IRS e-file Signature Authorization for an Exempt Organization For catendar year 2013, or liscal year beginning JUL 1 ,2013, and ending JUN 30 ,20 14

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ndino	JUN	3.0	2n 1 A] /

OMB No. 1545-1878

Do not send to the IRS. Keep for your records.

Name of exampt organization	1700
Name of exempt organization	Employer identification number
LEGAL AID JUSTICE CENTER	54-0884513
Name and title of officer	24-0004313
MARY BAUER	
EXECUTIVE DIRECTOR	
Part I Type of Return and Return Information (Whole Dollars Only)	
Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the 1st 2st 3st 4st or 5st below, and the amount on that is	
whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable than 1 line in Part I.	
1a Form 990 check here X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1ь 3.595.584.
b Total revenue, if any (Form 990-EZ, line 9)	2h
b Total tax (Form 1120-POL. Ing 22)	3h
b lax based on investment income (Form 990-PF, Part VI, Ine 5)	4b
5a Form 8868 check here b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5h
Part II Declaration and Signature Authorization of Officer Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of electronic return and accompanying schedules and control of the above organization and that I have examined a copy of electronic return and accompanying schedules and control of the above organization and that I have examined a copy of the above organization and that I have examined a copy of the above organization and that I have examined a copy of the above organization and that I have examined a copy of the above organization and that I have examined a copy of the above organization and that I have examined a copy of the above organization and that I have examined a copy of the above organization and that I have examined a copy of the above organization and that I have examined a copy of the above organization and that I have examined a copy of the above organization and that I have examined a copy of the above organization and that I have examined a copy of the above organization and that I have examined a copy of the above organization and that I have examined a copy of the above organization and that I have examined a copy of the above organization and the abov	
intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in process the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic to the financial institution account indicated in the tax preparation software for payment of the organizative return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. T. 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial insprocessing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and repayment. I have selected a personal Identification number (PIN) as my algnature for the organization's electronic return organization's consent to electronic funds withdrawal. Officer's PIN: check one box only	sing the return or refund, and (c) ectronic funds withdrawal (direct ion's federal taxes owed on this reasury Financial Agent at stitutions involved in the
X authorize FRANK BARCALOW CPA, P.L.L.C. to	enter my PIN 27651
ERO firm name	Enter five numbers, but
as my signature on the organization's tax year 2013 electronically filed return. If I have indicated within this is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorenter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2013 electronicated within this return that a convent the program is being filed by the control of the organization.	rize the aforementioned ERO to
indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charitle program, I will enter my PIN on the return's disclosure consent screen.	s as part of the IRS Fed/State
Officer's signature Date Date	
Part III Certification and Authentication	
RO's EFIN/PIN. Enter your six-digit electronic filing identification	
	7
do not enter all zeros	J
certify that the above numeric entry is my PIN, which is my signature on the 2013 electronically filed return for the organism that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Inferior Providers for Business Returns. R0's signature	formation for Authorized IRS
Date 01/12	1/13
ERO Must Retain This Form - See Instructions Do Not Submit This Form To the IRS Unless Requested To Do So	
HA For Paperwork Reduction Act Notice, see instructions.	Form 8879-EO (2013)

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.

Internal Revenue Service Information about Form 990 and its instructions is at www irs gov/form990

A For the 2013 calendar year, or tax year beginning JUL 1, 2013 and ending JUN 30, 2014

Open to Public Inspection

			- G	011 007 001	*
В	Chack i applica	C Name of organization		D Employer ident	fication number
	Addi				
	Nam Chan	ge Doing Business As		54-	0884513
	loitis	n Number and street (or P.U. box it mail is not delivered to street address) Ro	oom/suite	E Telephone numb	per
	Term	I TOO THED TOW WARROT		434	- <u>9</u> 77-0553
	Ame	n City of town, state of province, country, and ZIP of toreign postal code		G Gross receipts \$	3,595,584.
L	Appl tion pend			H(a) Is this a group	
	por re	F Name and address of principal officer:MAKY BAUER		for subordinate	
_		SAME AS C ABOVE		H(b) Are all subcrdinates	included? LYes LNo
		tempt status: 🛣 501(c)(3)	527	· ·	a list. (see instructions)
		ite: ► WWW.JUSTICE4ALL.ORG		H(c) Group exempt	
		forganization: X Corporation Trust Association Other	L Year o	of formation: 1967	M State of legal domicile: VA
	art I		3 T 1 T A	* 9037 300T	Ama 110-
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: PROVII CIVIL, JUVENILE, AND RELATED MATTERS TO FI	INANC	LEGAL ASSI	STANCE IN SENT CLIENTS
Ē	2	Check this box if the organization discontinued its operations or disposed			
200	3	Number of voting members of the governing body (Part VI, line 1a)			22
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	
88	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5	
3	6	Total number of volunteers (estimate if necessary)		6	291
Acti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		70	0.
_	b	Net unrelated business taxable income from Form 990-T, line 34		71	0.
				Prior Year	Current Year
4	8	Contributions and grants (Part VIII, line 1h)		3,623,457	
Revenue	9	Program service revenue (Part VIII, line 2g)		0	
8	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		583	
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,624,040	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.007.540	- W F
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5:10)	· · ·	2,887,549	
90	108	Professional fundraising fees (Part IX, column (A), line 11e)	;···	0	0.
Ä	17	Total fundraising expenses (Part IX, column (D), line 25) 300, 628	<u>}-</u>	1,095,197	1,146,354.
	18	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,982,746	4,116,178.
		Revenue less expenses. Subtract line 18 from line 12		-358,706	
280	1.2	Travellad lead appointed appointed in the Italian like ita Alexandria		inning of Current Year	
ot Assets or	20	Total assets (Part X, line 16)		2,923,758	
88	21	Total liabilities (Part X, line 26)		1,086,156	997,556.
碧	22	Net assets or fund balances. Subtract line 21 from line 20		1,837,602	
Pe	ert II	Signature Block			
Und	er pena	alties of perjury, I declare that I have examined this return, including accompanying schedules an	nd statemen	nts, and to the best of n	ny knowledge and belief, it is
true,	corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which	preparer h	as any knowledge.	
64-		Signature of efficer		Date	
Sign		MARY BAUER, EXECUTIVE DIRECTOR		Date	
Her	e .	Type or print name and title		_	
		Print/Type preparer's name Preparer's signature	Đa	AllAnt	PTIN
Paid		FRANK BARCALOW FRANK BARCALOW	01	/12/15 self-empte	P00446788
Prep		Firm's name FRANK BARCALOW CPA, P.L.L.C.		Firm's EIN 🛌	45-5310918
Use	Only	Firm's address 108 WESTCHESTER			
_		WILLIAMSBURG, VA 23188		Phone no. 75	7-220-6626
May	the II	RS discuss this return with the preparer shown above? (see instructions)	**********		X Yes No
22550	** 40 0				- 000 -

