partment of the Treasury ernal Revenue Service For the 2014 caler			ЭX	00.0
ernal Revenue Service	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (e	xcept private fo	undations	2014
ernal Revenue Service	Do not enter social security numbers on this form as it mail			Open to Public
For the 2014 caler	Information about Form 990 and its instructions is at www.	•		Inspection
and the second se	dar year, or tax year beginning , 2014, and en	ding		, 20
Check If applicable:	Name of organization Judicial Education Project		D Employe	r identification number
Address change	Doing business as			20-2466871
Name change		vsuite	E Telephon	
Initial return Final return/terminated	City or town, state or province, country, and ZIP or foreign postal code	268	·	(571) 247-3688
1 I I I I I I I I I I I I I I I I I I I	Nashington, DC 20006		G Gross re	nemic \$ 0.077.0
	Name and address of principal officer: Daniel Casey	Hial is the a		ceipts \$ 9,077,0 ubordinates? Yes No
	Same as Box C			included? Yes No
Tax-exempt status	[[501(c)(3) [501(c)() 4 (insert no) [4947(a)(1) or [52] 52			list. (see instructions)
Website. 🕨 none		H(c) Group	exemption	number Þ
	Corporation ☐ Trust	mation. 2004	M State	of legal domicile VA
Part Summ		·		
	scribe the organization's mission or most significant activities:			
The Judic	al Education Project has been established for charitable and education	al purposes to	conduct re	search and educate
	the role of the role of the Judiciary as laid out in the U.S. Constitution.	d of more the	- 0ED/ of	to pot opporto
3 Number of	s box \blacktriangleright if the organization discontinued its operations or dispositive for the governing body (Part VI, line 1a) .			115 Her 255ers.
	Tindependent voting members of the governing body (Fart VI, line sa).		·	
5 Total nun	ber of individuals employed in calendar year 2014 (Part V, line 2a)			
6 Total nun	ber of Volunteers (estimate if necessary)		. 6	
7a Total unre	aled business reverse from Part VIII, column (C), line 12			
b Net unrei	ated business taxacte income from Form 990-T, line 34		. 7b	
LO			'ear	Current Year
8 Contribut	ens and grants (Part VIII, line 1h).		2,520,110	9,077,
g 9 Program				
2 10 Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)			
11 Other rev	enue (Part VIII, column (A), lines 5 6d, 8c, 9c, 10c, and 11e) .			
	nue-add lines 8 through 11 (must equal Part VIII, column (A) line 12	<u>) </u>	2,520,110	9,077,
	Id similar amounts paid (Part IX, column (A), lines 13)	·	325,000	1.560,
IE Calorino	other compensation, employee benefits (Part IX, column (A), line 4)	;	113,022	172,
2 16a Professio	nal fundraising fees (Part IX. column (A), line 11e)	·	113,022	
às l		0		· · · · · · · · · · · · · · · · · · ·
17 Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	1,809,303	7,619
1	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,247,325	9,352
19 Revenue	less expenses. Subtract line 18 from line 12		272,785	(275,
593		Beginning of (Current Year	End of Year
20 Total ass	ets (Part X, line 16)	·	491,801	216
	lities (Part X, line 26)	·	0	
and the second se	ts or fund balances. Subtract line 21 from line 20	<u>. </u>	491,801	216

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1		
16	11	
\mathcal{U}	1	•

	90 (2014) 20-2466871	Page 2
art		
	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>
1	Briefly describe the organization's mission:	_
	The Judicial Education Project has been established for charitable and educational purposes to conduct research and educat public on the role of the role of the Judiciary as laid out in the U.S. Constitution.	/
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	🗸 No
•	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	🗹 No
	If "Yes," describe these changes on Schedule O.	MO
4	Describe the organization's program service accomplishments for each of its three largest program services, as mea	sured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations t the total expenses, and revenue, if any, for each program service reported.	o others
4a	(Code:) (Expenses \$ 9,188,318 including grants of \$ 1,560,000) (Revenue \$	
40		/
	During 2014, the Judicial Education Project (Organization) participated in a number of significant amicus briefs before the US	
	Supreme Court, including both cert-stage and merits-stage briefs in King v. Burwell, and merits-stage briefs in the Hobby-Lot	by
	case, Department of Transportation v. Association of American Railroads, among others. The Organization also filed amicus	
	briefs in several other courts, including Obamacare origination challenges in the Courts of Appeals for the Fifth and the D.C The Organization engaged in significant education and media efforts regarding the aforementioned cases as well as others	Circuits.
	including: NLRB v. Noel Canning; McCutcheon v. FEC, Chamber of Commerce v. EPA; Schuette v. Coalition to Defend	
	Affirmative Action; Bond v. US; and McCullen v. Coakley.	
	The Organization conducted legal research on subsidies and origination clause issues in Obamacare, and the	
	unconstitutionality of the Dodd-Frank legislation.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$))
		'
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
		•••••
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 9,188,318 Form	990 (2014
	Form	4 U ا 2 U ا 9

