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

▶ Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

`	For	the 2	015 cale	ndar year, or tax year begins	ning 07-01	, 2015, ar	paibae ba		-30	, 20_16		
}	Chec	k if e	eplicable.	C Name of organization Judicia	Crisis Network				D Employer	identification number		
]	Addı	ess c	henge	Doing business as						20-2303252		
\neg		e che	- 1	Number and street (or P.O. box	if mail is not delivered to s	weet address)	Rcom/surte	,	E Telephone			
_		i retu	-	722 12th Street, NW				ı Floor	•	71-247-3688		
٦.			rterm nated	City or town, state or province,	country and 7IP or former	costal code	rousa	1 11001	3	71-247-3000		
٠,					ooding, did all a loreigi	, puster oout				inter a management		
_			return	Washington, DC 20005 F Name and address of principal					G Gross rece			
	∧£bi	canc	a pending							xc±mates? ☐ Yes ☑ No		
				722 12th Floor, NW, Fourth						nctuded? Yes No		
_			eulsta fa	· · · · · · · · · · · · · · · · · · ·	1(c) (4) 4 (insert no.) LJ 4947(z)(1) or	527	⊣ i		st. (see instructions)		
<u>;</u> К	_	sito:		cialnetwork.com					exemption n			
_					ssociation Other ≻	LYes	ar of formable	วก: 2004	M State o	l legal domicile: VA		
- [-	265		Sumn									
m	1			escribe the organization's								
promote the vision of liberty and justice in America, dedicated to the rule of law, with a fair and impartial judiciary, and to and organize citizens in this mission. Check this box > if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a)												
2	١.			<u>nise citizens in this mission</u>								
Š	2			nis box > 🗌 if the organiza			isposed o	f more tha	ın 25,% of it	s net assets.		
ŭ	;			of voting members of the					. 3	2		
≪i জ	'	4	Number	of independent voting me	mbers of the governi	ng body (Part VI	l, line 1b)		. 4	2		
Ę	j	5	Total nu	mber of individuals employ	yed in calendar year :	2015 (Part V, lin	e 2a) .		. 5			
Š	1	6	Total nu	mber of volunteers (estima	ate if necessary) .				. 6			
٤	1	7a	Total un	related business revenue t	rom Part VIII, column	(C), line 12 .			. 7a			
		b	Net unn	elated business taxable inc	ome from Form 990-	T, line 34			. 7b	-		
								Prior	Year	Current Year		
Revenue		8	Contrib	utions and grants (Part VIII	5,700,000	18,545,000						
		9	Program	n service revenue (Part VIII	line 2a)							
	1	0		ent income (Part VIII, colu					 [
	1	11		evenue (Part VIII, column (/								
	- 1 -	12		venue-add lines 8 through		•	· · · · · · · · · · · · · · · · · · ·		5,700,000	18,545,000		
	ή.	13		and similar amounts paid					4,570,500	8,455,500		
	.	14										
	١.	15		s paid to or for members () s, other compensation, emp			s 5-10)		52,250	0		
Č		16a		sional fundraising fees (Par			33 .0,		32,230			
3	5	D.		Indraising expenses (Part I		•	· 1	- 44 524 447 4 62		the second second		
ú	3	17						_ د د د د	 			
	- 1	18		expenses (Part IX, column expenses, Add lines 13-17			5 1 1		1,048,091 5,670,841	10.022,956		
		19				יייייייייייייייייייייייייייייייייייייי	101					
-	i -	(=	neven	ue less expenses. Subtrac			· S	Beninning n	29,159 Current Year	66,544 End of Year		
ě	ğ	60	Taval -	and Ord V San 18	181 MA	Y 22 2017		209,5111.29		 		
Ş	32	20 21		ssets (Part X, line 16) . abilities (Part X, line 26) .	1 (3)		· SE	ļ	39,286	105,830		
3	i El	22		, , , , , , , , , , , , , , , , , , , ,		500-0-0-0-0-0	ا - سي		40.655	*************		
_	<u> </u>			sets or fund balances. Sub nature Block	ovaci ine 21 mon ini	3720		1	39,286	105,830		
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-				ype or pant name and title	(/							
į	Pai	d	Prn	VType preparer's name	Preparer's signal	ire	ا مار	Date 05-68-	Check	T a PTIN		
		epa:	rer T.R	aymond Conlon, CPA	471665142	rd linker in	111	12-08-		nployed P01486002		
		e Q		n's name > Conion and As	sociates, LLC /				Fim's EIN >			
				n's eddress ⊁ PO Box 6213, 5					Phone no.	. 301-598-6851		
	May	/ the	IRS disc	cuss this return with the pr	eparer shown above	(see instruction	ns)	<u> </u>	<u> </u>	Yes 🛮 No		
	For	Papa	rwork R	eduction Act Notice, see the	separate instructions	•	Cat	L No. 11282Y	•	Form 990 (2015)		

Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission.
	The mission of the Judicial Crisis Network is to promote the vision of liberty and justice in America, dedicated to the rule of law,
	with a fair and impartial judiciary, and to educate and organize citizens in this mission.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
-	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 18,311,885 including grants of \$ 8,455,500) (Revenue \$)
	During the fiscal year ended June 30, 2016, the Judicial Crisis Network (Organization) produced radio and television advertisements
	regarding significant legal issues, including the United States Supreme Court vacancy. The Organization conducted media and
	public presentations covering the significance of the United States Supreme Court for the upcoming election, the vacancy on the
	Court, major United States Supreme Court cases throughout the Court's term, and previews of the upcoming term. United States
	Supreme Court cases which were discussed included: Fisher v. Texas, Little Sisters of the Poor, Friedrichs v. California Teachers'
	Association, United States v. Texas, and Whole Women's Health v. Hellerstadt.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
40	(Code:) (Experience #
4.7	Other was grown and item (Deposition to Schodule O.)
40	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 18,311,885
	TOTAL PLOGICALLI SCIVICE CYDCHSCS F 10/311/003

Part I	V Checklist of Required Schedules			
	I- 45 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		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		✓
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2_	✓	
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? <i>If "Yes," complete Schedule C, Part II</i>	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? If "Yes," complete Schedule C, Part III	5		✓
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		1
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		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? If "Yes," complete Schedule D, Part IV	9		1
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, VIII, VIII, IX, or X as applicable.			1.
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? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	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 the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	11f		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	†	1
14 a		14a		1
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? If "Yes," complete Schedule G, Part I (see instructions)	17		1
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	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

Part	V Checklist of Required Schedules (continued)	_		
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓_
21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	İ
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21		
_	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			r –
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a			1
h	through 24d and complete Schedule K. If "No," go to line 25a	24a 24b		-
	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	240		
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓_
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?	ļ		
	If "Yes," complete Schedule L, Part 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	230		<u> </u>
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		✓
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			
20	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		laure di
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			<u> </u>
	Schedule L, Part IV	28b		✓
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			١.
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		/
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29	<u> </u>	 √
00	conservation contributions? If "Yes," complete Schedule M	30	Ì	1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	55		<u> </u>
	Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
20	complete Schedule N, Part II	32	ļ	✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33	\vdash	+
- •	or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		V
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
00	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b	<u> </u>	
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	26		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	1		
	Part VI	37	1	1
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	√	<u></u>
		For	m 99 (0 (2015)

Form 90	20-2303252			Page 5
Part	<u> </u>			rage J
T CIT	Check if Schedule O contains a response or note to any line in this Part V	_		П
	Check it Contours a responde of flote to any line in the fact v	• •	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 7	•		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	✓	
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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		L
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
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.	3Ь		<u> </u>
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			1
	account)?	4a		1
b	15 HV a 2 and a the game of the ferring according	40		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
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	✓	
Ь	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).			i
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		╁
c	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?	7е		
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		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	<u> </u>	ļ
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		ļ. <u>. </u>	-
9	sponsoring organization have excess business holdings at any time during the year?	8	.	 -
a	Sponsoring organizations maintaining donor advised funds. 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	1	+
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			
40	against amounts due or received from them.)		ļ	-
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	 	┼
b 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	┨.		
ıs a	Is the organization licensed to issue qualified health plans in more than one state?	13a	+-	+
-	Note. See the instructions for additional information the organization must report on Schedule O.		1	+
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans		1	
С	Enter the amount of reserves on hand	L		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.										
	Check if Schedule O contains a response or note to any line in this Part VI										
Section	on A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 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.										
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		✓_							
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		✓							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓_							
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓							
6	Did the organization have members or stockholders?	6		✓_							
7a	, and a second of the second o										
	one or more members of the governing body?	7a		✓							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	76		,							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	7b		✓							
•	the year by the following:										
а	The governing body?	8a	✓								
b	Each committee with authority to act on behalf of the governing body?	8b	<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		✓							
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)								
		<u> </u>	Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓_							
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,										
11a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	,	<u> </u>							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	V	·····							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		 							
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	,									
	describe in Schedule O how this was done	12c									
13	Did the organization have a written whistleblower policy?	13		1							
14	Did the organization have a written document retention and destruction policy?	14	✓								
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		✓							
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		ļ	لب							
_	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a	<u> </u>	/							
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	١.									
	organization's exempt status with respect to such arrangements?	16b		ļ ^j							
Secti	on C. Disclosure	,		<u> </u>							
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	501	(c)(3)s	only)							
	available for public inspection. Indicate how you made these available. Check all that apply.		-	.,							
	☐ Own website ☐ Another's website ☑ 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 int	erest	polic	y, and							
00	financial statements available to the public during the tax year.										
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	: ▶								
	Daniel Casey, Judicial Crisis Network, 722 12th Street, NW, 4th Floor, Washington, DC 20005, (571) 247-3688										

