			Extended to May 15, 2	018		_
	0	90	Return of Organization Exempt Fi	rom l	ncome Tax	OMB No. 1545-0047
Forr	n J	JU	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue (-		^{ns)} 2016
		of the Treasury	Do not enter social security numbers on this form as	-	-	Open to Public
-		enue Service	▶ Information about Form 990 and its instructions is a lar year, or tax year beginning JUL 1, 2016 and er		<u>s.gov/form990.</u> UN 30, 2017	Inspection
	heck if		forganization		D Employer identifie	
a a	pplicab	le:	rorganization			
X	Addre		unity Activism Law Alliance			
	Name Chang	ge Doing b	usiness as		46-5	386556
	Initial returr	Number		oom/suite	E Telephone numbe	
	Final returr termii	n_		380	312-	999-0056
	ated Amer	City or t	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	683,963.
	_returr]Appli		ago, IL 60602		H(a) Is this a group re	
	⊥tiòn pendi		nd address of principal officer:Lam Nguyen Ho as C above		for subordinates	
<u> </u>		empt status:		527	H(b) Are all subordinates in	list. (see instructions)
			calachicago.org		H(c) Group exemptio	
			X Corporation Trust Association Other ►	L Year		A State of legal domicile: IL
		Summary				•
e	1		be the organization's mission or most significant activities: ${ t help}$,	under	served comm	unities
anc		access	justice and pursue social change			
ern	2	Check this bo	x ▶ └── if the organization discontinued its operations or dispose	ed of more		
20 S						13
Activities & Governance			dependent voting members of the governing body (Part VI, line 1b)			13
ities			of individuals employed in calendar year 2016 (Part V, line 2a)			223
Stivi	6		of volunteers (estimate if necessary) d business revenue from Part VIII, column (C), line 12			0.
ĕ			business taxable income from Form 990-T, line 34			0.
					Prior Year	Current Year
Ð	8	Contributions	and grants (Part VIII, line 1h)		365,383.	552,901.
Revenue	9		ce revenue (Part VIII, line 2g)		0.	128,456.
Sev			come (Part VIII, column (A), lines 3, 4, and 7d)		957.	1,875.
			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	731.
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		366,340. 0.	683,963.
	13		milar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14		to or for members (Part IX, column (A), line 4)		211,044.	465,605.
Ises	15 16a	Professional f	r compensation, employee benefits (Part IX, column (A), lines 5-10)	·····	0.	<u>403,003</u>
Expenses	b	Total fundrais	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) \blacktriangleright 29,48	5.	•••	
Щ			es (Part IX, column (A), lines 11a-11d, 11f-24e)		34,538.	85,888.
	18		es. Add lines 13-17 (must equal Part IX, column (A), line 25)		245,582.	551,493.
	19	Revenue less	expenses. Subtract line 18 from line 12		120,758.	132,470.
Net Assets or Fund Balances				Be	ginning of Current Year	End of Year
sset Balai		Total assets (I			224,829.	365,440.
let A ind I	21		(Part X, line 26)		24,055. 200,774.	<u>12,196.</u> 353,244.
	22 1 1		fund balances. Subtract line 21 from line 20		200,//4.	
		-	I declare that I have examined this return, including accompanying schedules a	and statem	ents, and to the best of m	v knowledge and belief it is
			. Declaration of preparer (other than officer) is based on all information of whic			,

,		,	
Sign Here	Signature of officer Lam Nguyen Ho, Executi Type or print name and title	ve Director	Date
	Print/Type preparer's name	Preparer's signature	Date Check PTIN
Paid	Paul Betlinski		12/19/17 if P01960501
Preparer	Firm's name Desmond & Ahern,		Firm's EIN 36-3321958
Use Only	Firm's address 10827 S. Western		
	Chicago, IL 6064	3	Phone no. (773)779-4720
May the I	RS discuss this return with the preparer shown abo	ove? (see instructions)	X Yes No
			- 000 (con to

632001 11-11-16 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2016)

