14,940. 2020 AMOUNT: \$ 14,740. 2020 AMOUNT: \$ 11, COLUMN (A) REPRESENTS THE YEAR 2010 12/31/18, COLUMN (B) REPRESENTS THE YEAR ENDED 12/31/20, COLUMN 2020 AMOUNT: \$ 12/31/21, COLUMN (E) REPRESENTS THE SHORT YEAR 01/01/2022 - 2020 AMOUNT: \$ 2000 A
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<ul> <li>(03/31/2022). IN SCHEDULE A, PART II, COLUMN (A) REPRESENTS THE YEAR</li> <li>ENDED 12/31/18, COLUMN (B) REPRESENTS THE YEAR ENDED 12/31/19, COLUMN</li> <li>(C) REPRESENTS THE YEAR ENDED 12/31/20, COLUMN (D) REPRESENTS THE YEAR</li> <li>ENDED 12/31/21, COLUMN (E) REPRESENTS THE SHORT YEAR 01/01/2022 -</li> </ul>
ENDED 12/31/18, COLUMN (B) REPRESENTS THE YEAR ENDED 12/31/19, COLUMN (C) REPRESENTS THE YEAR ENDED 12/31/20, COLUMN (D) REPRESENTS THE YEAR ENDED 12/31/21, COLUMN (E) REPRESENTS THE SHORT YEAR 01/01/2022 -
(C) REPRESENTS THE YEAR ENDED 12/31/20, COLUMN (D) REPRESENTS THE YEAR ENDED 12/31/21, COLUMN (E) REPRESENTS THE SHORT YEAR 01/01/2022 -
ENDED 12/31/21, COLUMN (E) REPRESENTS THE SHORT YEAR 01/01/2022 -
03/31/2022.

#### ** PUBLIC DISCLOSURE COPY **

## Schedule of Contributors

► Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2021

Employer identification number

Department of the Treasury
Internal Revenue Service

(Form 990)

Schedule B

Name of the organization

Organization type (check one):

INTERNATIONAL JUSTICE MISSION	
-------------------------------	--

5	4	_	1	7	2	2	8	8	7

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( ³ ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated 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**

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  $\dots$   $\blacktriangleright$  \$

**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).

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

Schedule B (Form 990) (2021)

INTERNAT	IONAL JUSTICE MISSION	5	54-1722887		
Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1		\$3,022,168.	Person     X       Payroll     Image: Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2		\$1,922,700.	Person     X       Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3		\$1,042,878.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
4		\$937,012.	Person     X       Payroll     Image: Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
5		\$830,000.	Person     X       Payroll     Image: Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
6		\$740,518.	Person     X       Payroll        Noncash        (Complete Part II for noncash contributions.)		

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Schedule B (Form 990) (2021) Name of organization

Employer identification number

Page **2** 

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7		\$679,229.	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
8		\$600,000.	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$585,000.	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
10		\$559,479.	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

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

INTERNATIONAL JUSTICE MISSION

54-1722887

123452 11-11-21

Schedule B (Form 990) (2021)

Name of organization

Part I

Page **2** 

Employer identification number

	rganization	Enpi	oyer identification numb
ITERNAT	IONAL JUSTICE MISSION	5	4-1722887
Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art 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) (2021)

Page 3

Name of organization       Employer identifica         INTERNATIONAL JUSTICE MISSION       54-1722887         Part III       Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,0         from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations described in section 501(c)(7), (8), or (10) that total more than \$1,0         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is         Part II       (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is         (a) No.       Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is         (a) No.       (b) Purpose of gift       (c) Transfer of gift       (d) Description of how gift is         (b) Purp							
Part III       Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,0 from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing relation at exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enterthis info.one.) \$	tion number						
Part III       Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,0 from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing relation at exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enterthis info.one.) \$							
(a) No. from Part I       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is         (e) Transfer of gift       (e) Transfer of gift       (e) Transfer of gift         (a) No. from Part I       (b) Purpose of gift       (c) Use of gift       (c) Use of gift         (a) No. from Part I       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is         (a) No. from       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is         (a) No. from       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is         (a) No. from       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is         (e) Transfer of gift       (e) Transfer of gift       (e) Transfer of gift       (e) Transfer of gift	00 for the year						
from Part I     (b) Purpose of gift     (c) Use of gift     (d) Description of how gift is							
(a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is (e) Transfer of gift (c) Use of gift	held						
Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         Image: Stransferee's name, address, and ZIP + 4       Relationship of transferor to transferee         Image: Stransferee's name, address, and ZIP + 4       Relationship of transferor to transferee         Image: Stransferee's name, address, and ZIP + 4       Relationship of transferor to transferee         Image: Stransferee's name, address, and ZIP + 4       Relationship of transferor to transferee         Image: Stransferee's name, address, and ZIP + 4       Relationship of transferor to transferee         Image: Stransferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (a) No.       (b) Purpose of gift       (c) Use of gift         Image: Stransferee       (c) Use of gift       (d) Description of how gift is         Image: Stransferee       Image: Stransferee       Image: Stransferee         Image: Stransferee       Image: Stransferee       Image: Stransferee         Image: Stransferee       Image: Stransferee       Image: Stransferee         Image: Stransferee       Image: Stransferee       Image: Stransferee       Image: Stransferee         Image: Stransferee       Image: Stransferee       Image: Stransferee       Image: Stransferee       Image: Stransferee         Image: Stransferee       Image: Stransferee       Image: Stransferee       Image: Str							
(a) No. from Part I       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is							
Part I         Compare to the comp							
Part I         Image: Constraint of the constraint o							
	held						
Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee	(e) Transfer of gift						
(a) No.       from       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is         Part I	held						
(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 Part I	held						
(e) Transfer of gift							
Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							

(Form 990)	For Org	anizations Exempt From Incom	e Tax Under section	501(c) and section 5	27	2021		
		if the organization is described				Open to Public		
Department of the Treasury Internal Revenue Service								
If the organization ans	wered "Yes," on	Form 990, Part IV, line 3, or Fo	orm 990-EZ, Part V, li	ine 46 (Political Camp	baign Activ	vities), then		
<ul> <li>Section 501(c)(3) or</li> </ul>	ganizations: Com	plete Parts I-A and B. Do not cor	nplete Part I-C.					
<ul> <li>Section 501(c) (other</li> </ul>	r than section 50	1(c)(3)) organizations: Complete	Parts I-A and C below	. Do not complete Par	t I-B.			
<ul> <li>Section 527 organiz</li> </ul>	ations: Complete	Part I-A only.						
If the organization ans	wered "Yes," on	Form 990, Part IV, line 4, or Fo	orm 990-EZ, Part VI, I	line 47 (Lobbying Act	ivities), the	en		
<ul> <li>Section 501(c)(3) or</li> </ul>	ganizations that h	nave filed Form 5768 (election un	der section 501(h)): C	omplete Part II-A. Do r	not comple	te Part II-B.		
<ul> <li>Section 501(c)(3) or</li> </ul>	ganizations that h	nave NOT filed Form 5768 (election	on under section 501(	(h)): Complete Part II-B	. Do not co	omplete Part II-A.		
If the organization ans Tax) (See separate inst		Form 990, Part IV, line 5 (Prox	y Tax) (See separate	instructions) or Forn	ו 990-EZ, F	Part V, line 35c (Proxy		
		ions: Complete Part III.						
Name of organization					Employe	r identification number		
		NAL JUSTICE MISSION				54-1722887		
Part I-A Compl	ete if the org	anization is exempt unde	er section 501(c)	or is a section 52	27 organ	ization.		
1 Provide a descripti	on of the organiz	ation's direct and indirect politica	al campaign activities	in Part IV.				
		ures			▶\$			
		gn activities						
			<b>501</b> (-)	(0)				
		anization is exempt unde						
		incurred by the organization und						
		incurred by organization manage						
		n 4955 tax, did it file Form 4720 t				Yes No		
						Yes No		
b If "Yes," describe in Part I-C Compl		anization is exempt unde	er section 501(c)	excent section	501(c)(3)			
		by the filing organization for sec ization's funds contributed to oth			🕨 🕈 🔛			
2 Enter the amount of exempt function ac			-		▶\$			
•		. Add lines 1 and 2. Enter here ar			ΨΨ			
•	•				▶\$			
		1120-POL for this year?				Yes No		
		ployer identification number (EIN				filing organization		
		ion listed, enter the amount paid	, ,	•				
contributions receiv	ved that were pro	omptly and directly delivered to a	separate political org	anization, such as a s	eparate seg	gregated fund or a		
political action con	nmittee (PAC). If a	additional space is needed, provi	de information in Part	t IV.				
<b>(a)</b> Nam	e	<b>(b)</b> Address	<b>(c)</b> EIN	(d) Amount paid filing organizatio funds. If none, ent	on's coi ter -0 c	(e) Amount of political ntributions received and promptly and directly delivered to a separate political organization. If none, enter -0		