E	om 990 (2013) LEGAL ATI	JUSTICE CENTER	54-0884513	_ Page 2
	Part III Statement of Program Servi			1 0,90
_	Check if Schedule O contains a response	onse or note to any line in this Part III		
- 1	Briefly describe the organization's mission:		** *** ** *****************************	
	THE LEGAL AID JUSTICE	CENTER IS A NON-PRO	FIT CORPORATION ORGANIZED	HOD
	THE PURPOSE OF PROVIDE	NG LEGAT. ACCTOMANGE	IN CIVIL AND RELATED LEG.	FOR
	MATTERS TO DESCOVE BY	AS DEGAL ASSISTANCE	IN CIVIL AND RELATED LEG	AL
	WILLIAMS TO PERSONS FIR	WWCIATTA ONWRITE TO	AFFORD LEGAL ASSISTANCE I	N
_	VIRGINIA.			
2	Did the organization undertake any significa	nt program services during the year wi	rich were not listed on	
				s X No
	If "Yes," describe these new services on Sc	hadela A	Ye	s LOLINO
3				
	The state of the s	ake significant changes in how it cond	ucts, any program services?	s X No
	If "Yes," describe these changes on Schedu	de O.		
4	Describe the organization's program service	accomplishments for each of its three	largest program services, as measured by expense	Outs.
	Section 501(c)(3) and 501(c)(4) organizations	are required to report the amount of	grants and allocations to others, the total expenses,	<i>1</i> 0-
	revenue, if any, for each program service rep	sorted	inante and anocations to others, the total expenses	, and
44	2 (Code:) (Expanses \$ 3,56	2,388. Including grants of \$		
-44	THE CENTED DECUTED OF	2, 300 • Including grants of \$) (Revenue \$)
	THE CENTER PROVIDES FR	EE LEGAL ASSISTANCE	IN CIVIL, JUVENILE, AND REI	ATED
	MATTERS TO FINANCIALLY	INDIGENT CLIENTS I	N THE STATE OF VIRGINIA.	
4b	(Code:) (Expenses \$	including grants of \$		
		mondoling grantes or s) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$	
			\ (Hevaure 2	}
4.5				
4d	Other program services (Describe in Schedule	0.)		
	(Expenses \$ including	ng grants of \$	1/2	
40	Total program service expenses	3,562,388.) (Revenue \$	
		-,002,0001		
32002	1		Form 99	0 (2013)
-20-	10			

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	1	X	
5	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4	-25	
9	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to 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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			-
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			10"
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	44-		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	11c		,n.
***	Part X, line 16? If "Yes," complete Schedule D, Part IX	110	1	X
9	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f		1.40		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	116		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		70	
í.	Schedule D, Parts XI and XII	12a	Х	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?			x
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
14a		13		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundralsing, business,	14a		<u> </u>
•	Investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	170		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	- 1	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	1	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,"		\neg	
	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		
		Form !	990 (2	013)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	. 21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			ľ
	Schedule J	23		x
24	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		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
C				
	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				
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part i	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	200		44
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		34
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member		ĺĺ	
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		- 21
	instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200	-	
	director, trustee, or direct or Indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	-	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25	-	45
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30	-	
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal Income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			-
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form 9	90 (2	013)

_	Check if Schedule O contains a response or note to any line in this Part V	***********		*******		
ni n	Follow Management of the Post Of France (COO) Follow Of the United States	1.1		,	Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter 8- if not applicable		9			
b	The state of the s			4		
C	and a second of the second sec					
r) m	(gambling) winnings to prize winners?	T 1		10		-
20	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		44			
- de	filed for the calendar year ending with or within the year covered by this return	2a		-!	ж	
E41	If at least one is reported on line 2a, did the organization file all required federal employment tax returned to the file of the country of lines 1a coul 2a is constant to 1500 years and the file of the country of lines 1a coul 2a is constant to 1500 years and the file of the country of lines 1a coul 2a is constant to 1500 years and 1a coul 2a is constant to 150			2b	-	-
20	Note, If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	(8)	***************			-
b	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule		100 1000 0 11524	3a		X
				3b		_
793	At any time during the calendar year, did the organization have an interest in, or a signature or other				1	X
b	financial account in a foreign country (such as a bank account, securities account, or other financial if "Yes," enter the name of the foreign country:	account)?	******	4a		Δ
-		Atamana da Am				
Ea	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial					10
b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.		ng rati sa tanang ang kanalaga	5а	-	X
Đ.	Liu any taxable party routly the organization that it was or is a party to a promotion tax sherter trans	action?,		5b		
- G	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		***********************	5c		-
DR	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to					X
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions.		end A charge-mandes.	6a		
D						
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	**** ******	19"" 111 2711444	6b		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	ndoon new de	and to the necessaria			X
b	MC PARTIES IN THE SECOND CONTRACT CONTR			1 1 1		Δ.
8	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w		*********	7b		
						X
А	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year	7d		7c		A
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ontract.		7e 7f		
a	If the organization received a contribution of qualified intellectual property, did the organization file F	raci r	Charitana a			
ħ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7g 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D	in the suppo	rtina	211	1 2	
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tima du	ring the uper?	8		
9	Sponsoring organizations maintaining donor advised funds.	ent anna da	mig and your i			
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	************	بوقيونما هيها العج	9b		
10	Section 50 1(c)(7) organizations. Enter:	************	*************	510		-
а		10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	100				
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
		12b	ŀ	72.0		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
	Is the organization licensed to issue qualified health plans in more than one state?		Ì	13a	-	
	Note. See the instructions for additional information the organization must report on Schedule O.	4 104			_	
b	Enter the amount of reserves the organization is required to maintain by the states in which the		[
	organization is licensed to issue qualified health plans	13b	i			
C	Enter the amount of reserves on hand	13c				
4a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	O		14b	\dashv	
				_	990 (2012