	990 (2016) Community Activism Law Alliance	46-538	86556	Page
Par	t III Statement of Program Service Accomplishments			
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>		Σ
1	Briefly describe the organization's mission: CALA uses its model, "community activism lawyering,"	' to unite	lawve	rg
	and activists to collaboratively help underserved co			
	justice and pursue social change. Through these part			~
	creates "community activism-law clinics" within and			
2	Did the organization undertake any significant program services during the year which were not listed or	n the		
	prior Form 990 or 990-EZ?		Yes	XN
	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 se	rvices?	∐ Yes	XN
	If "Yes," describe these changes on Schedule O.			
4	Describe the organization's program service accomplishments for each of its three largest program service section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of grants and allocations		•	
	revenue, if any, for each program service reported.		expenses,	anu
4a) (Revenue \$	129,	187
	The Organization offers free Legal Services to Low-1	Income Comm	uniti	es;
	Self-Advocacy Pro-Se Workshops (helping low-income i			
	their own legal applications);Community Legal Educat	ion and Tr	rainin	g to
	Low-Income Communities.			
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$		
		· · ·		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$		
		· · ·		
4d	Other program services (Describe in Schedule O.)			
4 u	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 450,654.		1	
			Form 9	90 (20
32002	2 11-11-16			
	2			
)1	219 402354 160768 2016.05010 Community Activi	sm Law All	i 1607	68.

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Form	990	(2016)	

 Form 990 (2016)
 Community Activism Law Alliance

 Part IV
 Checklist of Required Schedules

	· ·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
-	If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
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	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			37
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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,	110		x
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a		- 23
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		<u> </u>	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
D	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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			<u> </u>
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes, "			
	complete Schedule G. Part III	19		X

Form **990** (2016)

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Form	990	(2016)	

Part IV Checklist of Required Schedules (continued)

Community Activism Law Alliance

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
~ ~	Schedule J	23		X
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	04-		x
h	Schedule K. If "No", go to line 25a	24a 24b		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
С		24c		
Ь	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2 . 70		
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			37
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		x
31	contributions? <i>If "Yes," complete Schedule M</i> Did the organization liquidate, terminate, or dissolve and cease operations?	30		
31		31		x
32	It "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete			<u> </u>
02	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u>-</u> -
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form **990** (2016)

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Pa	t V	Statements Regarding Other IRS Filings and Tax Compliance					
		Check if Schedule O contains a response or note to any line in this Part V					
				-		Yes	No
1a	Enter 1	the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0			
		the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
с	Did the	e organization comply with backup withholding rules for reportable payments to vendors and r	eporta	able gaming			
	(gamb	ling) winnings to prize winners?			1c		
2a	Enter 1	the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed fo	or the calendar year ending with or within the year covered by this return	2a	10			
b	If at lea	ast one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b	X	
	Note.	If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions	s)				
3a	Did the	e organization have unrelated business gross income of \$1,000 or more during the year? \dots			3a		X
		s," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b		
4a		time during the calendar year, did the organization have an interest in, or a signature or other		-			
		ial account in a foreign country (such as a bank account, securities account, or other financial	accou	int)?	4a		X
b		s," enter the name of the foreign country: ►					
		structions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A					37
		ne organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
		y taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		X
		s," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a		the organization have annual gross receipts that are normally greater than \$100,000, and did the					v
	•	ontributions that were not tax deductible as charitable contributions?			6a		X
b		s," did the organization include with every solicitation an express statement that such contribu-		or gifts	C 1-		
7		not tax deductible?			6b		
7	-	izations that may receive deductible contributions under section 170(c). organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvicas I	provided to the payor?	7a		x
a h		s," did the organization notify the donor of the value of the goods or services provided?		biovided to the payor :	7a 7b		
с С		e organization sell, exchange, or otherwise dispose of tangible personal property for which it w	 195 rec	wired	10		
v		Form 8282?	43100	uicu	7c		x
Ь		s," indicate the number of Forms 8282 filed during the year	7d		10		
e		e organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	L	ct?	7e		Х
f		e organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		X
g		organization received a contribution of qualified intellectual property, did the organization file F			7g		
h		organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz			7h		
8		soring organizations maintaining donor advised funds. Did a donor advised fund maintained					
	spons	oring organization have excess business holdings at any time during the year?	-		8		
9	Spons	soring organizations maintaining donor advised funds.					
а	Did the	e sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the	e sponsoring organization make a distribution to a donor, donor advisor, or related person? \dots			9b		
10	Sectio	on 501(c)(7) organizations. Enter:					
а		on fees and capital contributions included on Part VIII, line 12	10a				
b	Gross	receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11		on 501(c)(12) organizations. Enter:					
		income from members or shareholders	11a				
b		income from other sources (Do not net amounts due or paid to other sources against					
		nts due or received from them.)	11b				
		on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	?	12a		
		s," enter the amount of tax-exempt interest received or accrued during the year	12b	l			
13		on 501(c)(29) qualified nonprofit health insurance issuers.			40		
а		organization licensed to issue qualified health plans in more than one state?			13a		
		See the instructions for additional information the organization must report on Schedule O.					
Ø		the amount of reserves the organization is required to maintain by the states in which the	10-	1			
-		zation is licensed to issue qualified health plans	13b				
С	Enter 1	the amount of reserves on hand	13c				