**Political Campaign and Lobbying Activities** 

OMB No. 1545-0047

SCHEDULE C

			STICE MISSION			722887 Page 2
Part II-A Complete if the org section 501(h)).	janizatior	n is exen	npt under sectio	n 501(c)(3) and file	d Form 5768 (el	ection under
	ation belong	s to an affi	liated aroun (and list i	n Part IV each affiliated g	aroup member's par	e address FIN
expenses, and sha					group member 3 han	ic, address, Ein,
		, ,	nd "limited control" pr	ovisions apply		
	its on Lobb		•		(a) Filing	(b) Affiliated group
(The term "expend	ditures" me	ans amou	nts paid or incurred.	)	organization's totals	totals
1a Total lobbying expenditures to influ	uence public	c opinion (	grassroots lobbying)			
<b>b</b> Total lobbying expenditures to influence	uence a legi	slative boo	ly (direct lobbying)			
c Total lobbying expenditures (add li	ines 1a and	1b)				
d Other exempt purpose expenditure						
e Total exempt purpose expenditure						
f Lobbying nontaxable amount. Ente	er the amou	nt from the	e following table in bot	th columns.		
If the amount on line 1e, column (a) o	or (b) is:	The lob	bying nontaxable an	nount is:		
Not over \$500,000		20% of	the amount on line 1e			
Over \$500,000 but not over \$1,000	0,000	\$100,00	0 plus 15% of the exc	cess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000	\$175,00	0 plus 10% of the exc	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	,000,000	\$225,00	0 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000		\$1,000,	000.			
j If there is an amount other than ze reporting section 4911 tax for this (Some organizations t	year? 4 hat made a	line 1h or 1-Year Ave section 5	eraging Period Under D1(h) election do not	r Section 501(h) have to complete all of		Yes No
		-	ate instructions for linditures During 4-Ye			
		, <u>9</u> =poi				
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2	018	<b>(b)</b> 2019	(c) 2020	<b>(d)</b> 2021	(e) Total
2a Lobbying nontaxable amount						
<ul> <li>b Lobbying ceiling amount (150% of line 2a, column(e))</li> </ul>						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

Schedule C (Form 990) 2021

## 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 each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		<b>)</b>
of the lobbying activity.	Yes	Νο	Amo	ount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?	х			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X			
c Media advertisements?				4,000.
d Mailings to members, legislators, or the public?		Х		
e Publications, or published or broadcast statements?		Х		
f Grants to other organizations for lobbying purposes?		Х		
g Direct contact with legislators, their staffs, government officials, or a legislative body?				41,074.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		
i Other activities?		X		
j Total. Add lines 1c through 1i				45,074.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		-1		
Part III-A Complete if the organization is exempt under section 501(c)(4), sec	tion 501(c)(5	b), or sec	tion	
501(c)(6).				
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?				
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from <b>Part III-B</b> Complete if the organization is exempt under section 501(c)(4), sec				
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."         1       Dues, assessments and similar amounts from members			II-A, IINe	3, IS
<ul> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of p</li> </ul>				
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
<b>b</b> Carryover from last year				
c Total				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying ar				
expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures. See instructions		5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gr	oup list); Part II-	A, lines 1 a	nd 2 (See	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.				
PART II-B, LINE 1, LOBBYING ACTIVITIES:				
FROM JANUARY-MARCH 2022, IJM STAFF MOBILIZED VOLUNTEERS TO LOBBY IN				
SUPPORT OF CONGRESSIONAL APPROPRIATIONS AND LEGISLATION TO COMBAT				
TRAFFICKING IN PERSONS (TIP) AND VIOLENCE AGAINST WOMEN AND CHILDREN				
(VAWC). THESE VOLUNTEER ACTIVITIES INCLUDED MEETING WITH MEMBERS OF				

# Part IV Supplemental Information (continued) CONTACTING LEGISLATORS VIA EMAIL AND SOCIAL MEDIA. VOLUNTEERS ARE TRAINED BY IJM STAFF THROUGH WEBINARS, PHONE CALLS, AND AN ONLINE TRAINING PLATFORM. IJM STAFF AND PAID CONSULTANTS ALSO LOBBIED LEGISLATORS AND THEIR STAFF DIRECTLY SUPPORT OF CONGRESSIONAL APPROPRIATIONS AND LEGISLATION.

(Form	990)
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#### Supplemental Financial Statements

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

OMB No. 1545-0047 Public

Schedule D (Form 990) 2021

Name	of	tha	organ	izatio
name	UI.	uie	oryar	iizatic

epartment of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service Employer identification number on INTERNATIONAL JUSTICE MISSION 54 - 1722887Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds 5 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 advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last 2 Held at the End of the Tax Year day of the tax year. Total number of conservation easements 2a а Total acreage restricted by conservation easements 2b b Number of conservation easements on a certified historic structure included in (a) 2c С Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear ► Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? No 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ► \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? Yes No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and 9 balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of

	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	public service,
	provide the following amounts relating to these items:	
	(i) Revenue included on 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 treasures, or other similar assets for financial gain, pro	vide
	the following amounts required to be reported under FASB ASC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1	► \$
b	Assets included in Form 990, Part X	▶ \$

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

Sche		NAL JUSTICE MIS					-1722887	Page <b>2</b>
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or 0	Other Si	imilar As	sets (contin	nued)
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that m	nake signif	icant use o	f its	
	collection items (check all that apply):							
а	Public exhibition	c	l 🗌 Loan or ex	change program	ı			
b	Scholarly research	e	Other					
с	Preservation for future generations							
4	Provide a description of the organization's co	ellections and explain	n how they further t	he organization'	s exempt	purpose in	Part XIII.	
5	During the year, did the organization solicit of	r receive donations of	of art, historical trea	sures, or other s	similar ass	sets		
	to be sold to raise funds rather than to be ma						Yes	No
Par	t IV Escrow and Custodial Arrang		ete if the organizati	on answered "Ye	es" on For	rm 990, Par	t IV, line 9, or	
	reported an amount on Form 990, Par							
1a	Is the organization an agent, trustee, custodia							
	on Form 990, Part X?						Yes	No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fo	llowing table:					
							Amoun	t
С	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						Lei Yes	No No
	If "Yes," explain the arrangement in Part XIII.							
Par	<b>t V</b> Endowment Funds. Complete in	•				Thursday	haali (-) Fau	
		(a) Current year	(b) Prior year	(c) Two years	раск (а)	Three years	back (e) Four	years back
1a	Beginning of year balance							
b	Contributions							
C.	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs							
t	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the curr		e (line 1g, column (a	a)) neid as:				
a L	Board designated or quasi-endowment		%					
b	Permanent endowment	% %						
с		, -						
20	The percentages on lines 2a, 2b, and 2c should have there endowment funds not in the posses		tion that are hold a	nd administored	tor the e	rachization		
Ja				ind administered		ganization	]	Yes No
	by: (i) Unrelated organizations						3a(i)	
	<ul><li>(i) Unrelated organizations</li></ul>							
h	If "Yes" on line 3a(ii), are the related organizations							
4	Describe in Part XIII the intended uses of the							
Par	t VI Land, Buildings, and Equipm	<u>u</u>	Which funds.					
	Complete if the organization answered		), Part IV, line 11a.	See Form 990, F	Part X, line	10.		
	Description of property	<b>(a)</b> Cost or c basis (investr	other (b) Cos	st or other s (other)	(c) Accu depred	mulated	( <b>d</b> ) Boo	k value
<b>1</b> a	Land							
b	Buildings							
	Leasehold improvements			2,454,033.	2	,016,110.	,	437,923.
	Equipment			2,137,196.	1	,835,010.	,	302,186.
	Other			5,790,514.	2	,672,900.	. 3,	,117,614.
	. Add lines 1a through 1e. (Column (d) must ea		X. column (B). line	10c.)		►	3,	,857,723.
-	· · · · · · · · · · · · · · · · · · ·			,				

Schedule D (Form 990) 2021

#### Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-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, col. (B) line 12.)		

#### Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

#### Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) SECURITY DEPOSITS	752,410.
(2) EMPLOYEE AND OVERSEAS ADVANCES	66,152.
(3) OPERATING LEASE RIGHT OF USE ASSET	7,580,765.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	8,399,327.
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. (a) Description of liability (b) Book value 1. (1) Federal income taxes 10,104,201. LEASE LIABILITIES (2) (3) (4) (5) (6) (7) (8) (9) 10,104,201.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2021

Sche	dule D (Form 990) 2021 INTERNATIONAL JUSTICE MISSION			54-17	22887 Page <b>4</b>
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	nts With	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	135,110,539.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities		505,825.		
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)		106,826,006.		
	Add lines 2a through 2d			2e	107,331,831.
3	Subtract line 2e from line 1			3	27,778,708.
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 <b>4a</b> and <b>4b</b>			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	27,778,708.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	ents With	n Expenses per F	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	133,115,054.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	505,825.		
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	97,032,295.		
е	Add lines <b>2a</b> through <b>2d</b>			2e	97,538,120.
3	Subtract line 2e from line 1			3	35,576,934.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	35,576,934.
Pa	t XIII Supplemental Information.				
Prov	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	IV, lines 1b	and 2b; Part V, line 4	; Part X,	line 2; Part XI,

PART X, LINE 2:

IJM IS GENERALLY EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF

lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE). IN ADDITION,

IJM QUALIFIES FOR CHARITABLE CONTRIBUTION DEDUCTIONS AND HAS BEEN

CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION. INCOME,

WHICH IS NOT RELATED TO EXEMPT PURPOSES, LESS APPLICABLE DEDUCTIONS, IS

SUBJECT TO FEDERAL AND STATE CORPORATE INCOME TAXES. IJM DID NOT HAVE ANY

NET UNRELATED BUSINESS INCOME FOR THE YEAR ENDED MARCH 31, 2022.