Form 99			F	age 3
Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	\checkmark	
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		~
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> .	5		1
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		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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? <i>If "Yes," complete Schedule D, Part IV</i>	9		~
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			-
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		1
C	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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		1
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		 ✓ ✓
12 a	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X . Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete P_{i} between the tax year independent audited financial statements for the tax year?	<u>11f</u>		✓ ✓
b	Schedule D, Parts XI and XII	12a		· ✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		↓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
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
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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		~
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		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<u> </u>	1
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		1

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Form 99	0 (2014) 20-2466871		F	-age 4
Part	V Checklist of Required Schedules (continued)			
` 01	Did the exercitation report more than \$5,000 of grants or other excitations to any demostic exercities are		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	✓	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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? <i>If "Yes," complete Schedule J</i>	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		-
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .	27		✓_
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a 28b		✓ ✓
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		, ,
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	<u>30</u> 31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31		✓ ✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		V
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35а b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 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		1
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,		-	
38	Part VI	37 38	1	
				_

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Part	V Statements Regarding Other IRS Filings and Tax Compliance		_	<u> </u>
•	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 14			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	\checkmark	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		•	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	20	v	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		/
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b		<u> </u>
		30		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			1
		_4a		×
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).	_		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
ĥ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	_	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
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:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
12a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
a	Note. See the instructions for additional information the organization must report on Schedule O.	JJd		
Ь	Enter the amount of reserves the organization is required to maintain by the states in which			
v	the eventuation is licensed to incur such find health plans			
с	100			
		4.4~		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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Part V	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and	for a	"No"
*	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>	_•_•	
Section	on A. Governing Body and Management			<u>.</u>
4.			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 3			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 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		\checkmark
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		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	_	
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets? . Did the organization have members or stockholders?	5 6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	–		*
	one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		V
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	1	<u> </u>
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		1
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		T
100	Did the exception have least chapters, branches, or efflicted?	100	Yes	No V
10a b	Did the organization have local chapters, branches, or affiliates?	10a	<u> </u>	×
-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		1
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10-		
13	describe in Schedule O how this was done	12c 13	↓	
14	Did the organization have a written document retention and destruction policy?	14		\checkmark
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	15b	1	
460	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	r	✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	10a		
~	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		1
Secti	on C. Disclosure			·
17	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public papaging industry bound there available for public papaging.	n 501	(c)(3)s	s only)
	available for public inspection. Indicate how you made these available. Check all that apply.			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interview.	erect	nolic	v and
19	financial statements available to the public during the tax year.		pone	y, anu

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20	State the name, address, and telephone number of the person who possesses the organization's books and records:
	Neil Corkery, 3220 N Street NW, Ste. 268, Washington, DC, 20007, 571-247-3688

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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.

		(C)								
(A)	(B)	Position (do not check more than one box, unless person is both an Reportal		(D)	(E)	(F)				
Name and Title	Average hours per			Reportable compensation	Reportable compensation from	Estimated amount of				
	week (list any		r 1		· · · ·		· ·	from	related	other
	hours for related	divid.	stitut	Officer	ey en	ighes nploy	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations below dotted		Institutional trustee		Key employee	t con	7	(W-2/1099-MISC)		organization and related
	line)	uster	trus		/ee	npena				organizations
		æ	tee			Highest compensated employee				
(1) Carrie Severino	2	_							_	_
Director (2) Neil Corkery	10	v						86,400	0	0
Director, Treasurer		1						36,000	0	o
(3) Daniel Casey	3									
Director, President		1		✓				0	0	0
<u>(4)</u>										
(5)										
(7)										
(9)										
(8)										
(9)										
(10)					-		-			
	ļ	1								
(11)										
(12)										
(13)					├			· · ·		
(13)										
(14)										
		i	1	1	1			1	L	L