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

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

Х

Form **990** (2016)

14a 14b

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Form 990	
Part V	State

Community	Activism	Law	Alliance
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Form 990 (2016)

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

X

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

10	Enter the number of veting members of the accurring hady at the and of the tax year	1	13		Yes	
	Enter the number of voting members of the governing body at the end of the tax year	1a				I
						I
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.	16	13			I
	Enter the number of voting members included in line 1a, above, who are independent		<u> </u>			I
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship					ł
	officer, director, trustee, or key employee?			2		╉
	Did the organization delegate control over management duties customarily performed by or under			2		I
	of officers, directors, or trustees, or key employees to a management company or other person?			3		┨
	Did the organization make any significant changes to its governing documents since the prior Form			· ·		┨
	Did the organization become aware during the year of a significant diversion of the organization's a			5		┨
	Did the organization have members or stockholders?		····· -	6		┨
	Did the organization have members, stockholders, or other persons who had the power to elect 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				I
	persons other than the governing body?			7b		ļ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	ear by the following:				I
	The governing body?			8a	Х	ļ
b	Each committee with authority to act on behalf of the governing body?		[8b	Х	l
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re					ſ
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		
ect	tion B. Policies (This Section B requests information about policies not required by the Internal	Revenue Code.)				
					Yes	
0a	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, affiliates,	Г			ĺ
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		J
	Has the organization provided a complete copy of this Form 990 to all members of its governing bo			11a	Х	J
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	-	Γ			Ţ
			Г	12a	Х	J
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ri			12b	Х	I
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If		F			t
	in Schedule O how this was done			12c	х	I
	Did the organization have a written whistleblower policy?			13	Х	t
	Did the organization have a written document retention and destruction policy?			14	Х	t
	Did the process for determining compensation of the following persons include a review and appro		·····	-		t
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision					I
	The organization's CEO. Executive Director, or too management official			15a	х	I
	Other officers or key employees of the organization			15b		t
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		·····	.00		t
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang	ement with a				I
				16a		I
	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu		······ -	iua		+
						1
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org			164		l
	exempt status with respect to such arrangements?			16b		1
	tion C. Disclosure					
	List the states with which a copy of this Form 990 is required to be filed LL					
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	- 1 (Section 501(C)(3)s	s only) av	allab	ie	
		in in Schedule O)				
	Describe in Schedule O whether (and if so, how) the organization made its governing documents, or statements available to the public during the tax year.	conflict of interest pol	icy, and	financ	cial	
	State the name, address, and telephone number of the person who possesses the organization's b	books and records:	•			
	Lam Nguyen Ho - 773-888-1404					
						_
	17 N. State Street, Suite 1380, Chicago, IL 6060	2				