IJM COMPLIES WITH THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES TOPIC,

WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR

#### EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE

Schedule D (Form 990) 2021 INTERNATIONAL JUSTICE MISSION		54-1722887	Page 5
Part XIII Supplemental Information (continued)			
CONSOLIDATED FINANCIAL STATEMENTS. UNDER THIS POLICY, IJM MAY R	ECOGNIZE		
THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MO	RE LIKELY		
THAN NOT THAT THE TAX POSITION WOULD BE SUSTAINED ON EXAMINATION	N BY TAXING		
AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. MAN	AGEMENT HAS		
EVALUATED IJM'S TAX POSITIONS AND HAS CONCLUDED THAT IJM HAS TA	KEN NO		
UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE CONSOLID	ATED		
FINANCIAL STATEMENTS TO COMPLY WITH PROVISIONS OF THIS GUIDELIN	E. IJM		
WOULD BE LIABLE FOR INCOME TAXES IN THE U.S. FEDERAL JURISDICTI	ON.		
PART XI, LINE 2D - OTHER ADJUSTMENTS:			
RENTAL EXPENSES ON PART VIII LINE 6B	36,927.		
IJM US EXPENSES - CALENDAR YEAR 2021	106,789,079.		
TOTAL TO SCHEDULE D, PART XI, LINE 2D	106,826,006.		
PART XII, LINE 2D - OTHER ADJUSTMENTS:			
RENTAL EXPENSES ON PART VIII LINE 6B	36,927.		
IJM US EXPENSES - CALENDAR YEAR 2021	96,995,368.		
TOTAL TO SCHEDULE D, PART XII, LINE 2D	97,032,295.		

#### Statement of Activities Outside the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance,

the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

United States.	nde in Part v the	organization s	procedures for monitoring the use of its	s grants and other assistance outs	ide trie
3 Activities per Region. (Th (a) Region	ne following Part (b) Number of offices in the region	(c) Number of employees, agents, and independent	an be duplicated if additional space is n (d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to	(e) If activity listed in (d) is a program service, describe specific type	(f) Total expenditures for and investments
		contractors in the region	recipients located in the region)	of service(s) in the region	in the region
				SEXUAL VIOLENCE: INVESTIGATION, VICTIM	
CENTRAL AMERICA AND		0.7		SERVICES (LEGAL,	2 140 505
THE CARIBBEAN	3	87		PSYCHOSOCIAL), CAPACITY	3,140,686.
EAST ASIA AND THE				LEGAL STATUS DOCUMENTATION; SEXUAL VIOLENCE/TRAFFICKING:	
PACIFIC	8	217	PROGRAM SERVICES	INVESTIGATION, VICTIM	7,068,638.
				SEXUAL	.,,
				VIOLENCE/TRAFFICKING:	
EUROPE (INCLUDING				INVESTIGATION, VICTIM	
ICELAND & GREENLAND)	2	15	PROGRAM SERVICES	SERVICES (LEGAL,	1,245,513.
				SEXUAL	
				VIOLENCE/TRAFFICKING:	
				INVESTIGATION, VICTIM	
SOUTH AMERICA	2	26	PROGRAM SERVICES	SERVICES (LEGAL,	1,144,390.
				SEXUAL VIOLENCE/	
				TRAFFICKING/ FORCED	
				LABOR: INVESTIGATION,	
SOUTH ASIA	5	297	PROGRAM SERVICES	VICTIM SERVICES (LEGAL,	4,402,390.
				LAND RIGHTS/POLICE	
				BRUTALITY/SEXUAL	
				VIOLENCE: INVESTIGATION,	
SUB-SAHARAN AFRICA	4	188	PROGRAM SERVICES	VICTIM SERVICES (LEGAL,	4,718,803.
CENTRAL AMERICA AND					
THE CARIBBEAN	0	0	GRANT MAKING		103,038.
CENTRAL AMERICA AND					
THE CARIBBEAN	0	0	FUNDRAISING		815,440.
3 a Subtotal	24	830			22,638,898.
<b>b</b> Total from continuation					
sheets to Part I	0	0			6,392,356.
c Totals (add lines 3a					
and 3b)	24	830			29,031,254.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. SEE PART V FOR COLUMN (E) DESCRIPTIONS

Schedule F (Form 990) 2021

Employer identification number

54-1722887

Department of the Treasury Internal Revenue Service

Part I

Name of the organization

SCHEDULE F (Form 990)

INTERNATIONAL	JUSTICE	MISSION	

Form 990, Part IV, line 14b.

Inspection

.....X Yes No

OMB No. 1545-0047
2021
Open to Public

Schedule F (Form 990) Part I Continuation			ISSION • (Schedule F (Form 990), Part I, line 3)	54-1722887	Page
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE					
PACIFIC	0	0	GRANT MAKING		262,847
EAST ASIA AND THE PACIFIC	0	0	FUNDRAISING		2,265,840.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANT MAKING		56,228.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	FUNDRAISING		327,245.
SOUTH AMERICA	0	0	GRANT MAKING		325.
SOUTH AMERICA	0	0	FUNDRAISING		287,770.
SOUTH ASIA	0	0	GRANT MAKING		211,613.
SOUTH ASIA	0	0	FUNDRAISING		1,159,915.
SUB-SAHARAN AFRICA	0	0	GRANT MAKING		506,887.
SUB-SAHARAN AFRICA	0	0	FUNDRAISING		1,313,686.
Totals					6,392,356.

INTERNATIONAL JUSTICE MISSION

54-1722887

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
							FURNITURE/BUILDING	
			STRENGTHEN LEGAL				SUPPLIES/EQUIPMENT	
		CENTRAL AMERICA	ASSISTANCE TO VICTIMS				FOR NEW CAMPUS OF	
		AND THE CARIBBEAN	OF INJUSTICE	0.		36,253.	THE VICTIM	COST
			SUBAWARD TO PILOT A					
			SMALL COMMUNITY					
		CENTRAL AMERICA	INTERVENTION PROJECT					
		AND THE CARIBBEAN	TO SUPPORT WOMEN AND	19,249.	WIRE TRANSFER	0.		
							AUDIO/VIDEO/COMPUT	
			STRENGTHEN LEGAL				ERS/SOFTWARE/OTHER	
		CENTRAL AMERICA	ASSISTANCE TO VICTIMS				TECH EQUIPMENT	
		AND THE CARIBBEAN	OF INJUSTICE	0.		38,492.	FOR	COST
			SUBAWARD UNDER JTIP					
			MALAYSIA					
		EAST ASIA AND THE	VICTIM-CENTERED					
		PACIFIC	RESPONSE TO	48,139.	WIRE TRANSFER	0.		
			SUBAWARD UNDER JTIP					
			MALAYSIA GRANT					
		EAST ASIA AND THE	VICTIM-CENTERED					
		PACIFIC	RESPONSE TO	16,182.	WIRE TRANSFER	0.		
			PARTNERSHIP TO					
			PROVIDE VICTIMS OF					
		EAST ASIA AND THE	FORCED LABOR ACESS TO					
		PACIFIC	LEGAL AID AND SAFETY	20,263.	WIRE TRANSFER	0.		
			ASSISTANCE FOR WOMEN					
			AND CHILDREN				DOWN PAYMENT FOR	
		EAST ASIA AND THE	PROTECTION CENTER				WCPC-VFU BUILD	
		PACIFIC	(WCPC) VFU BUILD OUT	0.		9,727.	ОИТ	COST
			MATERIALS/SUPPLIES				BUILDING	
			FOR WOMEN AND				SUPPLIES/REPAIRS/C	
		EAST ASIA AND THE	CHILDREN PROTECTION				OMPUTERS/AC UNITS	
		PACIFIC	CENTERS (WCPC)	0.		5,802.	FOR WCPC VCH/VFU	COST
2 Enter total number of	recipient organization	ns listed above that are i	recognized as charities by the f	foreign country,	recognized as a tax			
exempt 501(c)(3) orga	anization by the IRS, o	or for which the grantee	or counsel has provided a sect	tion 501(c)(3) equ	uivalency letter	►		16
3 Enter total number of	other organizations of	or entities				►		4

SEE PART V FOR COLUMN (D) AND COLUMN (H) DESCRIPTIONS

Schedule F (Form 990)	INTERNA	TIONAL JUSTICE MIS	SION		54-1722	2887		Page <b>2</b>
	of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)		
<b>1</b> (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUBGRANT UNDER JTIP					
			AWARD - "IMPROVING					
		EAST ASIA AND THE	THE CAPACITY OF THE					
		PACIFIC	GOVERNMENTS OF THE	97,245.	WIRE TRANSFER	0.		
			ASSIST WITH					
		EUROPE (INCLUDING	PREVENTING,					
		ICELAND &	PROTECTING, ASSISTING					
		GREENLAND)	HUMAN TRAFFICKING	5,636.	WIRE TRANSFER	0.		
		<i>,</i>						
		EUROPE (INCLUDING						
		ICELAND &	EMERGENCY REFUGEE					
		GREENLAND)	SERVICES	11,010.	WIRE TRANSFER	0.		
			IDENTIFY & RESCUE					
			VICTIMS OF BONDED					
			LABOR/HUMAN					
		SOUTH ASIA	TRAFFICKING AND	11,568.	WIRE TRANSFER	0.		
			IDENTIFY & RESCUE					
			VICTIMS OF BONDED					
			LABOR/PROVIDE					
		SOUTH ASIA	TRAINING TO LAW	16,192.	WIRE TRANSFER	0.		
			SUBAWARD UNDER GLOBAL					
			FUND TO END MODERN					
			DAY SLAVERY (GFEMS) -					
		SOUTH ASIA	STRENGTHEN SYSTEMS TO	41,990.	WIRE TRANSFER	0.		
			SECURE SAFE MIGRATION					
			& GRASSROOTS					
			PREVENTION OF BONDED					
		SOUTH ASIA	LABOR	6,341.	WIRE TRANSFER	0.		
			BIHAR MIGRATION	10 506				
		SOUTH ASIA	RESEARCH STUDY	10,536.	WIRE TRANSFER	0.		
			SUPPORT PROGRAMS TO					
			END ONLINE CHILD					
			EXPLOITATION AND	c				
		SOUTH ASIA	ABUSE IN SOUTH ASIA	6,778.	WIRE TRANSFER	0.		