Form 990 (2013) LEGAL AID JUSTICE CENTER 54-0884513 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below 7b below 7b below 7b below 7b below to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule C. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Se	ction A. Governing Body and Management			
			Yes	No
1	Enter the number of voting members of the governing body at the end of the tax year	2		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
- 1	Enter the number of voting members included in line 1a, above, who are independent	2		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	-		
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	-	+	
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Life the organization make any significant changes to its poverning decuments since the print to the print of		-	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	4	-	
6	Did the organization have members or stockholdore?	5	-	X
78	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	6	-	X
	more members of the governing body?	i		
Ŀ	more members of the governing body?	7a		X
	a subject to approve by members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
2		8a	X	
b	each confinitee 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 reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	1.00	X
b	if res, did the diganization have written policies and procedures governing the activities of such chapters, affiliates	100		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	118	-	
12a	Did the organization have a written conflict of interest policy if the floor to the sec	40.	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12b	Δ	
			No.	
13	PMC_AC	12c	X	
14	Did the organization have a written document microtion and deals with a still	13	X	
15	Did the organization have a written document retention and destruction policy?	14	X	
10	Did the process for determining compensation of the following persons include a review and approval by independent			
а	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
ici Te-	The organization's CEO, Executive Director, or top management official	15a		X
	Other officers or key employees of the organization	15b		X
	in the 13d of 130, describe the process in Schedule () (696 instructions).		Ţ	
109	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
þ	in "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the prognization's			
	exempt status with respect to such arrangements?	16b		
Sec	ion C. Disclosure	100		_
17	List the states with which a copy of this Form 990 is required to be filed ▶VA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	reilabl		_
	for public inspection. Indicate how you made these available. Check all that apply.	raliabli	3	
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and			
	statements available to the public during the tax year.	Tinano	ial	
	State the name, physical address, and telephone number of the person who possesses the books and records of the organizations.	_		
	THE ORGANIZATION - 434-977-0553	on: 📂		_
	AND DOUGHOUS STREET			
	10-00 PRESTON AVENUE, SUITE A, CHARLOTTESVILLE, VA 22903			
AND LANG	19"80" 19	Form \$	90 (2	113)

Form 990 (2013) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 List all of the organization's current key employees, if any. See instructions for definition of "key employee."

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

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

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

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

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

(A) Name and Title	(B)			Pos	C) itior	7		(D)	(E)	(F)
Matthe district	Average hours per week	boi	i, linle	heck ess pe ad a d	MOUN	than Is bol	th an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Difficer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) D. BROCK GREEN	1.00									
BOARD MEMBER		X				<u> </u>		0.	0.	0.
(2) HERBERT L. BESKIN	1.00								_	
BOARD MEMBER		X				\perp	<u></u>	0.	0.	0.
(3) JONATHAN T. BLANK	1.00	١								_
BOARD MEMBER	4 00	X			_	_		0.	0.	0.
(4) TRACEY C. HOPPER	1.00			١.						
BOARD NEMBER	0 50	X						0.	0.	0.
(5) JAMES A. MCCAULEY BOARD MEMBER	0.50									
(6) JOHN H. COBB JR	0.50	X						.0.	0.	0.
BOARD MEMBER	0.50	x								
(7) CHARLES K. SEYFARTH	0.50					_		0.	0.	D.
BOARD MEMBER	0.30	X						۵.	0.	
(8) THOMAS G. SLATER, JR.	0.50	-					-	U •	U.	0.
BOARD MEMBER	0.50	X		-				0.	0.	0.
(9) JOHN M. OAKEY, JR.	0.50	453	Н						0.1	<u> </u>
BOARD MEMBER	0.30	Х			ļ			0.	0.	0.
(10) HARRY M. JOHNSON, III	0.50		-			Н		0.	U .	0,
BOARD MEMBER		X						0.1	0.	0.
(11) ANTHONY GAMBARDELLA	0.50	-								
BOARD MEMBER		X			- 4			0.	0.1	0.
(12) IRVING M, BLANK	0.50					Н				
BOARD MEMBER		X						0.	0.	0.
(13) EARL J. GEE	0.50									
BOARD MEMBER		X						0.	0.1	0.
(14) EVA ANTHONY	0.50									
BOARD MEMBER		X				l		0.	0.	0.
(15) CORA HAYES	0.50									
BOARD MEMBER		X						0.	0.	0.
(16) DORA CALLAHAN	0.50			\neg			\Box			
BOARD MEMBER		X						0.	0.	0.
(17) LINDA FREEMAN	0.50									
BOARD MEMBER		X						0.	0.	0.

332007 10-29-13

Form 990 (2013)

LEGAL AID JUSTICE CENTER

332008

Form 990 (2013)

54-0884513

Page 8

		Check if Schedule O con	24.10 4 10000113	o of tiple to diffy	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluder from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 :	a Federated campaigns	1a					
900		b Membership dues	1b					
8 4	1	c Fundralsing events	1c					1
	(d Related organizations	1d					
ns,		B Government grants (contribut		649,676.				
III III	f	F All other contributions, gifts, gran						
ĘĘ		similar amounts not included abo	ve 11 2	,945,908,				
E 5		Noncash contributions included in lines	1a-1f; \$					
O m	1	Noncesh contributions included in lines Total. Add lines 1a-1f	***********		3,595,584.			
	ŀ			Business Code	9			
80	2 8	• <u></u>						
20	t	3						
Program Service Revenue	٥							
6 9	C							
0	6	• <u></u>						
п.	f	All other program service reve	nue					
	0	Total. Add lines 2a-2f						
	3	Investment income (Including						
		other similar amounts)		> .				
	4	Income from investment of tax						
	5	Royalties	****************					
			(i) Real	(ii) Personal				
- 1	6 a	Seas tape to be seen						
	b	Less: rental expenses						
		Rental income or (loss)						
	c R d N 7a G	Net rental income or (loss)	12212					
- 1	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
- 1		assets other than inventory						
- 1	b	Less: cost or other basis		1				
1		and sales expenses			District Control			
	C	Gain or (loss)						
- 1	d	Net gain or (loss)						
8	8 a	Gross income from fundraising						
a		including \$	of					
Revenue		contributions reported on line		,				
ě		Part IV, line 18						
£		Less: direct expenses						
ĺ		Net income or (loss) from fund						}
	9 a	Gross income from gaming act						
		Part IV, line 19	a					
	Ь	Less: direct expenses	b					
		Net income or (loss) from gami						
	10 a	Gross sales of inventory, less r	eturns					
		and allowances						
- 1	b	Less: cost of goods sold	b					
H	C	Net income or (loss) from sales						
-		Miscellaneous Revenue	1	Business Code				
	11 a							
- 1	þ							
	C							
	d	All other revenue						
- 1	e	Total. Add lines 11a-11d						
	12	Total revenue. See instructions.			3,595,584.	0.		