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

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

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

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

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

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

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

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

(A)	(B)		(C)		(D)	(E)	(F)			
Name and Title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week							. from the	from related	other
	(list any hours for	direct				_		organization	organizations (W-2/1099-MISC)	compensation from the
	related	ee or	stee			nsate		(W-2/1099-MISC)	(112) 1000 11100)	organization
	organizations	trust	al tru		yee	ompe				and related
	below	ndividual trustee or director	nstitutional trustee	er	Key employee	Highest compensated employee	ner			organizations
	line)	Indi	Inst	Officer	Key	High	For			
(1) Anthony Borich	2.50									•
President		X		Х				0.	0.	0.
(2) Thomas Lipsmeyer	2.50									-
Vice-President		х		х				0.	0.	0.
(3) Chirag Badlani	2.50									_
Treasurer		X		х				0.	0.	0.
(4) Serafina Ha	2.50									_
Secretary		х		Х				0.	0.	0.
(5) Ellen Craig	2.50									_
President-Emeritus		X		Х				0.	0.	0.
(6) Elizabeth Arumilli	1.50								_	_
Member		Х						0.	0.	0.
(7) Alexander Boni-Saenz	1.00									
Member		Х						0.	0.	0.
(8) Samuel Goldberg	1.50								_	_
Member		x						0.	0.	0.
(9) Samuel Heppell	1.00								_	_
Member		X						0.	0.	0.
(10) Monica Jimenez	1.00								_	_
Member		X						0.	0.	0.
(11) Lydia Sharp	1.50								_	_
Member		Х						0.	0.	0.
(12) Raymundo Valdez-Chavez	1.00								_	_
Member		Х						0.	0.	0.
(13) Matthew Simmons	1.00								_	_
Member		Х						0.	0.	0.
(14) Lam Nguyen Ho	60.00									
Executive Director				Х				28,750.	0.	5,368.
		l								
										- 000 (22.12)

632007 11-11-16

Form 990 (2016)

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	990 (2016) Community	/ Activ	isı	n I	Lav	v Z	A11	li	ance	46-53	386	556	Pa	age 8
Par	VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
	(A) (I Name and title Ave hour			not c , unle	Pos heck ss pe	more rson) than is bot pr/trus	h an	(D) Reportable compensation from	(E) Reportable compensatio from related	n	an	(F) stimate nount o other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS	s	com fr org and	pensation om the anization d relate anization	e ion ed
	Sub-total								28,750.		0.		5,30	
	Total from continuation sheets to Part VI Total (add lines 1b and 1c) Total number of individuals (including but n								0 • 28 , 750 • eceived more than \$100	.000 of reportab	0. 0. le		5,30	0. 68.
	compensation from the organization						,			, ,			Yes	0 No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s											3		x
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	ım of reportab),000? <i>If</i> "Yes,	le co " <i>co</i>	ompe mple	ensa ete S	atior Sche	n and e <i>dule</i>	d ot e <i>J f</i>	her compensation from for such individual	the organization		4		X
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	-				-			-			5		Х
Sec 1	ion B. Independent Contractors Complete this table for your five highest co	mpensated in	dene	ende	ent c	onti	racto	ors t	that received more than	\$100 000 of com	nens	ation f	irom	
	the organization. Report compensation for	-							n the organization's tax					
	(A) Name and business	address	N	ONE	3			_	(B) Description of s	ervices	C	(C compe	;) nsatior	<u>ו</u>
								_						
2	Total number of independent contractors (i \$100,000 of compensation from the organia	e e	iot li	mite	d to		se lis 0	stec	d above) who received n	nore than				
	· · · · · · · · · · · · · · · · · · ·	r.										Form	990 (2	2016)

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				ivism La	w Alliance		46-5386	556 Page 9
Pa	rt VII							
		Check if Schedule O cont	ains a response	or note to any lin	ie in this Part VIII … (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d f g	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines Total. Add lines 1a-1f	1b 1c 1d ions) 1e ts, and 1f .1a-1f: \$	552,901.	552,901.			
Program Service Revenue	2a b c d			Business Code 900099	128,456.	128,456.		
Proc	e f g	All other program service reve Total. Add lines 2a-2f		►	128,456.			
	3 4 5	Investment income (including other similar amounts) Income from investment of ta Royalties	x-exempt bond p	proceeds	1,875.			1,875.
	b c	Gross rents Less: rental expenses	(i) Real	(ii) Personal				
	7 a b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(i) Securities	(ii) Other				
		Gain or (loss) Net gain or (loss)						
Other Revenue		Gross income from fundraisin including \$ contributions reported on line Part IV, line 18	g events (not of 1c). See					
Othe	b	Less: direct expenses						
		Net income or (loss) from fund	-	····· •				
	b	Gross income from gaming ac Part IV, line 19 Less: direct expenses	a b					
	10 a b	Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold	returns a					
	С	Net income or (loss) from sale						
	11 a b		le	Business Code 900099	731.	731.		
	С							
	d				731.			
	е 12	Total. Add lines 11a-11d Total revenue. See instructions.			683,963.	129,187.	0.	1,875.
63200	9 11-1			F		-,		Form 990 (2016)