Schedule F (Form 990)	INTERNA	TIONAL JUSTICE MIS	SION		54-1722	2887		Page <b>2</b>
Part II Continuation of	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
<b>1</b> (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUBAWARDEE ON INL GRANT, "STRENGTHENING					
		SUB-SAHARAN	THE CRIMINAL JUSTICE					
		AFRICA	SYSTEM'S RESPONSE TO	24,396.	WIRE TRANSFER	0.		
			SUPPORT PROGRAMS IN UGANDA TO SERVE					
		SUB-SAHARAN	VULNERABLE WIDOWS &					
		AFRICA	ORPHANS UNDER THE	389 756.	WIRE TRANSFER	0.		
			CONSTRUCTION SUPPLIES				PURCHASE TWO 40	
			FOR JUSTUCE CENTERS				FT CONTAINERS FOR	
		SUB-SAHARAN	IN DAGORETTI &				DAGORETTI &	
		AFRICA	GITHURAI	0.		10,744.	GITHURAI JUSTICE	COST

INTERNATIONAL JUSTICE MISSION

54-1722887

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed. (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (h) Method of (a) Type of grant or assistance (b) Region valuation (book, FMV, recipients cash grant cash disbursement noncash noncash assistance assistance appraisal, other) AFTERCARE COSTS FOR VICTIMS CENTRAL AMERICA PARTICIPATION IN OF VIOLENCE AND THE CARIBBEAN 21 0. 8,244. AFTERCARE PROGRAMS COST CHARITABLE RESPONSE TO CENTRAL AMERICA EMERGENCY NEED OF STAFF AND THE CARTBBEAN 1 800 CASH PAYMENT TO RECIPTENT 0 CHARITABLE RESPONSE TO EAST ASIA AND THE EMERGENCY NEED OF STAFF PACIFIC 2 894. CASH PAYMENT TO RECIPIENT 0 AFTERCARE COSTS FOR VICTIMS EAST ASIA AND THE PARTICIPATION IN OF VIOLENCE PACIFIC 305 0. 39,423. AFTERCARE PROGRAMS COST CHARITABLE RESPONSE TO EMERGENCY NEED OF STAFF SOUTH ASIA 394. CASH PAYMENT TO RECIPIENT 1 0. AFTERCARE COSTS FOR VICTIMS PARTICIPATION IN OF VIOLENCE SOUTH ASTA 396 0. 151,918. AFTERCARE PROGRAMS COST AFTERCARE COSTS FOR VICTIMS SUB-SAHARAN PARTICIPATION IN AFRICA OF VIOLENCE 440 0. 68,726. AFTERCARE PROGRAMS COST EUROPE (INCLUDING ICELAND & PARTICIPATION IN AFTERCARE COSTS FOR VICTIMS OF VIOLENCE GREENLAND) 4 0. 10,885. AFTERCARE PROGRAMS COST AFTERCARE COSTS FOR VICTIMS PARTICIPATION IN OF VIOLENCE SOUTH AMERICA 0. 325. AFTERCARE PROGRAMS COST 1

Schedule F (Form 990) 2021

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

Schedule F (Form 990) 2021

Part V	(Form 990) 2021 INTERNATIONAL JUSTICE MISSION 54-1722887 Supplemental Information	
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.	
PART I, I	INE 2:	
FOR CASH	GRANTS THAT ARE GIVEN BY THE ORGANIZATION, IJM REQUIRES, AT A	
MINIMUM,	QUARTERLY BUDGET TO ACTUAL REPORTS FOR THE PROJECT THAT HAS BEEN	
FUNDED BY	THE GRANT. FOR SOME PROJECT GRANTS, THE REPORTING REQUIREMENT	
IS MONTHI	Y. FURTHER, IJM REQUIRES A COPY OF THE AUDITED FINANCIAL	
STATEMEN	S OF THE GRANTEE ORGANIZATION, WHEN AVAILABLE. IJM ALSO RESERVES	
THE RIGH	TO EXAMINE PERTINENT BOOKS, DOCUMENTS AND RECORDS RELATED TO	
THE FUNDS	PROVIDED.	
PART I, I	INE 3:	
THE ORGAN	IZATION USES GAAP TO REPORT EXPENDITURES IN A FOREIGN REGION.	
PART I, I	INE 3, COLUMN (E):	
PART I, I REGION: (	INE 3, COLUMN (E): ENTRAL AMERICA AND THE CARIBBEAN	
PART I, 1 REGION: ( (E) SPEC:	INE 3, COLUMN (E): ENTRAL AMERICA AND THE CARIBBEAN FIC TYPES OF SERVICES IN REGION: SEXUAL VIOLENCE:	
PART I, I REGION: ( (E) SPEC: INVESTIGA	INE 3, COLUMN (E): ENTRAL AMERICA AND THE CARIBBEAN FIC TYPES OF SERVICES IN REGION: SEXUAL VIOLENCE: TION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING,	
PART I, I REGION: ( (E) SPEC: INVESTIGA	INE 3, COLUMN (E): ENTRAL AMERICA AND THE CARIBBEAN FIC TYPES OF SERVICES IN REGION: SEXUAL VIOLENCE:	
PART I, 1 REGION: ( (E) SPEC: INVESTIG RESEARCH	INE 3, COLUMN (E): ENTRAL AMERICA AND THE CARIBBEAN FIC TYPES OF SERVICES IN REGION: SEXUAL VIOLENCE: TION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING,	
PART I, 1 REGION: ( (E) SPEC: INVESTIG RESEARCH REGION: 1	INE 3, COLUMN (E): ENTRAL AMERICA AND THE CARIBBEAN FIC TYPES OF SERVICES IN REGION: SEXUAL VIOLENCE: TION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING, EDUCATION.	
PART I, I REGION: ( (E) SPEC: INVESTIGA RESEARCH REGION: I (E) SPEC:	INE 3, COLUMN (E): ENTRAL AMERICA AND THE CARIBBEAN FIC TYPES OF SERVICES IN REGION: SEXUAL VIOLENCE: TION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING, EDUCATION.	
PART I, 1 REGION: ( (E) SPEC: INVESTIG/ RESEARCH REGION: 1 (E) SPEC: SEXUAL V:	INE 3, COLUMN (E): ENTRAL AMERICA AND THE CARIBBEAN FIC TYPES OF SERVICES IN REGION: SEXUAL VIOLENCE: TION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING, EDUCATION. AST ASIA AND THE PACIFIC FIC TYPES OF SERVICES IN REGION: LEGAL STATUS DOCUMENTATION;	
PART I, 1 REGION: ( (E) SPEC: INVESTIG/ RESEARCH REGION: 1 (E) SPEC: SEXUAL V:	INE 3, COLUMN (E): ENTRAL AMERICA AND THE CARIBBEAN FIC TYPES OF SERVICES IN REGION: SEXUAL VIOLENCE: TION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING, EDUCATION. AST ASIA AND THE PACIFIC FIC TYPES OF SERVICES IN REGION: LEGAL STATUS DOCUMENTATION; OLENCE/TRAFFICKING: INVESTIGATION, VICTIM SERVICES (LEGAL,	
PART I, I REGION: ( (E) SPEC: INVESTIGA RESEARCH (E) SPEC: SEXUAL V: PSYCHOSO(	INE 3, COLUMN (E): ENTRAL AMERICA AND THE CARIBBEAN FIC TYPES OF SERVICES IN REGION: SEXUAL VIOLENCE: TION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING, EDUCATION. AST ASIA AND THE PACIFIC FIC TYPES OF SERVICES IN REGION: LEGAL STATUS DOCUMENTATION; OLENCE/TRAFFICKING: INVESTIGATION, VICTIM SERVICES (LEGAL,	
PART I, 1 REGION: ( (E) SPEC: INVESTIG/ RESEARCH REGION: 1 (E) SPEC: SEXUAL V: PSYCHOSOC REGION: 1	<pre>INE 3, COLUMN (E): ENTRAL AMERICA AND THE CARIBBEAN FIC TYPES OF SERVICES IN REGION: SEXUAL VIOLENCE: TION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING, EDUCATION. AST ASIA AND THE PACIFIC FIC TYPES OF SERVICES IN REGION: LEGAL STATUS DOCUMENTATION; OLENCE/TRAFFICKING: INVESTIGATION, VICTIM SERVICES (LEGAL, IAL), CAPACITY BUILDING, RESEARCH, EDUCATION.</pre>	