			_					
Part VII	Compensation of Officers,	Directore	Truetage	Kay Employees	Highaet	Companyated	Employees	and
	Compensation of Cincers,	Directors,	nusices,	itey Lilipioyees,	Highest	Compensacea	Employees,	uii
	Independent Contractors							

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	d orga	aniz			mpe	nsa	ted any curren	t officer, director	r, or trustee
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	x, ce Individual or direct	ınles	s pe	tion more	n orth the borktrust Highest compensated the properties of the pro	an ee) Forme	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation ffom the organization and related organizations
(1) Gary Marx Secretary, Treasurer, Director	5	√	•	√		ed		0	0	C
(2) Daniel Casey President, Director	5	1		1				o	0	
(3)		Ť		Ť				0	•	
(4)								<u> </u>		
(5)		1								
(6)										
(7)										
(8)										
(9)										
(10)										
(11)	 									
(12)	-									
(13)	-					-				
(14)						-				

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
			_ (0	•										
	(A)	(B)	(do n	ot ch	Pos neck		than c	one	(D)	(E)	(F)			
	Name and title	Average	box, ı	unles	s pe	rson	ıs both	an	Reportable	Reportable			nated unt of	
		hours per week (list any				_	or/trust	·	compensation from	compensation trelated	TOTAL		ner	
		hours for related	Individual trustee or director	Institutional trustee	Officer	Key	Highest compensated employee	Former	the organization	organization (W-2/1099-Mil		compe	nsatior the	1
		organizations	recto	盲	E	employee	est c	편	(W-2/1099-MISC)	(44-5) 1033-1411	30,	organ	ızatıon	
		below dotted line)	2 5	nal t		loye) in the						elated zations	
		iii ie,	stee	T St		Ō	bens					organ	Zations	'
			"	8			ated							
(15)	*			_				-						
		†		ļ										
(16)														
(17)														
						L.		L						
(18)		<u> </u>												
					L	<u> </u>		L						
(19)						1								
							<u> </u>				$-\!\!\!\!+\!\!\!\!\!-$			
(20)		ļ	1						İ					
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(21)		 			l									
(22)				-	├	├		\vdash						
(22)		 	1		ļ	İ								
(23)				-	\vdash	-		╁╌						
3		 	1											
(24)					\vdash		<u> </u>	 		 				
37.22		 	1											
(25)			<u> </u>	1		†								
<i>-</i>		†												
1b	Sub-total								0		0			0
С	Total from continuation sheets to Part	-						▶						
d	Total (add lines 1b and 1c)							<u> </u>	o		0			0
2	Total number of individuals (including bu			nose	e lis	ted	abov	e) v	who received m	ore than \$10	00,000	of		
	reportable compensation from the organ	ization ► 0												
_	Del Maria de la Companya del Companya de la Companya del Companya de la Companya	ee:					1					· · · · ·	Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete											3	-	
4	•											3		
4	For any individual listed on line 1a, is the organization and related organizations											,		ļ
								,,	· · · · · ·			4		1
5	Did any person listed on line 1a receive							v ui	nrelated organi	zation or ind	ividual			<u>, , , , , , , , , , , , , , , , , , , </u>
•	for services rendered to the organization											5		1
Section	on B. Independent Contractors													
1	Complete this table for your five highest	compensa	ted in	dep	enc	lent	conti	rac	tors that receiv	ed more that	n \$100	,000 of		
	compensation from the organization. Re													ax
	year.													
	(A)								(B)			(C)		
	Name and business ad	dress						\downarrow	Description of	services		Compens	ation	
Mentz	er Media, 210 W Pennsylvania Avenue, Tows	on MD, 212	04					ac	dvertising & pro	motion			2,4	75,000
crc Pu	blic Relations, 2850 Eisenhower Avenue, Al	exandria VA	, 223	14				ρι	ublic relations				1,4	<u>38,439</u>
Sandle	er Innocenzi, 705 Prince Street, Alexandria V	A, 22314						_	dvertising & pro					08,364
	rs Group, 1819 Polk Street, #373, San Franci		109					$\overline{}$	dvertising & pro					21,797
	ve Direct, 25 E Main Street, Richmond, VA, 2		na L			lies-!	404 4		dvertising & pro				5	28,744
2	Total number of independent contract received more than \$100,000 of compensations.							υI		ove) who		\$75		
	Toccived inote that wide, dod of compens	Sauci II OIII	4100	, yai	11LQ		-		17			7		