Form 990 (2014)

20-2466871

Graves Garrett 1100 Main Street No. 2700 Kansas City MO 64105

Steptoe Johnson 1330 Connecticut Avenue NW Washinton DC 20036

received more than \$100,000 of compensation from the organization ►

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

Holzman Vogel 45 N Hill Drive No. 100 Warrenton VA 20186

Jones Day 51 Louisiana Avenue NW Washington DC 20001

2

850,000

441,223

360,847

249,499

Page 8

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mplo	yees	s, ar	nd H	lighes	st C	ompensated E	mployees (contin	ued)	
•					•	C)							
	(A)	(B)	(do n	ot ch		ition	e than c	000	(D)	(E)		(F)	
	Name and title	Average	box,	unles	is pe	rson	is both	an	Reportable	Reportab		Estimated	
		hours per week (list any		er and	_	rect	or/trust	<u> </u>	compensation from	compensation related		amount o other	f
		hours for	Individual trustee or director	Inst	Officer	6	emj	Former	the	organizatio		compensat	ion
		related	lirec	l t	Cer	Key employee	bloy	mer	organization	(W-2/1099-N	AISC)	from the	
		organizations below dotted	ğa	ona		Pe	80		(W-2/1099-MISC)			organization and relate	
		line)		ŧ) We	npe					organizatio	
			69	Institutional trustee			Highest compensated employee						
(4.5)	·····	 		*			ed			ŀ			
(15)		+	{										
(16)													
<u></u>													
(17)		+	1										
(18)					-								
(19)		+	{										
(20)		<u> </u>					1	┢─	<u> </u> -				
	· · · · · · · · · · · · · · · · · · ·		1										
(21)			ł										
(22)		<u> </u>		┝	\vdash			╞─					
3==/			1										
(23)													
(24)	· · · · · · · · · · · · · · · · · · ·				-								
35.7/		+	1					ļ					
(25)													
1b	Sub-total				L.			└		Γ			
c c	Sub-total . Total from continuation sheets to Part		 m A	•					122,400		0		0
d	Total (add lines 1b and 1c)							5	122,400		0		0
2	Total number of individuals (including bu							a) W					<u> </u>
	reportable compensation from the organ						45010	.,			00,00		
													s No
3	Did the organization list any former of							emp	oloyee, or high	est compe	ensate	d	
	employee on line 1a? If "Yes," complete							•			· ·	3	✓
4	For any individual listed on line 1a, is the												
	organization and related organizations	greater th	an \$	150,	,000)? I	f "Ye	s,"	complete Sch	nedule J fo	or suc		-,
_			• •	·	•	•	•••	•	· · · · ·	· · · ·		. 4	_ ✓
5	Did any person listed on line 1a receive of									zation or inc	dividu		
Section	for services rendered to the organization on B. Independent Contractors			966	30	ied		or	such person	<u></u>	<u>·</u> ·	5	1
<u>Secur</u>	Complete this table for your five highest	compensat	ed in	dep	end	ent	contr	act	ors that receive	ed more the	an \$10		
-	compensation from the organization. Re												tax
	year.			-		-						•	
	(A)							Γ	(B)		<u> </u>	(C)	
	Name and business add	dress							Description of s	ervices		Compensation	
Baker	Hostetler 1050 Connecticut Avenue NW Was	shington DC	2003	6				lied	oal			3	301.988