Schedule F Part V	Supplemental Information	
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of	
	investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c)	
	(estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.	
	(estimated humber of recipients), as applicable. Also complete this part to provide any additional information. See instructions.	
REGION:	SOUTH AMERICA	
(E) SPEC	IFIC TYPES OF SERVICES IN REGION: SEXUAL VIOLENCE/TRAFFICKING:	
INVESTIG	ATION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING,	
RESEARCH	, EDUCATION.	
REGION:	SOUTH ASIA	
(=) ====		
(E) SPEC	IFIC TYPES OF SERVICES IN REGION: SEXUAL VIOLENCE/ TRAFFICKING/	
FORCED I		
FORCED L	ABOR: INVESTIGATION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL)	
сарастту	RITI.DING RESEARCH EDUCATION	
CAPACITY	BUILDING, RESEARCH, EDUCATION.	
САРАСІТҮ	BUILDING, RESEARCH, EDUCATION.	
CAPACITY	BUILDING, RESEARCH, EDUCATION.	
	BUILDING, RESEARCH, EDUCATION.	
REGION:		
REGION:	SUB-SAHARAN AFRICA	
REGION: (E) SPEC	SUB-SAHARAN AFRICA	
REGION: (E) SPEC	SUB-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE	
REGION: (E) SPEC BRUTALIT	SUB-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE	
REGION: (E) SPEC BRUTALIT	SUB-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL,	
REGION: (E) SPEC BRUTALIT	SUB-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL,	
REGION: (E) SPEC BRUTALIT PSYCHOSO	SUB-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, CIAL), CAPACITY BUILDING, RESEARCH, EDUCATION.	
REGION: (E) SPEC BRUTALIT PSYCHOSO	SUB-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL,	
REGION: (E) SPEC BRUTALIT PSYCHOSO PART II,	SUB-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, CIAL), CAPACITY BUILDING, RESEARCH, EDUCATION.	
REGION: (E) SPEC BRUTALIT PSYCHOSO PART II,	SUB-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, CIAL), CAPACITY BUILDING, RESEARCH, EDUCATION.	
REGION: (E) SPEC BRUTALIT PSYCHOSO PART II, REGION:	SUE-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, CIAL), CAPACITY BUILDING, RESEARCH, EDUCATION. COLUMN (D): COLUMN (D):	
REGION: (E) SPEC BRUTALIT PSYCHOSO PART II, REGION:	SUB-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, CIAL), CAPACITY BUILDING, RESEARCH, EDUCATION.	
REGION: (E) SPEC BRUTALIT PSYCHOSO PART II, REGION: (H) DESC	SUB-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, CIAL), CAPACITY BUILDING, RESEARCH, EDUCATION. COLUMN (D): COLUMN (D): CENTRAL AMERICA AND THE CARIBBEAN RIPTION OF NON-CASH ASSISTANCE: FURNITURE/BUILDING	
REGION: (E) SPEC BRUTALIT PSYCHOSO PART II, REGION: (H) DESC	SUE-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, CIAL), CAPACITY BUILDING, RESEARCH, EDUCATION. COLUMN (D): COLUMN (D):	
REGION: (E) SPEC BRUTALIT PSYCHOSO PART II, REGION: (H) DESC SUPPLIES	SUB-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, CIAL), CAPACITY BUILDING, RESEARCH, EDUCATION. COLUMN (D): COLUMN (D): CENTRAL AMERICA AND THE CARIBBEAN RIPTION OF NON-CASH ASSISTANCE: FURNITURE/BUILDING /EQUIPMENT FOR NEW CAMPUS OF THE VICTIM INSTITUTE - VARIOUS	
REGION: (E) SPEC BRUTALIT PSYCHOSO PART II, REGION: (H) DESC SUPPLIES	SUB-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, CIAL), CAPACITY BUILDING, RESEARCH, EDUCATION. COLUMN (D): COLUMN (D): CENTRAL AMERICA AND THE CARIBBEAN RIPTION OF NON-CASH ASSISTANCE: FURNITURE/BUILDING	
REGION: (E) SPEC BRUTALIT PSYCHOSO PART II, REGION: (H) DESC SUPPLIES	SUB-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, CIAL), CAPACITY BUILDING, RESEARCH, EDUCATION. COLUMN (D): COLUMN (D): CENTRAL AMERICA AND THE CARIBBEAN RIPTION OF NON-CASH ASSISTANCE: FURNITURE/BUILDING /EQUIPMENT FOR NEW CAMPUS OF THE VICTIM INSTITUTE - VARIOUS	
REGION: (E) SPEC BRUTALIT PSYCHOSO PART II, REGION: (H) DESC SUPPLIES	SUB-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, CIAL), CAPACITY BUILDING, RESEARCH, EDUCATION. COLUMN (D): COLUMN (D): CENTRAL AMERICA AND THE CARIBBEAN RIPTION OF NON-CASH ASSISTANCE: FURNITURE/BUILDING /EQUIPMENT FOR NEW CAMPUS OF THE VICTIM INSTITUTE - VARIOUS	
REGION: (E) SPEC BRUTALIT PSYCHOSO PART II, REGION: (H) DESC SUPPLIES LOCATION	SUB-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, CIAL), CAPACITY BUILDING, RESEARCH, EDUCATION. COLUMN (D): COLUMN (D): CENTRAL AMERICA AND THE CARIBBEAN RIPTION OF NON-CASH ASSISTANCE: FURNITURE/BUILDING /EQUIPMENT FOR NEW CAMPUS OF THE VICTIM INSTITUTE - VARIOUS	
REGION: (E) SPEC BRUTALIT PSYCHOSO PART II, REGION: (H) DESC SUPPLIES LOCATION	SUE-SAHARAN AFRICA IFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE Y/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, CIAL), CAPACITY BUILDING, RESEARCH, EDUCATION. COLUMN (D): COLUMN (D): CENTRAL AMERICA AND THE CARIBBEAN RIPTION OF NON-CASH ASSISTANCE: FURNITURE/BUILDING /EQUIPMENT FOR NEW CAMPUS OF THE VICTIM INSTITUTE - VARIOUS S IN GUA	

PROJECT TO SUPPORT WOMEN AND CHILDREN WHO ARE VICTIMS OF VIOLENCE

REGION: CENTRAL AMERICA AND THE CARIBBEAN

Part V       Supplemental Information         Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); a (estimated number of recipients), as applicable. Also complete this part to provide any additional information         (H)       DESCRIPTION OF NON-CASH ASSISTANCE: AUDIO/VIDEO/COMPUTERS/SOFTWARE/OT         HER       TECH EQUIPMENT FOR INVESTIGATIONS/LAW ENFORCEMENT SUPPORT         REGION:       EAST ASIA AND THE PACIFIC         (D)       PURPOSE OF GRANT: SUBAWARD UNDER JTIP MALAYSIA VICTIM-CENTERED	and Part III, column (c)	
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); a (estimated number of recipients), as applicable. Also complete this part to provide any additional information (H) DESCRIPTION OF NON-CASH ASSISTANCE: AUDIO/VIDEO/COMPUTERS/SOFTWARE/OT HER TECH EQUIPMENT FOR INVESTIGATIONS/LAW ENFORCEMENT SUPPORT REGION: EAST ASIA AND THE PACIFIC	and Part III, column (c)	
(estimated number of recipients), as applicable. Also complete this part to provide any additional information (H) DESCRIPTION OF NON-CASH ASSISTANCE: AUDIO/VIDEO/COMPUTERS/SOFTWARE/OT HER TECH EQUIPMENT FOR INVESTIGATIONS/LAW ENFORCEMENT SUPPORT REGION: EAST ASIA AND THE PACIFIC		
(H) DESCRIPTION OF NON-CASH ASSISTANCE: AUDIO/VIDEO/COMPUTERS/SOFTWARE/OT HER TECH EQUIPMENT FOR INVESTIGATIONS/LAW ENFORCEMENT SUPPORT REGION: EAST ASIA AND THE PACIFIC		
HER TECH EQUIPMENT FOR INVESTIGATIONS/LAW ENFORCEMENT SUPPORT		
REGION: EAST ASIA AND THE PACIFIC		
(D) PURPOSE OF GRANT: SUBAWARD UNDER JTIP MALAYSIA VICTIM-CENTERED		
RESPONSE TO TRAFFICKING		
REGION: EAST ASIA AND THE PACIFIC		
(D) PURPOSE OF GRANT: SUBAWARD UNDER JTIP MALAYSIA GRANT		
VICTIM-CENTERED RESPONSE TO TRAFFICKING"		
REGION: EAST ASIA AND THE PACIFIC		
(H) DESCRIPTION OF NON-CASH ASSISTANCE: BUILDING		
SUPPLIES/REPAIRS/COMPUTERS/AC UNITS FOR WCPC VCH/VFU PROJECT		
REGION: EAST ASIA AND THE PACIFIC		
(D) PURPOSE OF GRANT: SUBGRANT UNDER JTIP AWARD - "IMPROVING THE		
CAPACITY OF THE GOVERNMENTS OF THE PHILIPPINES AND MALAYSIA TO ACT ON		
CYBERTIPLINE REPORTS"		
REGION: EUROPE (INCLUDING ICELAND & GREENLAND)		
(D) PURPOSE OF GRANT: ASSIST WITH PREVENTING, PROTECTING, ASSISTING		
HUMAN TRAFFICKING VICTIMS IN ROMANIA		

# REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: IDENTIFY & RESCUE VICTIMS OF BONDED LABOR/HUMAN

# TRAFFICKING AND PROVIDE TRAINING TO LAW ENFORCEMENT/JUDICIARY SYSTEM

	F (Form 990) 2021 INTERNATIONAL JUSTICE MISSION 54-1722887 Supplemental Information	Page 5
Part V	]	
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); amounts of investments up avaged turce per region). But II, line 1 (accounting method); Part III (accounting method); and Part III (accounting method); Part III (accounting method); and Part III (accounting method); Part III (accounting method); and Part III (accounting method); Part III (accounting method); and Part III (accounting method); Part III (accounting method); and Part III (accounting method); Part III (accounting method); and Part III (accounting method); Part III (ac	
	investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.	
REGION:	SOUTH ASIA	
(D) PURI	OSE OF GRANT: IDENTIFY & RESCUE VICTIMS OF BONDED LABOR/PROVIDE	
FRAINING	TO LAW ENFORCEMENT/JUDICIARY SYSTEM	
REGION:	SOUTH ASIA	
(D) PURE	POSE OF GRANT: SUBAWARD UNDER GLOBAL FUND TO END MODERN DAY	
SLAVERY	(GFEMS) - STRENGTHEN SYSTEMS TO PROTECT VICTIMS OF CSEC IN INDIA	
REGION:	SUB-SAHARAN AFRICA	
	SUB-SAHARAN AFRICA POSE OF GRANT: SUBAWARDEE ON INL GRANT, "STRENGTHENING THE	
(D) PURI	_	
(D) PURI	POSE OF GRANT: SUBAWARDEE ON INL GRANT, "STRENGTHENING THE	
(D) PURE	POSE OF GRANT: SUBAWARDEE ON INL GRANT, "STRENGTHENING THE	
(D) PURH CRIMINAI REGION:	POSE OF GRANT: SUBAWARDEE ON INL GRANT, "STRENGTHENING THE	

REGION: SUB-SAHARAN AFRICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: PURCHASE TWO 40 FT CONTAINERS

FOR DAGORETTI & GITHURAI JUSTICE CENTERS

FORM 990, SCHEDULE F, SUPPLEMENTAL INFORMATION:

INTERNATIONAL JUSTICE MISSION EXISTS TO PROTECT PEOPLE FROM VIOLENT

FORCES OF INJUSTICE AND TO ENSURE THAT PUBLIC JUSTICE SYSTEMS

EFFECTIVELY AND SUSTAINABLY PROTECT PEOPLE IN POVERTY. IN PURSUIT OF

THIS MISSION, IJM CONDUCTS CASEWORK ON BEHALF OF IMPOVERISHED VICTIMS

Schedule F (Form 990) 2021 INTERNATIONAL JUSTICE MISSION	54-1722887	Page 5
Part V Supplemental Information		
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (acco	-	
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting me		
(estimated number of recipients), as applicable. Also complete this part to provide any additional in	formation. See instructions.	
OF VIOLENT ABUSE IN AFRICA, LATIN AMERICA, SOUTH ASIA, SOUTHEAST ASIA		
AND EUROPE. THIS CASEWORK BOTH ENSURES RELIEF FOR INDIVIDUAL VICTIMS OF		
ABUSE AND INFORMS IJM'S STRATEGIES FOR PURSUING TRANSFORMATIONAL CHANGE		
OF PUBLIC JUSTICE SYSTEMS.		
EACH IJM FIELD OFFICE ADDRESSES SPECIFIC FORMS OF OPPRESSION THAT		
IMPACT THE POOR IN THE GEOGRAPHIC REGION. IJM'S INVESTIGATIVE AND LEGAL		
TEAMS PARTNER WITH LOCAL AUTHORITIES TO ENSURE PERPETRATORS ARE		
ARRESTED, CHARGED AND CONVICTED FOR THESE VIOLENT ACTS; IJM SOCIAL		
WORKERS PROVIDE LONG-TERM SUPPORT TO VICTIMS OF THE CRIME.		
IJM USES ITS UNIQUE KNOWLEDGE OF SYSTEMIC GAPS, WEAKNESSES AND		
DEFICIENCIES GAINED THROUGH INDIVIDUAL CASEWORK TO PURSUE JUSTICE		
SYSTEM TRANSFORMATION THAT ENSURES PEOPLE IN POVERTY ARE EFFECTIVELY		
AND SUSTAINABLY SERVED BY THE PUBLIC JUSTICE SYSTEMS UPON WHICH THEY		
MUST RELY FOR PROTECTION.		
EXPENSE ALLOCATION:		
WHEN POSSIBLE, IJM RECORDS EXPENSES DIRECTLY TO THE FIELD OFFICES TO		
WHICH THEY RELATE; FOR PROGRAM EXPENSES NOT DIRECTLY ALLOCATED TO A		
SPECIFIC REGION, IJM ALLOCATES EXPENSES BASED ON THE PERCENTAGE OF		
OFFICES LOCATED IN THAT REGION OVER THE TOTAL NUMBER OF OFFICES. IJM		
ALLOCATES FUNDRAISING EXPENSES TO EACH REGION BASED ON THE BUDGET FOR		

THAT REGION AS A PERCENTAGE OF THE TOTAL IJM BUDGET.

Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

WHILE THE ORGANIZATION DOES NOT CONDUCT ANY OF ITS PROGRAMS WITHIN THE

BOYCOTTING COUNTRIES THAT REQUIRE THE FILING OF FORM 5713, SOME MEMBERS

OF THE ORGANIZATION HAVE FLOWN AIRLINES RELATED TO AT LEAST ONE OF

THESE COUNTRIES TO CARRY OUT THEIR DUTIES. DUE TO THE BROAD NATURE OF

THE INSTRUCTIONS AND DEFINITIONS RELATED TO THE FORM, THE ORGANIZATION

HAS DETERMINED THAT IT IS REQUIRED TO FILE THE FORM IN ORDER TO REPORT

THE PROCUREMENT OF AIRFARE FROM COMPANIES LOCATED IN THESE COUNTRIES.

# SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
 Attach to Form 990.

2021 Open to Public Inspection

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

N			

Employer	ide	entification	number
	- 4	170007	

	INTERNATIONAL JUST	FICE MISSI	LON		54-1	72288	7	
Pa	t I Types of Property							
		<b>(a)</b> Check if applicable	(b) Number of contributions or items contributed	<b>(c)</b> Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermin	0	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	36	234,846.	HISTORICAL PRICE	DATA		
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution $\cdot$ Other $_{\dots}$							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ( ADF SOLUTIONS )	X	1	30,735.	SELLING PRICE OF	COM		
26	Other ( <u>NFL NETWORK C</u> )	X	1	'	SELLING PRICE OF			
27	Other ( ADF SOLUTIONS )	X	1	11,095.	SELLING PRICE OF	COM		
28	Other ► ( )							
29	Number of Forms 8283 received by the organi	-						
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement			1	
							Yes	No
30a	During the year, did the organization receive b	y contributic	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least three years from the dat	e of the initia	l contribution, and	which isn't required to be us	sed for			
	exempt purposes for the entire holding period	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review of	of any nonstandard contribut	ions?	31	X	
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash				
	contributions?					32a	X	
b	If "Yes," describe in Part II.							

**33** If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

LHA	For Paperwork	Reduction A	ct Notice, se	e the Inst	ructions fo	r Form 990.
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Schedule M (Form 990) 2021

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

REPORTING THE NUMBER OF CONTRIBUTIONS

SCHEDULE M, LINE 32B:

CONTRACTED WITH A THIRD PARTY THAT HANDLES NON-CASH DONATIONS.

Page 2

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

Supplemental	Informa	ation to	Form 99	90 or 9	90-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. 2021 Open to Public Inspection

OMB No 1545-0047

INTERNATIONAL JUSTICE MISSION

Employer identification number 54-1722887

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

CONSEQUENCES FOR THEIR CRIMES, DESPITE LAWS AGAINST THE CRIME.

IJM ATTORNEYS, INVESTIGATORS, SOCIAL WORKERS, COMMUNITY ACTIVISTS AND

OTHER PROFESSIONALS WORK IN 29 COMMUNITIES THROUGHOUT AFRICA, LATIN

AMERICA, EUROPE, SOUTH ASIA AND SOUTHEAST ASIA TO COLLABORATE WITH

JUSTICE SYSTEM AND COMMUNITY LEADERS TO RESPOND EFFECTIVELY TO

VIOLENCE.

IJM'S TEAMS PROTECT PEOPLE IN POVERTY FROM VIOLENCE, INCLUDING CRIMES

LIKE SLAVERY, VIOLENCE AGAINST WOMEN AND CHILDREN, AND POLICE ABUSE OF

POWER. BY COLLABORATING WITH COMMUNITIES AND GOVERNMENTS, IJM SERVES

INDIVIDUAL VICTIMS OF VIOLENCE AND PURSUES DRAMATIC IMPROVEMENTS IN THE

JUSTICE SYSTEM TO PROTECT ALL PEOPLE VULNERABLE TO THE CRIME.

FOR OVER 25 YEARS, IJM AND OUR PARTNERS HAVE WORKED ALONGSIDE LOCAL

AUTHORITIES TO BUILD COMMUNITIES WHERE ALL PEOPLE ARE SAFE AND

PROTECTED. TOGETHER, WE HAVE LEARNED HOW TO DESIGN IMPROVEMENTS WITHIN

JUSTICE SYSTEMS THAT MEASURABLY REDUCE VIOLENCE AND SERVE SURVIVORS

WITH DIGNITY. IJM DOES THIS IN THE FOLLOWING WAYS:

STRENGTHEN JUSTICE SYSTEMS

IJM COLLABORATES WITH JUSTICE SYSTEM AND COMMUNITY LEADERS TO RESPOND

EFFECTIVELY TO VIOLENCE. TOGETHER, WE DESIGN IMPROVEMENTS THAT SERVE

SURVIVORS, DETER CRIMINALS AND DRAMATICALLY DECREASE VIOLENCE.