Form **990** (2015)

Part	VIII	Statement of Revenue						
		Check if Schedule O contains	a response or	note to	any line in this			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts	1a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
Ğ Š	С	Fundraising events	1c					
業を	d	Related organizations	1d					
°, ≅	е	Government grants (contributions)	1e					
Sign	f	All other contributions, gifts, grants,						
he but		and similar amounts not included above	1f 18.5	45,000	ł		İ	
호텔	g	Noncash contributions included in lines 1a-			1			1
Contributions, Gifts, Grants and Other Similar Amounts		Total. Add lines 1a-1f		. ▶	18,545,000]	
			Business	Code				
Program Service Revenue	2a							
	b		i					
္ခ်	С							
Serv	d							
Ĕ	е		ľ					
gra	f	All other program service revenu						
Pro	g	Total. Add lines 2a-2f		. ▶				1
	3	Investment income (including						
		and other similar amounts) .		. ▶				
	4	Income from investment of tax-exe	mpt bond procee	eds▶				
	5	Royalties	· · · · · · · · · · · · · · · · · · ·	. ▶				
		(ı) Real	(ıı) Pers	onal	ļ			. :
	6a	Gross rents						
	b	Less: rental expenses			1			
	С	Rental income or (loss)						
	d	Net rental income or (loss) .		. ▶		<u>. </u>		
	7a	Gross amount from sales of (i) Securit	ies (ii) Oti	ner				
		assets other than inventory						
	b	Less' cost or other basis			-		•	
		and sales expenses .			<u> </u>			
	C	Gain or (loss)						-
	d	Net gain or (loss)	· · <u>- · · ·</u>	. ▶				
enne	8a	Gross income from fundraising						
ě.		events (not including \$					1	
Other Rev		of contributions reported on line 1						
亨		See Part IV, line 18						
ō		Less: direct expenses						
		Net income or (loss) from fundra		. ▶		<u> </u>		-
	ya	Gross income from gaming active See Part IV, line 19						İ
	١.							
	b	Less: direct expenses Net income or (loss) from gamır		. •				
	100	Gross sales of inventory,		<u> </u>				
	IUa	returns and allowances						
	L	Less: cost of goods sold						
	b	Net income or (loss) from sales						
	- د	Miscellaneous Revenue	Busines				+	
	11a						1	
	b							
	C							· · · · · · · · · · · · · · · · · · ·
	ď	All other revenue	·				1	<u> </u>
	e	Total. Add lines 11a-11d		. ▶			1	
	142	Total revenue See instructions			10.545.000	 	1	