Part IX Statement of Functional Expenses

_	Check if Schedule O contains a respon	ise or note to any line in	this Part IX(B)	(6)	(0)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1					
_	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
-	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,	İ			
	organizations, and individuals outside the				
_	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	0 1 5 0 0 10	4 44 4 4 4		
7	Other salaries and wages	2,159,343.	1,914,415.	115,863.	129,065
8	Pension plan accruais and contributions (include	47 700	4= 000	4	
	section 401(k) and 403(b) employer contributions)	17,392.	15,300.	1,044.	1,048
9	Other employee benefits	620,529.	550,259.	32,630.	37,640
10	Payroli taxes	172,560.	151,849.	10,354.	10,357
11	Fees for services (non-employees);				
8	Management				
b	Legal				
C	Accounting	8,200.	7,380.	820.	
d	The territorial contraction of the contraction of t				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
9	Other. (If line 11g amount exceeds 10% of line 25,	4.0.004	44 44 6		
	column (A) amount, list line 11g expenses on Sch O.)	12,351.	11,116.	1,235.	
12	Advertising and promotion				
13	Office expenses	144,479.	126,786.	14,465.	3,228
14	Information technology	13,432.	8,921.	4,511.	
15	Royalties				
16	Occupancy	304,256.	270,787.	30,426.	3,043.
17	Travel	50,525.	44,861.	5,052.	612.
16	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	16,956.	15,525.	1,431.	
20	Interest	20,154.	18,139.	2,015.	
21	Payments to affiliates	446.60			
22	Depreciation, depletion, and amortization	116,635.	110,803.	5,832.	
23	Insurance	22,266.	19,816.	2,227.	223.
24	Other expenses. Itemize expenses not covered above. (List miscallaneous expenses in line 24s. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
	EQUIPMENT RENTAL AND RE	171,220.	154,098.	17,122.	
h	FUNDRAISING	115,389.	1J#,UJO.	11,1660	115,389.
-	LITIGATION SUPPORT	63,792.	63,792.		113,363.
d	LIBRARY EXPENSE	39,791.	37,340.	2,451.	
-	All other expenses	46,908.	41,201.	5,684.	23
25	Total functional expenses. Add lines 1 through 24e	4,116,178.	3,562,388.	253,162.	23.
26	Joint costs. Complete this line only if the organization	-111011101	3,304,3004	433,104.	300,628.
	reported in column (B) joint costs from a combined	1			
	* * * *				
	educational campaign and fundraising solicitation.				

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Pari	X		L
		(A)		(B)
		Beginning of year		End of year
-1	Cash - non-interest-bearing		1	
2	Savings and temporary cash investments	271,628		122,85
3	Pledges and grants receivable, net	519,500	3	250,00
4	Accounts receivable, net	151,589.	4	77,69
. 5	Loans and other receivables from current and former officers, directors			
	trustees, key employees, and highest compensated employees. Compl			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined	under		
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and confidence in the section 4958(c)(B), a	ibuting		
	employers and sponsoring organizations of section 501(c)(9) voluntary			
2	employees' beneficiary organizations (see Instr). Complete Part II of Sch	L	6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		В	
9	Prepaid expenses and deferred charges		9	22,63
10a	and the state of t		PG0	
	basis. Complete Part VI of Schedule D 10a 3,001,		200	
b	Less: accumulated depreciation 10b 1,242,	291. 1,875,387.	10c	1,758,75
11	Investments - publicly traded securities		11	
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	93,091.	15	82,620
16	Total assets. Add lines 1 through 15 (must equal line 34)	2,923,758.	16	2,314,564
17	Accounts payable and accrued expenses			225,349
18	Grants payable		18	
19	Deferred revenue	181,573.	19	13,333
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	Loans and other payables to current and former officers, directors, trust			
	key employees, highest compensated employees, and disqualified personal compensated employees, and disqualified personal compensated employees.	ns.		
22	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	679,026
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part)			
	Schedule D	88,563.	25	79,848
26	Total liabilities. Add lines 17 through 25	1,086,156.	26	997,556
	Organizations that follow SFAS 117 (ASC 958), check here	and		
27 28 29 30 31 32	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets		27	1,067,008
28	Temporarily restricted net assets	519,500.	28	250,000
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here		100	
	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	1,837,602.	33	1,317,008
34	Total liabilities and net assets/fund balances	2,923,758.	34	2,314,564
				Form 990 (201)

Form **990** (2013)

	n 990 (2013) LEGAL AID JUSTICE CENTER	54-08	84513	Page '	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	3,595		
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,116		
3	Revenue less expenses. Subtract line 2 from line 1	3		,594	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,837	,602	1.
5	Net unrealized gains (losses) on investments	5			_
6	Donated services and use of facilities	6			Ξ
7	Investment expenses	7			
8	Prior period adjustments	8			_
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0	١.
10	Net assets or fund balances at end of year, Combine lines 3 through 9 (must equal Part X, line 33,				_
-	column (B))	10	1,317	,008	
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII			X	
			1	res No	0
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				_
	if the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	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		1,73		
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,		5.1	_
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	ale Audit			
	Act and OMB Circular A-1337		3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ed audit			-
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
				90 (201:	3)
				4-1	- 6

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support Complete if the organization is a section 50 l(c)(3) organization or a section

> 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection Employer identification number

LEGAL AID JUSTICE CENTER 54-0884513 Parl Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii), (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi), (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4), An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(li) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (vi) is the organization in col. (iv) is the organization (v) Did you notify the (i) Name of supported (II) EIN (iii) Type of organization (vii) Amount of monetary n col. (i) listed in your organization in col. (described on lines 1-9 organization support (i) organized in the U.S.? looverning document? (I) of your support? above or IRC section (see Instructions)) No

332021 09-25-13

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990 EZ) 2013 LEGAL AID JUSTICE CENTER 54-08845

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.)