Name of the organization INTERNATIONAL JUSTICE MISSION	Employer identification numb 54-1722887
ESCUE AND RESTORE VICTIMS	
JM PARTNERS WITH LOCAL AUTHORITIES TO RESCUE INDIVIDUAL VICTIMS OF	
VIOLENCE AND RESTORE SURVIVORS TO SAFETY AND STABILITY.	
TO BALL AND RESTORE SORVIVORS TO BALLIT AND STABILITT.	
BRING CRIMINALS TO JUSTICE	
JM WORKS ALONGSIDE JUSTICE SYSTEM OFFICIALS TO ENSURE THAT CRIMINALS	
ARE HELD ACCOUNTABLE, STOPPING THE CYCLE OF VIOLENCE AND DETERRING	
THERS FROM ABUSING VULNERABLE PEOPLE.	
CALE DEMAND FOR PROTECTION	
JM CONVENED AND EQUIPPED CHAMPIONS TO ADVOCATE FOR PROTECTION AS AN	
SSENTIAL AND TANGIBLE FUTURE FOR EVERYONE.	
ROM JANUARY TO MARCH 2022, IJM, OUR PARTNERS AND TRAINED GOVERNMENTS	
BROUGHT RELIEF TO 3,821 VICTIMS OF VIOLENCE AND OPPRESSION. EACH	
VICTORY REPRESENTS THE TENACIOUS WORK OF IJM'S TEAM OF ATTORNEYS,	
OCIAL WORKERS, AND INVESTIGATORS - WORK THAT CONTINUES LONG-TERM AS	
SURVIVORS HEAL AND REBUILD THEIR LIVES WITH THE ASSISTANCE OF IJM	
FTERCARE AND AS IJM ATTORNEYS PURSUE JUSTICE IN COURT, PROCESSES THAT	
CAN TAKE YEARS.	
ROM JANUARY TO MARCH 2022, A TOTAL OF 1,000 SUSPECTED PERPETRATORS	
HERE RESTRAINED AND 322 CRIMINALS IN LOCAL COURTS WERE CONVICTED.	
DDITIONALLY, 172 SURVIVORS WERE RESTORED TO SAFETY AND STABILITY.	
INALLY, IJM TRAINED OVER 14,200 PEOPLE TO RECOGNIZE AND RESPOND TO	
VIOLENCE, INCLUDING OVER 6,000 JUSTICE SYSTEM OFFICIALS (SUCH AS	
POLICE, PROSECUTORS, JUDGES AND SOCIAL WORKERS) AND OVER 8,200 CHURCH	

Schedule O (Form 990) 2021 Name of the organization	Page 2 Employer identification number
INTERNATIONAL JUSTICE MISSION	54-1722887
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:	
ARE TAKING HOLD OF THE VISION AND EMPOWERING COMMUNITIES TO SEEK	
JUSTICE IN NEW AND EXCITING WAYS.	
IJM'S WORK HAS BEEN FEATURED BY MEDIA OUTLETS SUCH AS FORBES MAGAZINE,	
THE WASHINGTON POST, THE TIMES OF INDIA, THE GUARDIAN, THE NEW YORK	
TIMES, THE NEW YORKER, FOREIGN AFFAIRS, "THE TODAY SHOW," "THE OPRAH	
WINFREY SHOW, " DATELINE NBC, MSNBC, CNN, BBC WORLD NEWS, NATIONAL	
PUBLIC RADIO, NATIONAL GEOGRAPHIC, ESPN, REUTERS, AMONG MANY OTHERS.	
FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:	
INDIA, THAILAND, KENYA, PHILIPPINES,	
BOLIVIA, CAMBODIA, GUATEMALA, UGANDA,	
GHANA, DOMINICAN REPUBLIC, EL SALVADOR, SOUTH KOREA,	
ROMANIA, BURMA, MALAYSIA, COLOMBIA,	
PERU	
FORM 990, PART VI, SECTION B, LINE 11B:	
FIRST, INFORMATION IS GATHERED BY THE ORGANIZATION AND ASSIMILATED BY THE	
KEY CPAS FROM THE ACCOUNTING TEAM. THEN, THE VP AND CONTROLLER REVIEWS ALL	
THE INFORMATION WHICH IS THEN SUBMITTED TO THE TAX PREPARERS (AT RSM US	
LLP). THE CFO REVIEWS THE DRAFT OF THE FORM 990 THAT HAS BEEN PREPARED BY	
RSM US LLP AND SUGGEST CORRECTIONS/MODIFICATIONS AS MAY BE NEEDED. AFTER	
THE FINAL DRAFT OF THE FORM 990 IS PREPARED, THIS IS SHARED WITH THE IJM	
BOARD FAAC FOR REVIEW. FOLLOWING APPROVAL, RSM US LLP PREPARES AND REMITS	

THE FINAL 990 TO THE IRS.

Schedule O (Form 990) 2021 Name of the organization	Page 2 Employer identification number
INTERNATIONAL JUSTICE MISSION	54-1722887
FORM 990, PART VI, SECTION B, LINE 12C:	
THE BOARD CONFLICT OF INTEREST POLICY IS DETAILED AS AN APPENDIX TO THE IJM	
BOARD POLICY MANUAL. EACH OFFICER, DIRECTOR AND KEY EMPLOYEE AFFIRMS DURING	
ONBOARDING AND ANNUALLY THEREAFTER INTENT TO COMPLY WITH THE POLICY, AND	
AFFIRMATIVELY DISCLOSES ANY POTENTIAL CONFLICTS. STAFF ARE LIKEWISE	
REQUIRED TO AFFIRM INTENT TO APPLY WITH THE VERSION OF THE POLICY GOVERNING	
ALL EMPLOYEES, CONTAINED IN IJM'S POLICY LIBRARY. THE POLICIES FURTHER	
PROVIDE GUIDANCE ON HOW TO COMMUNICATE CONFLICTS THAT ARISE, AND A PROCESS	
FOR DISCLOSURE AND REVIEW OF RELATED PARTY TRANSACTIONS IS BUILT INTO IJM'S	
CONTRACTS PROCESS.	
FORM 990, PART VI, SECTION B, LINE 15:	
EXECUTIVE COMPENSATION:	
THE BOARD OF DIRECTORS (THE "BOARD") HAS THE RESPONSIBILITY FOR OVERSEEING	
IJM'S EXECUTIVE COMPENSATION PROGRAM. THE BOARD RECOGNIZES THAT IN ORDER	
FOR IJM TO ACHIEVE ITS AMBITIOUS STRATEGIC GOALS, IJM MUST BE ABLE TO	
ATTRACT, RETAIN AND REWARD QUALIFIED EXECUTIVES WHO WILL BE ABLE TO OPERATE	
EFFECTIVELY IN A CHALLENGING, COMPLEX ENVIRONMENT.	
CHIEF EXECUTIVE OFFICER:	
THE BOARD INDEPENDENTLY DETERMINES THE SALARY AND BENEFITS FOR THE CHIEF	
EXECUTIVE OFFICER. THE CPO PROVIDES THE BOARD WITH COMPETITIVE MARKET	
SALARY DATA OBTAINED FROM EXTERNAL COMPENSATION SURVEYS. BASED ON THE	
INFORMATION PRESENTED, THE BOARD DISCUSSES THE CHIEF EXECUTIVE OFFICER'S	
PERFORMANCE, THE OVERALL PERFORMANCE OF IJM, AND THE COMPETITIVE MARKET.	
THE RAND INDEDENDENTLY MAKES CONDENSATION DECISIONS IN AN EXECUTIVE	

THE BOARD INDEPENDENTLY MAKES COMPENSATION DECISIONS IN AN EXECUTIVE

SESSION, WITHOUT THE CHIEF EXECUTIVE OFFICER PRESENT. SENIOR EXECUTIVES (VICE PRESIDENT LEVEL AND ABOVE): THE BOARD HAS DELEGATED TO THE CHIEF EXECUTIVE OFFICER THE AUTHORITY T DETERMINE THE SALARY AND BENEFITS FOR ALL SUBORDINATE EXECUTIVES AND EMPLOYEES. THE CPO PROVIDES COMPETITIVE MARKET SALARY DATA OBTAINED FR	
THE BOARD HAS DELEGATED TO THE CHIEF EXECUTIVE OFFICER THE AUTHORITY T DETERMINE THE SALARY AND BENEFITS FOR ALL SUBORDINATE EXECUTIVES AND	
THE BOARD HAS DELEGATED TO THE CHIEF EXECUTIVE OFFICER THE AUTHORITY T DETERMINE THE SALARY AND BENEFITS FOR ALL SUBORDINATE EXECUTIVES AND	
DETERMINE THE SALARY AND BENEFITS FOR ALL SUBORDINATE EXECUTIVES AND	
	ТО
MPLOYEES. THE CPO PROVIDES COMPETITIVE MARKET SALARY DATA OBTAINED FR	
	ROM
EXTERNAL COMPENSATION SURVEYS, AND MAKES RECOMMENDATIONS.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:	:
FL,GA,HI,MN,MS,ND,NH,NC,OR,PA,SC,TN,VA,WV,WI,CA,MI,NM	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AVAILABLE TO THE PUBLI	IC ON
TTS WEBSITE. ADDITIONALLY, THE ORGANIZATION'S GOVERNING DOCUMENTS AND	
CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST,	FOR
THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN SECTION 6104(D).	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
OTHER PROFESSIONAL FEES:	
PROGRAM SERVICE EXPENSES 7,267	7,577.
MANAGEMENT AND GENERAL EXPENSES 1,925	5,465.
FUNDRAISING EXPENSES 1,808	8,850.
TOTAL EXPENSES 11,001	1,892.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 11,001	1,892.
FORM 990, PART XII, LINE 2C:	

# THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND

Schedule O (Form 990) 2021

lame of the organization INTERNATIONAL JUSTICE MISSION	Employer identification number 54-1722887
ELECTION OF AN INDEPENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL	
TATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEARS.	