	Statement of Functional Expenses	-,, ,,			(4)
ectio	n 501(c)(3) and 501(c)(4) organizations must com				
	Check If Schedule O contains a response include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	8,455,500	expenses 8,455,500	general expenses	expenses
2	Grants and other assistance to domestic individuals. See Part IV, line 22	97.337,233			
3	Grants and other assistance to foreign 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				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages				
9 10 11 a	Other employee benefits				
b	Legal	93,691	0	93,691	
C	Accounting	44,500	0	44,500	0
d	Lobbying				· · · · · · · · · · · · · · · · · · ·
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
10	Advertising and promotion	3,325,293	3,325,293	0	<u>C</u>
12 13	Office expenses	6,456,388 12,505	6,456,388 0	12,505	
14	Information technology	37,461	37,461	0	
15	Royalties	077107			
16	Occupancy	10,752	0	10,752	(
17	Travel	37,243	37,243	0	
18	Payments of travel or entertainment expenses			j	
	for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings . Interest				
21	Interest				
22	Depreciation, depletion, and amortization .				
23	Insurance	5,123	0	5,123	
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.)				
a					
b					
d			-		
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	18,478,456	18,311,885	166,571	
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 following SOP 98-2 (ASC 958-720)				

Form **990** (2015)

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X . (B) Beginning of year End of year 39,286 1 105,830 2 2 Savings and temporary cash investments 3 3 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 **Assets** 7 8 Prepaid expenses and deferred charges . . . 9 10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 10c b investments—publicly traded securities 11 11 12 Investments—other securities. See Part IV, line 11 . . 12 13 Investments—program-related, See Part IV, line 11 . . . 13 14 14 15 15 Other assets. See Part IV, line 11 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 39,286 105,830 17 17 18 18 19 19 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 26 26 0 Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 39,286 105,830 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 Net Assets 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 32 Retained earnings, endowment, accumulated income, or other funds . 33 33 39,286 105,830 34 Total liabilities and net assets/fund balances 39,286 105,830

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		_18,5	<u>45,000</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		18,4	78,45 <u>6</u>
3	Revenue less expenses. Subtract line 2 from line 1	3_			66,54 <u>4</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			39,286
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6_			
7	Investment expenses	7_			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
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	<u>05,830</u>
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII			_	, Ц
				Yes	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	plain	ın		
	Schedule O.			-	اا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	· ·.	. 2a		✓ ,
	If "Yes," check a box below to indicate whether the financial statements for the year were com	olled	or	1	
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			_	لـــِــا
b	Were the organization's financial statements audited by an independent accountant?		. 2b	<u> </u>	↓ ✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ea on	a	, ' .	
	separate basis, consolidated basis, or both:			1. 5	
	Separate basis Consolidated basis Both consolidated and separate basis				-
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o				
	of the audit, review, or compilation of its financial statements and selection of an independent accounts to the second selection of an independent accounts.			-	
	If the organization changed either its oversight process or selection process during the tax year, ex	piain	in		
	Schedule O.	المرسلا	<u> </u>		
3a		torth		-	
	the Single Audit Act and OMB Circular A-133?	•	. 38	<u>!</u>	↓ ✓
b		ergo t	ne		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	uuiis.			0 (2015

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

- Section 501(c)(3) organizations: Complete Parts I-A and B Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

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

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

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

• Se	ection 501(c)(4), (5), or (6) organ	nizations, Complete Part III.			
	of organization	Employer iden	ntification number		
Judici	al Crisis Network	:	20-2303252		
Part	I-A Complete if the	organization is exempt unde	er section 501(c) or is a section 527 o	rganization.
1 2 3	•	ne organization's direct and indirect	•	•	· 2,119,000 0
Part	<u> </u>	organization is exempt unde		 	
1 2 3 4a b	Enter the amount of any of the organization incurre Was a correction made? If "Yes," describe in Part		managers under s m 4720 for this ye	section 4955 ▶ \$ ar?	Yes No
Part	I-C Complete if the	organization is exempt unde	er section 501(c), except section 501	c)(3).
1 2	Enter the amount directl activities Enter the amount of the	y expended by the filing organized in the second organized in the second organization's funds contributed in the second organization's funds contributed in the second organization or the second organization or the second	ation for section and the section and the section at the section a	527 exempt function ▶ \$ anizations for section	0
	527 exempt function activ				2,119,000
3 4 5	line 17b	expenditures. Add lines 1 and 2. file Form 1120-POL for this year? ses and employer identification nurents. For each organization listed, entributions received that were profund or a political action committee.	nber (EIN) of all senter the amount property and directly	ection 527 political organical from the filing organical delivered to a separate p	zations to which the filing zation's funds. Also enter olitical organization, such
	(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-
(1) N	orthern VA Victory Fund	PO 26141 Alexandria VA 22313	81-1416568	24,500	0
(2) R	epublican Attorneys General Association	1747 Pennsylvania Avenue NW Suite 800, Washington DC 20006	46-4501717	1,245,000	0
	epublican State Leadership committee	1201 F Street NW Suite 675 Washington DC 20004	05-0532524	325,000	0
(4) Republican Governors Assocation		1747 Pennsylvania Avenue NW Suite 250, Washington DC 20006	11-3655877	500,000	0
(5) _V	Vhitbeck for Chairman	115 E Grace Street Richmond, Virginia	81-1414075	24,500	0
(6)					