-	ection A. Public Support						
Cal	lendar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
- 1	Gifts, grants, contributions, and						1,7,7
	membership fees received. (Do not						
	include any "unusual grants.")	4409969.	3775382.	3708549.	3623457.	3595584.	19112941.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	4409969.	3775382.	3708549.	3623457.	350559/	19112941.
- 5	The portion of total contributions	1100000	0.,0000	37003431	3023437.	3333304.	13112341.
	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.			:	-		
	anhuman 60			·			
	Public support. Subtract fine 5 from line 4.	<u> </u>					10110011
	ction B. Total Support						19112941.
	endar year (or fiscal year beginning in)	(a) 2009	/b) 0010	4-1-0044	100010		
	Amounts from line 4	4409969.	(b) 2010 3775382.	(c) 2011 3708549	(d) 2012 3623457.	(e) 2013	(f) Total 19112941.
R	Gross income from interest,	4403303.	3773302.	3700343.	3023437	3333304.	TATIVAT.
0	dividends, payments received on						
	· · · · · · · · · · · · · · · · · · ·						
	securities loans, rents, royalties	162.	263.	481.	502		1 100
	and income from similar sources	102.	403.	401-	583.		1,489.
9	Net income from unrelated business					i	
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital				i		
	assets (Explain in Part IV.)						
	Total support. Add lines 7 through 10		i				19114430.
	Gross receipts from related activities,			*********		12	
13	First five years. If the Form 990 is for	the organization's	first, second, third	i, fourth, or fifth ta	x year as a section	501(c)(3)	
Ser	organization, check this box and stop ction C. Computation of Publi	c Support Dor	contogo	*************************		*******	
44	Public support percentage for 2013 (li	c oupport rei	centage	1 (0)			000
45	Public support percentage from 2012	Cabadula & Dad I	videa by line 11, co	oiumn (t))	***************************************	14	99.99 %
160	33 1/3% support test - 2013. If the o	Ochecule A, Part	t shook the hove-	Upo 10 and Upo 1	4.5-00-4/00/	15	99.98 %
-	ston here. The organization qualifies	ngariization old not	t check the box on	ine is, and line i	4 IS 33 1/3% OF M	ore, check this bo	(and
b	stop here. The organization qualifies a 33 1/3% support test - 2012. If the o	ze a publicly suppo raspisation did not	oned organization		hadranianianiania		
_	and stop here. The organization quali	fige se a nublicivo	Concepted organization	te 13 of toal, alticit	FIRE 12 IS 33 1/3%	or more, check th	S DOX
17a	10% -facts-and-circumstances test	- 2013 if the oras	upported bryanka unization did not ob	Nook a box on line	10 10 10-	and the and the stone of	
	and if the organization meets the "fact	te-and-circ metans	on" tost shoot thi	ieck a box on line	is, ioa, or iob, ar	10 line 14 is 10% (or more,
	mosts the "facts.and-circumstances"	toot The even prizet	ies test, check tri	s box and stop ne	re. explain in Part	(V now the organi	zation
ь	meets the "facts-and-circumstances" (- 9019 H+bo a	ion qualifes as a p	ublicly supported	organization	**************************************	
	10% -facts-and-circumstances test more, and if the organization meets th	Egyo all II ran ma -	notanean! toot CF	INCK & DOX ON IINE	13, 16a, 16b, or 17	ra, and line 15 is 1	U% or
	organization meets the "facts-and-circ	umetanoca" tart 7	ho organization	suk unis dox and si	rop nere. Explain i	n Part IV how the	. [
18	Private foundation. If the organization	umaterices test. I	ne organization qu	delines as a publici	y supported organ	ization	
197	· · · · · · · · · · · · · · · · · · ·	T GIG FIOT CHECK & D	OA DITHINE TO, 168,	10D, 1/a, or 1/b,			
					Sched	ule A (Form 990 d	x 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 LEGAL AID JUSTICE CENTER Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support	Dayr, picaco Com	pioto i di ili,				
Cal	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Gifts, grants, contributions, and			197291	10,2012	(6) 2010	(I) Total
	membership fees received, (Do not		1				
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513		<u> </u>				
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf				1		
5	The value of services or facilities				1		
	furnished by a governmental unit to		-		-		
	the organization without charge						
6	Total. Add lines 1 through 5						
76	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other tran 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						
8	Public support (Subtracting 7c from line 6.)						
Sec	ction B. Total Support						
	ndar year (or fiscal year beginning in) 📂	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
þ	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 in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain				1		
	or loss from the sale of capital assets (Explain in Part IV.)						
13	Fotal support, (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for i	the organization's	first, second, thin	d, fourth, or fifth to	ax vear as a section	on 501(c)(3) organize	ation
	check this box and stop here		4.1			on oo nono	adony.
sec	tion C. Computation of Public	c Support Per	centage				
15	Public support percentage for 2013 (lin	ie 8, column (f) di	vided by line 13, c	olumn (f))		15	%
16	Public support percentage from 2012 !	Schedule A, Part I	III, line 15			16	%
Sec	tion D. Computation of Inves	tment income	Percentage				
17	Investment income percentage for 201	3 (line 10c, colum	n (f) divided by lin	e 13, column (f))	***************************************	17	%
18	Investment income percentage from 20	J12 Schedule A, F	Part III, line 17 🛄	rest se time regardaga as	BEC 1899 1999 1 2	18	%
19a	33 1/3% support tests - 2013. If the o	rganization did no	ot check the box o	n line 14, and line	15 is more than	33 1/3%, and line 17	7 is not
	more than 33 1/3%, check this box and	stop here. The	organization quali	ies as a publicly s	supported organiz	ation	
b	33 1/3% support tests - 2012, If the o	rganization did no	ot check a box on	line 14 or line 19a	ı, and line 16 is m	ore than 33 1/3%, a	nd
	line 18 is not more than 33 1/3%, chec	k this box and sto	op here. The orga	nization qualifies a	as a publicly supp	orted organization	▶
	Private foundation. If the organization	did not check a b	xxx on line 14, 19a	, or 19b, check th			▶□
32023	3 09-25-13			16	Sol	redule A (Form 990	or 990-EZ) 2013

Supplemental Information: Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information, (See instructions).	Part IV Supplemental Information, Provide the explanations required by Part II line 10: Bot II line	54-0884513 Page
Also complete this part for any additional information. (See instructions).	The state of the control of the state	17a or 17b; and Part III, line 12.
	Also complete this part for any additional information. (See instructions).	