legal

legal

legal

legal

9

	00 (201-	·/												
Part	VIII	Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII												
-		Check if Schedule O	contains a res	ponse or note to										
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514						
ts Is	1a	Federated campaigns	s 1a											
ons, Gifts, Grants Similar Amounts	ь	Membership dues .												
ΩĔ	c	Fundraising events .												
Contributions, Gifts, and Other Similar Ar	d	Related organizations												
, Gi		-												
Sins	e	Government grants (con												
er	f	All other contributions, gi												
Contribution and Other		and similar amounts not inc		9,077,000										
onti od (9	Noncash contributions includ												
άŭ	h	Total. Add lines 1a-1	<u>f</u>	<u></u> ►	9,077,000									
Ine				Business Code										
Program Service Revenue	2a													
Be	Ь													
ice	с													
ēZ	d													
٦S	e					·····								
grai	f	All other program ser												
Š	g	Total. Add lines 2a-2												
	3	Investment income	(including divid	ends interest										
	5	and other similar amo												
				L										
	4	Income from investmen												
	5	Royalties		· · · · •										
			(i) Heal	(II) Personal										
	6a	Gross rents												
	Ь	Less: rental expenses												
	c	Rental income or (loss)						_						
	d	Net rental income or	(loss)	🕨										
	7a	Gross amount from sales of	(I) Securities	(II) Other										
		assets other than inventory												
	Ь	Less. cost or other basis												
		and sales expenses .												
	c	Gain or (loss) .												
	d	Net gain or (loss)		· · · · >										
	"	Net gain of (1033) .												
Other Revenue	8a	Gross income from fuevents (not including \$	undraising											
er Re		of contributions reported See Part IV, line 18												
Ę	Ь	Less: direct expenses	-											
U		Net income or (loss) f		events . ►										
		Gross income from ga												
		See Part IV, line 19 .												
	h	Less: direct expenses												
		Net income or (loss) f						7						
	1													
	Tua	Gross sales of in												
		returns and allowance												
		Less: cost of goods s						· · · · · · · · · · · · · · · · · · ·						
	C	Net income or (loss) f												
		Miscellaneous F	Revenue	Business Code										
	11a													
	b													
	c		••••••			·								
	d	All other revenue						<u>+</u>						
		Total. Add lines 11a-												
	12	Total revenue. See in			9 077 000									

	n 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons				
	t include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	4 500 000	·	general expenses	expenses
2	Grants and other assistance to domestic individuals. See Part IV, line 22	1,560,000	1,560,000		
2	Grants and other assistance to foreign				
3	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	122,400	95,400	27,000	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	120,000			
7	Other salaries and wages	3,125	<u>120,000</u> 3,125	0	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,123	<u> </u>	V	
9	Other employee benefits				
10	Payroll taxes	13,802	11,456	2,346	
11 a	Fees for services (non-employees): Management				
b	Legal	5,911,369	5,911,369	0	
С	Accounting	1,500	0	1,500	
d					
e	Professional fundraising services. See Part IV, line 17				
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,599,630	1,486,968	112,662	
2	Advertising and promotion	.,,			• =
3	Office expenses	8,470	0	8,470	
4	Information technology				
5					· · · · -
6 7					
8	Travel	2,082	0	2,082	
19	Conferences, conventions, and meetings				
20	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization				
3					
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а		10.000		10.055	
b	Donation	10,000	0	10,000	
c					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	9,352,378	9,188,318	164,060	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following SOP 98-2 (ASC 958-720)				

Form 990 (2014)

Ρ	art X		······································		
•		Check if Schedule O contains a response or note to any line in this Pa			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	491,801	1	216,423
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	- <u></u>
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5_	
Ŋ	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
s		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	·	7	
As	8	Inventories for sale or use	·······	8	······································
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or		<u> </u>	_
		other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	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		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	491,801	16	216,423
	17	Accounts payable and accrued expenses		17_	
Liabilities	18	Grants payable		18	
	19			19	
		Tax-exempt bond liabilities		20	
	20 21 22	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
		disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	
Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here \blacktriangleright \checkmark and complete lines 27 through 29, and lines 33 and 34.			
	27		491,801	27	216,423
3al	28	Temporarily restricted net assets		28	
ğ	29	Permanently restricted net assets		29	
r Fun		Organizations that do not follow SFAS 117 (ASC 958), check here ►			
õ	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund	·	31	
As	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Net Assets or	33	Total net assets or fund balances		33	
Z	34	Total liabilities and net assets/fund balances	491,801	34	216,423

Form 99	10 (2014) 20-2466871			Pag	je 12
Part	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		8,077	7.000
2	Total expenses (must equal Part IX, column (A), line 25)	2		9,352	
3	Revenue less expenses. Subtract line 2 from line 1	3			,378)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) .	4			1,801
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	_		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		216	5,423
Part	XII Financial Statements and Reporting				5,420
_	Check if Schedule O contains a response or note to any line in this Part XII				
					No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain in			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were com reviewed on a separate basis, consolidated basis, or both:		2a		√
b	□ Separate basis □ Consolidated basis □ Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both:	 ed on a	2b		√
c	Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o of the audit, review, or compilation of its financial statements and selection of an independent accord If the organization changed either its oversight process or selection process during the tax year, ex	untant?	2c		