Pa	rt II-A Complete if the organization section 501(h)).	is exempt u	nder section 50	1(c)(3) and file	d Form 5768 (elec	ction under		
	Check ► ☐ If the filing organization belo name, address, EIN, expens	es, and shar	e of excess lobb	ying expenditu	res).	up member's		
В	Check ▶ ☐ if the filing organization chec	ked box A a	and "limited cont	rol" provisions a	apply.	_		
	Limits on Lobbyi	ing Expenditu	ıres		(a) Filing	(b) Affiliated		
	(The term "expenditures" mea	ins amounts	paid or incurred.)		organization's totals	group totals		
1	a Total lobbying expenditures to influence p	ublic opinion	(grass roots lobby	ing)				
	b Total lobbying expenditures to influence a							
	c Total lobbying expenditures (add lines 1a	-	• •					
	d Other exempt purpose expenditures	•						
	e Total exempt purpose expenditures (add I							
	f Lobbying nontaxable amount. Enter th							
	columns.		-	,	1			
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amount	is:				
	Not over \$500,000		nount on line 1e					
	Over \$500,000 but not over \$1,000,000		15% of the excess	over \$500,000				
			10% of the excess					
	Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000		5% of the excess of					
		ver \$1,500,000.	i					
_	g Grassroots nontaxable amount (enter 25%	\$1,000,000			+			
	<u> </u>							
	h Subtract line 1g from line 1a. If zero or les							
	i Subtract line 1f from line 1c. If zero or less	ero or less, enter -0						
	reporting section 4911 tax for this year?		☐ Yes ☐ No					
	•		Period Under sec					
	(Some organizations that made a sect	ion 501(h) ek	ection do not hav ructions for lines	e to complete al	l of the five columr	ns below.		
_	Lobbying I	Expenditures	During 4-Year A	veraging Period	1			
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total		
-	2a Lobbying nontaxable amount							
	b Lobbying ceiling amount (150% of line 2a, column (e))					<u></u>		
	c Total lobbying expenditures	_						
	d Grassroots nontaxable amount							
	e Grassroots ceiling amount (150% of line 2d, column (e))							
	f Grassroots lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2015

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).						
For e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(;	3)		(b)	
	iption of the lobbying activity.	Yes	No	An	nount	
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:			•		
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	ļ				
c d	Media advertisements?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	-	-			
!	Other activities?		<u> </u>	ļ		
j 2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
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?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	;)(5),	or se	ction		
			•		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?			3		
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes.")(3),)R (b) Par	t III-A,	line 3,	, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).					
а	Current year		2a	<u> </u>		
b	Carryover from last year		2b	<u> </u>		
C	Total		2c	<u> </u>		
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of	f the	3			
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobband political expenditure part year?			· ·		
5	and political expenditure next year?		5		-	_
	t IV Supplemental Information	· :_				
Provid	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grantstructions); and Part II-B, line 1. Also, complete this part for any additional information.	oup li	st), Pa	ırt II-A,	ines 1	and
•	A Line of English and Continue Services Services and Continue and Cont					
raiti	A, Line 1: Funds were provided for Section 527 exempt function activities.					
					-	
						

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

► Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Employer identification number