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OM8 No. 1545-0047

Name of the organization

Employer identification number

L.	EGAL AID JUSTICE CENTER	54-0884513
Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ	3 (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Check if your organization	is covered by the General Rule or a Special Rule.	
)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R	ule. See instructions,
General Rule		
	on filling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in natice Parts I and II.	noney or property) from any one
Special Rules		
509(a)(1) and 170((c)(3) organization filling Form 990 or 990 EZ that met the 33 1/3% support test of the re- (b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h, or (ii) Form 990 EZ, line 1. Complete Parts I and II.	
total contributions	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one control of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educately to children or animals. Complete Parts I, II, and III.	
contributions for u If this box is check purpose. Do not c	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributes exclusively for religious, charitable, etc., purposes, but these contributions did not to ked, enter here the total contributions that were received during the year for an exclusive omplete any of the parts unless the General Rule applies to this organization because the, etc., contributions of \$5,000 or more during the year	otal to more than \$1,000. Ply religious, charitable, etc., It received nonexclusively
but it mus t answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2, of its Form 990; or check the box on line H of its Form 990 EZ or on its Fit the filling requirements of Schedule B (Form 990, 990 EZ, or 990 PF).	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Hame of organization

Employer identification number

LEGAL	AID	JUSTICE	CENTER

LEGAI	AID JUSTICE CENTER		54-0884513
Part I	Contributors (see instructions). Use duplicate copies of Part I if ac	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	COUNTY OF FAIRFAX 12000 GOVERNMENT CENTER PARKWAY FAIRFAX, VA 22305	\$ <u>423,930</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	LEGAL SERVICES CORPORATION OF VA 700 EAST MAIN STREET RICHMOND, VA 23219	s1,465,906.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		*	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

LEGAL AID JUSTICE CENTER

54-0884513

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if		-0004313
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. Irom 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. rom art i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) Vo. om ert i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	

Name of orga	nization			Employer identification number				
LEGAL	AID JUSTICE CENTER			54-0884513				
Part III	Exclusively religious, enamable, etc., in year. Complete columns (a) through (e) and the total of exclusively religious, charitable, Use duplicate copies of Part III if additional in the complete copies of the co	atvidual contributions to section 501(a) I the following line entry. For organization etc., contributions of \$1,000 or less for to conal space is needed.	7), (8), or (70) organizations of the completing Part III, enter the year-(Eater this information once	ons that total more than \$1,000 for me				
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
-								
		(e) Transfer of gift						
-	Transferee's name, address,	and ZIP + 4	Relationship of tra	nsferor to transferee				
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held				
-								
	(e) Transfer of gift							
-	Transferee's name, address,	and ZIP + 4	Relationship of tra	nsferor to transferee				
-								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held				
-								
-								
	(e) Transfer of gift							
-	Transferee's name, address, i	and 21P + 4	Relationship of trai	nsferor to transferee				
-								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desci	ription of how gift is held				
-								
-	(e) Transfer of gift							
	Transferee's name, address, a		Relationship of tran	seferor to transferon				
-				and the second s				
28454 10-24-13			Schedule B	(Form 990, 990-EZ, or 990-PF) (2013)				

SCHEDULE C

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. See separate instructions.
Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047

Open to Public inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

Section 527 organizations: Complete Part I-A only.

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

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

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

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

LEGAL AID JUSTICE CENTER Square S	Section 501(c)(4), (5), or (6) organi:	ations: Complete Part III.			
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 a Was a correction made? 4 b if "ves," describe in Part IV. 5 b if "ves," describe in Part IV. 7 complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 5 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 7 total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL. 8 Part the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization into the filing organization's funds. Addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization funds perments. For sech organization intends, enter the amount of political contributions received that were promptly and directly delivered to a separate political organization's funds. If none, enter 0. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter 0. (e) Amount of political organization. If none, enter 0.	Name of organization			Emp	ployer identification number
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4855 2 Enter the amount of any excise tax incurred by organization managers under section 4855 3 If the organization incurred a section 4965 tax, did it file Form 4720 for this year? Yes	LEGAL	AID JUSTICE CENTE	ER		54-0884513
Provide a description of the organization's direct and indirect political campaign activities in Part IV. Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4855 \$ 2 Enter the amount of any excise tax incurred by organization managers under section 4855 \$ 3 If the organization incurred a section 4855 \$ 3 If the organization incurred a section 4855 \$ 3 If the organization incurred a section 4855 \$ 5 If Yes, describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization is exempt function activities \$ 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL. \$ 8 Yes New	Part I-A Complete if the o	rganization is exempt und	der section 501(c	or is a section 527	organization.
Enter the amount of any excise tax incurred by organization under section 4955 \$ Enter the amount of any excise tax incurred by organization managers under section 4955 \$ If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes New Yes N	Political expenditures Volunteer hours				
2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? 5 If 'Yes,' describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 5 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. 5 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL. line 17b	Part I-B Complete if the or	ganization is exempt und	ier section 501(c)(3).	
Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function activities Total exempt function activities Total exempt function expenditures. Add fines 1 and 2. Enter here and on Form 1120-POL. line 17b Date the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter · O·. (e) Amount of political contributions received and promptly and directly delivered to a separate political organization, if none, enter · O·.	2 Enter the amount of any excise to 3 If the organization incurred a sect 4a Was a correction made? b If "Yes," describe in Part IV.	x incurred by organization manag ion 4955 tax, did it file Form 4720	ers under section 495 for this year?		Yes No
Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL. line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0. (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0. If none, enter -0.	Tartio Complete ii tile oi	gamzation is exempt unt	er section bullc), except section 501	(c)(3).
Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL. line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0. (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0. If none, enter -0.	Enter the amount directly expendi	ed by the filing organization for se	ction 527 exempt fun	ction activities > \$	S
Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- delivered to a separate segregated fund or a promptly and directly delivered to a separate segregated fund. If none, enter -0- If none, enter -0- If none, enter -0-	Z Enter the amount of the hing orga	nization's funds contributed to of	ther organizations for s	section 527	
line 17b 4 Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- in the filing organization in Part IV. (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-	3 Total exempt function expanditure	Add the stands Francis		11 (14 14 17 17 17 17 17 17 17 17 17 17 17 17 17	
Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0. (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0.					
Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filling organization made payments. For each organization listed, enter the amount paid from the filling organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filling organization's funds. If none, enter -0. (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0. If none, enter -0.	4 Did the filling organization file Epen	1120-DOL for this year?		***********************	
filing organization's funds. If none, enter -0. If none, enter -0.	inter the names, addresses and a made payments. For each organiz contributions received that were political action committee (PAC), if	mployer identification number (El ation listed, enter the amount pai romptly and directly delivered to	N) of all section 527 p d from the filing organ a separate political org	olitical organizations to which ization's funds. Also enter the panization, such as a separate	ch the filing organization
or Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990.57	(a) Name	(b) Address	(c) EiN	filing organization's	contributions received and promptly and directly delivered to a separate political organization.
or Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990.57					
or Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990 FZ					
or Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990.57					
	or Paperwork Reduction Act Notice.	see the instructions for Form 9	90 or 990-F7	Cabadala	(Fare 200 a cont To a cont