SCHEDULE R	ł
(Earm 000)	

(Form 990)

# **Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL JUSTICE MISSION

Employer identification number 54-1722887

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
IJM KOREA FOUNDATION					
PO #04392 6FL 38					INTERNATIONAL JUSTICE
SEOUL, SEOUL, SOUTH KOREA 8001	PROTECT PEOPLE IN POVERTY	SOUTH KOREA	166,996.	518,251.	MISSION
FUNDATIA INTERNATIONAL JUSTICE MISSION					
P.O. BOX 37	_				INTERNATIONAL JUSTICE
BUCHAREST, ROMANIA 011601	PROTECT PEOPLE IN POVERTY	ROMANIA	535,460.	273,316.	MISSION
JAMBATAN CS SDN BHD					
BO1-A-09-1, MENARA 2, 3 JALAN BANGSAR KL EC					INTERNATIONAL JUSTICE
KUALA LUMPUR, KUALA LUMPUR, MALAYSIA 59200	PROTECT PEOPLE IN POVERTY	MALAYSIA	389,961.	353,105.	MISSION
IJM FOUNDATION					
POST OFFICE BOX 11, SENANIKOM POST OFFICE					INTERNATIONAL JUSTICE
BANGKOK, BANGKOK, THAILAND 10900	PROTECT PEOPLE IN POVERTY	THAILAND	307,724.	130,540.	MISSION

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	<b>(f)</b> Direct controlling entity		<b>g)</b> 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
INTERNATIONAL JUSTICE MISSION AUSTRALIA							
PO BOX 124					INTERNATIONAL		
ST. LEONARDS, NSW, AUSTRALIA 2067	PROTECT PEOPLE IN POVERTY	AUSTRALIA	501(C)(3)	LINE 7	JUSTICE MISSION	X	
INTERNATIONAL JUSTICE MISSION UK							
PO BOX 78942					INTERNATIONAL		
LONDON, UNITED KINGDOM SE11 9EB	PROTECT PEOPLE IN POVERTY	UNITED KINGDOM	501(C)(3)	LINE 7	JUSTICE MISSION	x	
INTERNATIONAL JUSTICE MISSION CANADA							
PO BOX 88031, RPO LEVI CREEK					INTERNATIONAL		
MISSISSAUGA, ONTARIO, CANADA L5N 8M1	PROTECT PEOPLE IN POVERTY	CANADA	501(C)(3)	LINE 7	JUSTICE MISSION	x	

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

Schedule R (Form 990) 2021

# Part I Continuation of Identification of Disregarded Entities

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
INTERNATIONAL JUSTICE MISSION LIMITED					
P.O. BOX 502	-				INTERNATIONAL JUSTICE
KAMPALA, UGANDA	PROTECT PEOPLE IN POVERTY	UGANDA	1,291,092.	825,816.	MISSION
INTERNATIONAL JUSTICE MISSION INDIA					
P.O BOX NO. 3523, LAJPAT NAGAR - 3					INTERNATIONAL JUSTICE
NEW DELHI, NEW DELHI, INDIA 110024	PROTECT PEOPLE IN POVERTY	INDIA	393.	5,675.	MISSION
INTERNATIONAL JUSTICE MISSION KENYA					
PO BOX 25743					INTERNATIONAL JUSTICE
NAIROBI, NAIROBI, KENYA 00603	PROTECT PEOPLE IN POVERTY	KENYA	954,851.	586,900.	MISSION
MISION INTERNACIONAL DE JUSTICIA COLOMBIA					
CALLE 72 A NRO 5-83					INTERNATIONAL JUSTICE
BOGOTA, BOGOTA, COLOMBIA	PROTECT PEOPLE IN POVERTY	COLOMBIA	273,690.	146,261.	MISSION
JST CONSULTANCY SERVICES PRIVATE LIMITED					
#911, NINTH FLOOR, BRIGADE TOWER #135, BRIGA					INTERNATIONAL JUSTICE
BANGALORE, INDIA	PROTECT PEOPLE IN POVERTY	INDIA	0.	-500.	MISSION
PFT SERVICES PRIVATE LIMITED					
VENUS HEBRON - NO.1, 4TH G MAIN ROAD HRBR LA					INTERNATIONAL JUSTICE
BANGALORE, INDIA 560043	PROTECT PEOPLE IN POVERTY	INDIA	16.	-11.	MISSION
INTERNATIONAL JUSTICE MISSION - SWITZERLAND					
BRANDSCHENKESTRASSE 24					INTERNATIONAL JUSTICE
ZURICH, ZURICH, SWITZERLAND 8001	PROTECT PEOPLE IN POVERTY	SWITZERLAND	0.	54,150.	MISSION
INTERNATIONAL JUSTICE MISSION HONG KONG					
P.O. BOX 33086					INTERNATIONAL JUSTICE
HONG KONG, HONG KONG	PROTECT PEOPLE IN POVERTY	HONG KONG	29,780.	34,529.	MISSION
IJM PERU					
AV. LA ENCALADA 1257 OFICINA 902					INTERNATIONAL JUSTICE
SANTIAGO DE SURCO, LIMA, PERU 33	PROTECT PEOPLE IN POVERTY	PERU	0.	2,472.	MISSION
IJM MYANMAR					
P.O. BOX 1218					INTERNATIONAL JUSTICE
YANGON, BURMA	PROTECT PEOPLE IN POVERTY	BURMA	490,291.	98,863.	MISSION

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

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

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

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

### Schedule R (Form 990) 2021 INTERNATIONAL JUSTICE MISSION

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

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

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1) INTERNATIONAL JUSTICE MISSION AUSTRALIA	с	389,861.	WIRE
(2) INTERNATIONAL JUSTICE MISSION UK	с	1,042,878.	WIRE
(3) INTERNATIONAL JUSTICE MISSION CANADA	С	585,000.	WIRE
(4) INTERNATIONAL JUSTICE MISSION UK	Q	115,184.	WIRE
(5)			
(6)			

### Schedule R (Form 990) 2021 INTERNATIONAL JUSTICE MISSION

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) Name, address, and EIN	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile	(d) Predominant income	( Ar	e) e all	<b>(f)</b> Share of	<b>(g)</b> Share of	(ł Dispr	<b>1)</b> opor-	(i) Code V-UBI	(j Gene	i) ral or <b>l</b>	(k) Percentage
of entity	Finnary activity	(state or foreign country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partne 501 org	e) e all ers sec. (c)(3) gs.?	total	end-of-year assets	Dispr tior alloca	tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana	iging her?	ownership
		country)	sections 512-514)	Yes	No	liicome	255615	Yes	No	(Form 1065)	Yes	No	

Schedule R (Form 990) 2021

# Schedule R (Form 990) 2021 INTERN Part VII Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions.

(Rev. January 2022)

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

Department of the Treasury Internal Revenue Service

Eile e	concrete	application	for oach	roturn
File a	separate	application	tor each	return.

► Go to www.irs.gov/Form8868 for the latest information.

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

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

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

Type of print	Name of exempt organization or other filer, see instr	Taxpayer identification number (TIN)					
print	INTERNATIONAL JUSTICE MISSION				54-1722887		
File by th due date filing you	for Number, street, and room or suite no. If a P.O. box,	see instruct	ions.				
return. S instructio		foreign addı	ress, see instructions.				
Enter t	he Return Code for the return that this application is for (f	ile a separat	e application for each return)			. 0 1	
Applic	ation	Return	Application			Return	
ls For		Code	Is For			Code	
Form §	990 or Form 990-EZ	01	Form 1041-A			08	
Form 4	720 (individual)	03	Form 4720 (other than individual)			09	
Form §	990-PF	04	Form 5227			10	
Form §	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form §	990-T (trust other than above)	06	Form 8870			12	
Form §	990-T (corporation)	07					
<ul> <li>If the second second</li></ul>	ephone No. ▶       (703) 465-5495         ee organization does not have an office or place of busines         iis is for a Group Return, enter the organization's four digit         ▶       .         If it is for part of the group, check this box ▶         request an automatic 6-month extension of time until	t Group Exe and atta FEBRUAR ganization's , an	mption Number (GEN) I ch a list with the names and TINs of Y 15, 2023 , to file return for: d endingMAR 31, 2022	f this is fo all memb	r the whole group, ( ers the extension is npt organization retu 	for.	
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less3aany nonrefundable credits. See instructions.3aIf this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and5estimated tax payments made. Include any prior year overpayment allowed as a credit.3b						
	Balance due. Subtract line 3b from line 3a. Include your p			50	Ψ	0.	
	using EFTPS (Electronic Federal Tax Payment System). Se	•		3c	\$	0.	
	n: If you are going to make an electronic funds withdrawa				Ť	payment	

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)