Judicial Crisis Network							20-2303252	
Part I General Information on Grants and Assistance								
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and								
the selection criteria used to	•						· · 🗹 Yes 🗌 No	
2 Describe in Part IV the organi		<u> </u>						
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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	(b) 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	(h) Purpose of grant or assistance	
(1) American Democracy Alliance								
1100 Main St. Kansas City MO 64105	26-0623149	501c4	25,000	0	n/a	n/a	general support	
(2) Arizona Public Integrity Alliance								
PO 30111 Meza AZ 85275	46-0793813	501c4	1,245,000	0	n/a	n/a	general support	
(3) Concerned Women for America			J J					
1015 15th St. NW, Washington, DC	95-3580834	501c4	50,000	0	n/a	n/a	general support	
(4) Faith Freedom Coalition								
PO 957736 Duluth GA 30095	27-0182697	501c4	375,000	0	n/a	n/a	general support	
(5) Job Creators Network Fdn					'			
15455 N Dallas Pky #600 Addison TX	27-3638207	501c3	100,000	0	n/a	n/a	general support	
(6) Morning in Nevada								
PO 97212 Las Vegas NV 89193	47-4169138	501c4	50,000	0	n/a	n/a	general support	
(7) Nebraskans for Death Penalty					}		1	
1327 H St. No. 302, Lincoln NE 68508	47-4142025	501c4	300,000	0	n/a	n/a	general support	
(8) North Carolina Chamber Comme							1	
701 Corporate Dr No. 400 Raleigh NC	56-0340499	501c6	200,000	0	n/a	n/a	general support	
(9) Northern Virginia Victory Fund								
PO 26141 Alexandria VA 22313	81-1416568	527	24,500	0	n/a	n/a	general support	
(10) Republican Attorney Gen Assoc								
1747 Pennsylvania Ave NW #800 DC	46-4501717	527	1,245,000	0	n/a	n/a	general support	
(11) Republican Governors Assoc								
1747 Pennsylvania Ave NW #250 DC	11-3655877	527	500,000	0	n/a	n/a	general support	
(12) Republican State Leadership Co								
1201 F St NW #675 Wash DC 20004	05-0532524	527	325,000		n/a	n/a	general support	
2 Enter total number of section				ne 1 table	· · · · · ·			
3 Enter total number of other or	ganizations listed	in the line 1 table	<u> </u>	<u> </u>	<u> </u>	<u> </u>	. ▶ 17	

	(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
1						
2						
3						
4						
5						
6						
7						
art IV	Supplemental Information. Pro-	vide the information re	equired in Part I, li	ne 2, Part III, colum	n (b), and any other addition	onal information.
cipient er						
	Defense Fund, 1747 Pennsylvania Aver	nue., NW, Suite 800, Wash	ington DC, 20006; 46	i-5130903; 501c4; \$350,(000; \$0; n/a; n/a; general supp	ort
ate Gove	nment Leadership Foundation. 1201 F S	treet, NW, Suite 675, Was	hington, DC 20004;	20-0505849; 501c4; \$50	0,000; \$0; n/a; n/a; general sup	port
ea Party P	atriots, 1025 Rose Creek Drive, Suite 620), Woodstock, GA 30189;	27-4065390; 501c4, \$	1,686,500; \$ 0; n/a; n/a;	general support	
irginia Firs	st Foundation, 9702 Gayton Road, Suite	308, Richmond, VA 23238	; 47-3310537; 501c4;	\$90,000; \$0; n/a; n/a; g		
	r Chairman, 115 E Grace Stret, Richmon					
	Alliance for Reform, PO Box 1423, Madis					
	mante of Releasing to Dox 1429, Middle	<u>,</u>	,	and, i.e., goliolai suppoi	:3	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 2015

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

Judicial Crisis Network	20-2303252				
Form 990, Part VI, Section B, Line 11b: The Form 990 is prepared by a Certified Public Accountant, and reviewed by ouside legal counsel					
before it is filed Officers and directors also review the document before filing with the Internal Revenu	e Service.				
Form 990, Part VI, Section B, Line 12: The Organization is updating its written Conflict of Interest Police	y. Officers and directors are required				
to report interests that could give rise to conflicts.					
Form 990, Part VI, Section B, Line 15: There is no compensation for officers and directors, There are no	o employees.				
Form 990, Part VI, Section C, Line 19: The articles of incorporation are available from the Virginia State	Corporation Commission, and as an				
attachment to the Form 1024. Other governing documents are not available to the public.					
Form 990, Part IX, Line 11g: Fees for Services (Non-Employees) Other: Public Relations \$1,438,439; Po	illing \$409,223; Research \$127,500;				
Writer \$2,000; Strategy \$627,313, Telephone Campaign \$313,011; Public Affairs \$166,883; Data Analysi	s \$213,000; Other \$27,924.				
Total: \$3,325,293					
	·				