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Part II-A Complete if the o	rnanizati	on is ava	JUSTICE CEN	THE PARTY OF THE PARTY OF THE	54-	
(election under se	ection 50	011 15 exe 1(h)).	mpt under secti	on sortcits) and n	led Form 5768	
		1 47	iliated aroun (and list	in Part IV each affiliate	d aroun mambaria na	Title
expenses, and sh	hare of exce	se lobbyina	expenditures).	HILGITIA EGCII SUNISTEI	o group members na	me, address, EIN.
			nd "limited control" p	rovisions apply.		
l_ir	mits on Lob	bying Expe			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to in	officiance put	lic oninion /	forges roots labeling			-
b Total lobbying expenditures to in	ifluence a le	nislative ho	grass roots robbying; dv (direct labbying)	~ \$ \$ 1 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		
c Total lobbying expenditures (add	lines 1a an	d 16)	ay (alloct loopying)			
d Other exempt purpose expenditu	ures	- ,-,	******************	40-10-2		
e Total exempt purpose expenditu	res (add line	s 1c and 1c	A			
f Lobbying nontaxable amount. Er	nter the amo	unt from the	e following table in bo	th columns		
If the amount on line 1e, column (a)			bying nontaxable an			
Not over \$500,000			the amount on line 1			
Over \$500,000 but not over \$1,0	00,000		0 plus 15% of the ex			
Over \$1,000,000 but not over \$1				cess over \$1,000,000.		
Over \$1,500,000 but not over \$1	7,000,000			ess over \$1,500,000.		
Over \$17,000,000		\$1,000.0				
g Grassroots nontaxable amount (e h Subtract line 1g from line 1a. If ze Subtract line 1f from line 1c. If ze	ero or less, e	enter 0	***************************************			
h Subtract line 1g from line 1a. If zer I Subtract line 1f from line 1c. If zer j If there is an amount other than z reporting section 4911 tax for this (Some organi	ero or less, e ro or less, e ero on eithe s year?	enter -0- nter -0- w line 1h or l 4-Year Ave t mede a se	ine 1i, did the organizers	cation file Form 4720	lete all of the five	Yes No
h Subtract line 1g from line 1a. If zer I Subtract line 1f from line 1c. If zer j If there is an amount other than z reporting section 4911 tax for this (Some organi	ero or less, e ro or less, e rero on eithe s year? izations tha columns bei	nter 0 r line 1h or l 4-Year Ave t made a se ow. See the	ine 1i, did the organizers	cation file Form 4720 Section 501(h) In do not have to compass 2a through 2f on pa	lete all of the five	Yes No
h Subtract line 1g from line 1a. If zer I Subtract line 1f from line 1c. If zer j If there is an amount other than z reporting section 4911 tax for this (Some organi	ero or less, e ro or less, e rero on eithe s year? izations tha columns bei	onter -0	ine 1i, did the organizeraging Period Under section 501(h) election for line	cation file Form 4720 Section 501(h) In do not have to compass 2a through 2f on pa	lete all of the five	Yes No
h Subtract line 1g from line 1a. If zer I Subtract line 1f from line 1c. If zer j If there is an amount other than z reporting section 4911 tax for this (Some organi	ero or less, ero or less, ero or less, ereco on either syear?	onter -0	ine 1i, did the organizeraging Period Under ection 501(h) election instructions for line ditures During 4-Ye	Section 501(h) n do not have to comp es 2a through 2f on pa ar Averaging Period	lete all of the five ge 4.)	
h Subtract line 1g from line 1a. If ze Subtract line 1f from line 1c. If ze if there is an amount other than z reporting section 4911 tax for this (Some organi Calendar year (or fiscal year beginning in)	ero or less, ero or less, ero or less, ereco on either syear?	onter -0	ine 1i, did the organizeraging Period Under ection 501(h) election instructions for line ditures During 4-Ye	Section 501(h) n do not have to comp es 2a through 2f on pa ar Averaging Period	lete all of the five ge 4.)	
h Subtract line 1g from line 1a. If ze I Subtract line 1f from line 1c. If ze j If there is an amount other than z reporting section 4911 tax for this (Some organi C Calendar year (or fiscal year beginning in) 2a Lobbying nontaxable amount b Lobbying celling amount	ero or less, ero or less, ero or less, ereco on either syear?	onter -0	ine 1i, did the organizeraging Period Under ection 501(h) election instructions for line ditures During 4-Ye	Section 501(h) n do not have to comp es 2a through 2f on pa ar Averaging Period	lete all of the five ge 4.)	
h Subtract line 1g from line 1a. If zer I Subtract line 1f from line 1c. If zer J if there is an amount other than z reporting section 4911 tax for this (Some organi C Calendar year (or fiscal year beginning in) 2a Lobbying nontaxable amount (150% of line 2a, column(e)) c Total lobbying expenditures d Grassroots nontaxable amount	ero or less, ero or less, ero or less, ereco on either syear?	onter -0	ine 1i, did the organizeraging Period Under ection 501(h) election instructions for line ditures During 4-Ye	Section 501(h) n do not have to comp es 2a through 2f on pa ar Averaging Period	lete all of the five ge 4.)	
h Subtract line 1g from line 1a. If zer I Subtract line 1f from line 1c. If zer I fithere is an amount other than z reporting section 4911 tax for this (Some organi C Calendar year (or fiscal year beginning in) 2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column(e)) c Total lobbying expenditures	ero or less, ero or less, ero or less, ereco on either syear?	onter -0	ine 1i, did the organizeraging Period Under ection 501(h) election instructions for line ditures During 4-Ye	Section 501(h) n do not have to comp es 2a through 2f on pa ar Averaging Period	lete all of the five ge 4.)	