Schedule O.
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

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

Form 990 (2014)

1

3a

3b

SCHEDÙLE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection

Name of the organization	Employer identification number
Judicial Education Project	20-2466871
Part I Peason for Public Charity Status (All organizations must complete this pe	art) See instructions

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.) 1 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.)
 - 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
 - A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state:
 - An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.)
 - 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
 - 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
 - A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8
 - 9 \Box An organization that normally receives: (1) more than 33¹/₃% 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 331/3% 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.)
- 10 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 11 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.

- **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
- b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
- Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, С its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E,
- **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
- Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III е functionally integrated, or Type III non-functionally integrated supporting organization.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))		ir governing	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
	 		Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total		· · · · ·	·	,		

Enter the number of supported organizations

f

OMB No 1545-0047

2014

Open to Public

Part							
•	(Complete only if you checked th				-	•	alify under
0	Part III. If the organization fails to	o quality unde	er the tests lis	sted below, pl	ease comple	te Part III.)	
	on A. Public Support	(a) 0010	(h) 0011	(-) 0010		(-) 0014	(6) Tatal
	dar year (or fiscal year beginning in) ► Gifts, grants, contributions, and	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")			1 525 000	2 520 110	0.077.000	12 122 110
2	Tax revenues levied for the	<u></u>	· · · · · · · · · · · · · · · · · · ·	1,525,000	2,520,110	9,077,000	13,122,110
L	organization's benefit and either paid to or expended on its behalf						
•	The value of services or facilities						
3	furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3			1,525,000	2,520,110	9,077,000	13,122,110
5	The portion of total contributions by						
Ŭ	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						237,558
6 Sooti	Public support. Subtract line 5 from line 4. on B. Total Support		- ·				12,884,552
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4		(0) 2011	1,525,000	2,520,110	9,077,000	13,122,110
8	Gross income from interest, dividends,			1,323,000	2,320,110		13,122,110
Ŭ	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						12 122 110
12	Gross receipts from related activities, etc	. (see instructi	ons)			12	13,122,110
13	First five years. If the Form 990 is for the	•	•				n 501(c)(3)
	organization, check this box and stop he	-			•		
Secti	on C. Computation of Public Support	rt Percentag	е				
14	Public support percentage for 2014 (line		•			14	%
15	Public support percentage from 2013 Sc					15	%
16a	331/3% support test-2014. If the organi						
Ŀ	box and stop here. The organization qua						
b	33 ¹ / ₃ % support test — 2013. If the organ check this box and stop here. The organ						or more, . ► □
17a	10%-facts-and-circumstances test-2						
	10% or more, and if the organization me						
	Part VI how the organization meets the "i			-	•	as a publicly s	· · · _
	organization			• • • • • •			• 🕨 🗌
b	10%-facts-and-circumstances test-2 15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization n						
	supported organization				-		. ► 📋
18	Private foundation. If the organization d					k this box and	
	instructions						

Schedule A (Form 990 or 990-EZ) 2014

SCHEDULE I (Form 990)		- 0	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990. Part IV, line 24 or 22	nd Other Assistance to Organizations, its, and Individuals in the United State conization answered "Yes" to Form 990. Part IV line 24 or	tance to Org uals in the U Yes" to Form 990.	anizations, Inited States	(a) S		0MB No 1545-0047
Department of the Treasury Internal Revenue Service		► Infor	 Attach to Form 990. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. 	► Attach to Form 990. dule I (Form 990) and its instru	Form 990. d its instructions is	s at www.irs.gov/fo	m990.		Open to Public Inspection
Name of the organization								Employer ide	Employer identification number
Edu	ject							2	20-2466871
Part General	Information	General Information on Grants and Assistance	Assistance						
1 Does the organ	nization mainta	Does the organization maintain records to substantiate the am	stantiate the amou	int of the grants or	assistance, the g	rantees' eligibility	iount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	sistance, and	
	riteria used to	the selection criteria used to award the grants or assistance?	or assistance?	•	•	• • •		• • •	Ves 🗌 No
Sel	It IV the organi	zation's procedur	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	the use of grant fu	nds in the United	States.			
Part II Grants a Part IV, I	and Other As line 21, for any	isistance to Do y recipient that	mestic Organiz received more th	ations and Dorn an \$5,000. Part	estic Governm Il can be duplic:	ents. Complete ated if additional	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ı answered	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete of the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	of organization	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	f ce	(h) Purpose of grant or assistance
(1) RJ Johnson Legal Defense Fund 3801 Kennett Pk C200 Greenville DE	Defense Fund Greenville DE	47-6333160		690.000	o	cash	PODP		lenal defense
(2) Center Rule of Law 10560	v 10560	COLOL8C OC	E01 23						
(3) MO Forward Foundation 5215 E	dation 5215 E	5010105-07	301 63	000'060			enou	dene	general support
Highway 163 Columbia MO 65201	MO 65201	46-4173555	501 c3	100,000	0	0 cash	none	gene	general support
(4) Chabad Housing Corporation 741 Gavley Ave Los Andeles 90024	Corporation	95.4341551	501 r.2	000.05		0 rach			
(5) Franklin Center 1229 King	29 King		2	F0/000		lices	2001		
St, FI 3, Alexandria VA 22314	22314	26-4066298	501 c3	100,000	0	0 cash	none	gene	general support
(6)									
۵ ا									
(8)									
(6)									
(10)									
(11)									
(12)		1							
2 Enter total num 3 Enter total num	ber of section ther org	501(c)(3) and gov ganizations listed	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	ions listed in the li	ne 1 table		· · · · · · · · · · · · · · · · · · ·		
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	on Act Notice, s	ee the Instructions	s for Form 990.		Cal	Cat No 50055P		ŭ	Schedule I (Form 990) (2014)

Schedule I (Fo	Schedule (Form 990) (2014) 2.0 – 2.4.6.6.8.7.1. Decarities of Cremies and Other Assistance to Domestic Individuals. Complete of the organization answered "Yes" to Form 990. Part IV June 22	/ / _ mestic Individua	als Complete if the		ared "Yes" to Form 990	Part IV line 22
	Part III can be duplicated if additional space is needed.	space is needed		טוטמווובמווטוו מווסש		, airiy, iiii 5 22.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	the information re	equired ın Part I, In	ie 2, Part III, column	(b), and any other additi	onal information.
Part I, Line	Part I, Line 2: Substantiation for all expenses is required to be submitted by the recipient organization prior to grant funds being authorized.	to be submitted by t	the recipient organizat	ion prior to grant funds	s being authorized.	
						Schedule I (Form 990) (2014)

SCHEDULE O (Form 990 or 990-EZ)	Supplemental Information to Form 990 or 990- Complete to provide information for responses to specific question		OMB No 1545-0047
(, , , , , , , , , , , , , , , , , , ,	Form 990 or 990-EZ or to provide any additional information.	3 011	2014
Department of the Treasury Internal Revenue Service	 Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www 	v.irs.gov/form990.	Open to Public Inspection
Name of the organization		Employer identific	ation number
Judicial Education Pro	ject	20-	2466871
Form 990, Part VI, Sect	ion B, Line 11: The Form 990 is prepared by a Certified Public Accountant. An o	fficer circulates a	copy of the Form 990
to the officers and dire	ctors for review and comments, It is signed and filed with the Internal Revenue	Service (IRS).	
Form 990, Part VI, Sect	ion B, Line 12: Each year, officers and directors are required to disclose any int	erests that could	give rise to any
conflicts of interest.			
Form 990, Part VI, Sect	tion B, Line 13: Whistleblower policy is being developed.		
Form 990, Part VI, Sec	tion B, Line 14: Document retention policy is being developed.		
Form 990, Part VI, Sect	tion B, Line 15: The compensation of the officer is determined approved annualy	by the Board. It	is based on
performance and the le	evels of compensation of similar organizations in the area.		
Form 990, Part VI, Sec	tion C, Line 19: The documents are available from the Organization in accordance	e with IRS guide	lines.
Form 990, Part IX, Line	11g: The composition of other non-employee services, in the total amount of \$	1,599,630 is publi	c relations \$1,117,748;
research \$304,220; pol	ling \$65,000; and administration \$112,662.		
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