Schedule C (Form 990 or 990 EZ) 2013 LEGAL AID JUSTICE CENTER 54-088451

[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)).

	or each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)
of th	ee lobbying activity.	Yes	No	Am	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
Ε	Volunteers?		х		
ŧ	Paid start or management (include compensation in expenses reported on lines 1c through 1i)?	X			
0	Media advertisements?		Х		
-0	Mailings to members, legislators, or the public?		Х		
	Publications, or published or broadcast statements?		X		
1	Grants to other organizations for lobbying purposes?		X		
8	Direct contact with legislators, their staffs, government officials, or a legislative body?	Х		1	4,156
- In	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		
1	Other activities?		X		
	Total, Add lines 1c through 1i			14	4,156
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?				
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)	(5), or sec	tion	
	501(c)(6).	* *			
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		9		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section	n 501(c)	5), or sec	tion	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No," OF	(b) Part	lli-A, lir	ne 3, is
4	answered "Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al			
	expenses for which the section 527(f) tax was paid).				
a	Current year	**********	2a		
Þ	Carryover from last year		2b		
C	I O(B)		20		
.3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	355			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po-	olitical			
	expenditure next year?		. 4		
5	Taxable amount of looplying and political expenditures (see instructions)		5		
_	IV Supplemental Information				-
ΙΟνίι	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group I	ist): Part II-/	A. line 2: and	Part II-B	line 1
ינטפו	complete this part for any additional information.	. (,	4 1210	1 -11 11 -1	1110
AR	T II-B, LINE 1, LOBBYING ACTIVITIES:				
ХP	LANATION: TO LOBBY ON BEHALF OF LOW-INCOME PEOPLE I	N VIR	GINIA (NC	
55	UES AFFECTING THEIR LIVES.				
				-	
		<u> </u>			
		- 1 - 1	- 4- 1		

SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its Instructions is at www.irs.gov/torm990.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

1 1 2 3	LEGAL AID JUSTICE CENTER		54-0884513			
-	ort! Organizations Maintaining Donor Advised Funds or Other Similar Funds or	Acco	Ounts. Complete if the			
	organization answered "Yes" to Form 990, Part IV, line B.					
	(a) Donor advised funds	(b) Fi	and other accounts			
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fur	nds				
	are the organization's property, subject to the organization's exclusive legal control?		Yes			
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 confe	rring				
	Impermissible private benefit?	-				
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV,	line 7	7.			
1	Purpose(s) of conservation easements held by the organization (check all that apply).					
		lly ime	ortant land area			
	Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of natural habitat Preservation of a certified historic structure					
	Preservation of open space	iotol ic	SUUCIDIE			
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co		-41			
	day of the tax year.	onser	ation easement on the last			
			Dale at the First State W. at			
а	Total number of conservation easements		Held at the End of the Tax Ye			
b	Total acreage restricted by conservation easements	2a				
C	Number of conservation easements on a certified historic structure included in (a)	2b				
	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	2c				
	listed in the National Registers					
3	listed In the National Register	2d	<u></u>			
•	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	Izatio	n during the tax			
A						
5	Number of states where property subject to conservation easement is located					
9	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of					
5	violations, and enforcement of the conservation easements it holds?		Yes LN			
7	Starr and volunteer nours devoted to monitoring, inspecting, and enforcing conservation easements during the year					
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	ar 📂	\$			
3	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B))(i)				
	and section 170(h)(4)(B)(ii)?		Yes N			
9	in Part XIII, describe now the organization reports conservation easements in its revenue and expense statement	rent. 4	and balance sheet, and			
	include, if applicable, the text of the footnote to the organization's financial statements that describes the org	aniza	lion's accounting for			
	Conservation easements.					
en	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other S	imil	ar Assets.			
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.					
_						
la	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and	d bala	INCO sheet works of art.			
	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of r	d bala	ance sheet works of art,			
1	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of particles the text of the footnote to its financial statements that describes these items.	public	service, provide, in Part XIII			
b i	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of particle that the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and ba	oublic	service, provide, in Part XIII			
b i	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of particle that the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and ba	oublic	service, provide, in Part XIII			
b 1	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of particles the text of the footnote to its financial statements that describes these items.	oublic	service, provide, in Part XIII			
b	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of parties that of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and battreasures, or other similar assets held for public exhibition, education, or research in furtherance of public services items:	oublic Nance Vice, p	service, provide, in Part XIII sheet works of art, historica rovide the following amount			
1 25 1 1 (If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of paths to the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and battreasures, or other similar assets held for public exhibition, education, or research in furtherance of public server lating to these items:	alance /ice, p	service, provide, in Part XIII sheet works of art, historica provide the following amount			
b b f (If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of pithe text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and battreasures, or other similar assets held for public exhibition, education, or research in furtherance of public server relating to these items: (i) Revenues included in Form 990, Part VIII, line 1	alance	service, provide, in Part XIII sheet works of art, historica rovide the following amount			
b 1 () () () () () () () () () (If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of pithe text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and battreasures, or other similar assets held for public exhibition, education, or research in furtherance of public server elating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (iii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, pithe following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	ilance lice, p	service, provide, in Part XIII sheet works of art, historica rovide the following amount			
b 1 () () () () () () () () () (If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of pithe text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and battreasures, or other similar assets held for public exhibition, education, or research in furtherance of public server elating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (iii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, pithe following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	ilance lice, p	service, provide, in Part XIII. sheet works of art, historica crovide the following amount			
b f f f f f f f f f	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of pithe text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and battreasures, or other similar assets held for public exhibition, education, or research in furtherance of public server lating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial pain.	alance vice, p	service, provide, in Part XIII. sheet works of art, historica provide the following amount			