Part IX Statement of Functional Expenses

Community Activism Law Alliance

	hedule O contains a respons			(0)	
Do not include amounts rep 7b, 8b, 9b, and 10b of Part		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assista	nce to domestic organizations		·		·
and domestic governmer	nts. See Part IV, line 21				
2 Grants and other assis	stance to domestic				
individuals. See Part I	V, line 22				
3 Grants and other assis	stance to foreign				
	governments, and foreign				
	V, lines 15 and 16				
	members				
5 Compensation of curr		E0 110	24 071	11 624	11 604
trustees, and key emp		58,119.	34,871.	11,624.	11,624
6 Compensation not includ					
	er section $4958(f)(1)$ and				
persons described in sec		345,061.	298,002.	34,858.	12,201
	ges	J#J,001.	490,004.	54,050.	14,401
8 Pension plan accruals an	a contributions (include a) employer contributions)				
		23,212.	20,462.	2,189.	561
	fits	39,213.	32,494.	4,476.	2,243
11 Fees for services (non		55,215.	52,1910		2,215
·	-employees).				
		795.	795.		
		5,180.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5,180.	
d Lobbying		• , = • • •			
	services. See Part IV, line 17				
	ent fees				
	nt exceeds 10% of line 25,				
•	ine 11g expenses on Sch 0.)	12,779.	12,646.	88.	45
	otion	2,697.		2,697.	
		5,908.	4,895.	675.	338
	у				
16 Occupancy		20,048.	16,613.	2,288.	1,147
7 Tuessel		14,037.	14,037.		
18 Payments of travel or	entertainment expenses				
for any federal, state,	or local public officials				
19 Conferences, convent	tions, and meetings				
	n, and amortization	F 100	2 4 4 17	1 (50	
		5,183.	3,447.	1,659.	77
24 Other expenses. Itemize above. (List miscellaneou 24e amount exceeds 10% amount, list line 24e expension)	us expenses in line 24e. If line 6 of line 25, column (A)				
a Staff devel		7,116.	3,131.	3,985.	
b Clinic deve	-	6,284.	6,284.		
c Professiona		2,977.	2,977.		
d Miscellaneo		2,884.	_,	1,635.	1,249
e All other expenses		_,			_,
· -	es. Add lines 1 through 24e	551,493.	450,654.	71,354.	29,485
-	is line only if the organization				,
	bint costs from a combined				
	d fundraising solicitation.				
·	owing SOP 98-2 (ASC 958-720)				

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Form **990** (2016)

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	Community	Activism	Law	Alliance
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		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	676.
	2	Savings and temporary cash investments	224,829	• 2	290,176.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	69,940.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete	e		
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined u	nder		
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contril	outing		
		employers and sponsoring organizations of section 501(c)(9) voluntary			
Ω		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
₹	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	3,148
	10a	Land, buildings, and equipment: cost or 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			1,500
	16	Total assets. Add lines 1 through 15 (must equal line 34)	004 000		365,440
	17	Accounts payable and accrued expenses			11,551
	18	Grants payable and accrucic expenses		18	
	19	Deferred revenue		19	645
	20			20	010
	20 21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D		20	
	22	Loans and other payables to current and former officers, directors, truste		21	
Liabilities	22	key employees, highest compensated employees, and disqualified persor			
				22	
Ľ	00	Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24 05	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third	- 6		
		parties, and other liabilities not included on lines 17-24). Complete Part X			
	00	Schedule D	24,055	25 26	12,196
_	26	Total liabilities. Add lines 17 through 25		• 20	12,190
		Organizations that follow SFAS 117 (ASC 958), check here X	and		
š	07	complete lines 27 through 29, and lines 33 and 34.	200,774	07	332,007
au	27	Unrestricted net assets		+ +	21,237
Fund Balances	28	Temporarily restricted net assets		28	21,2J/
pur	29	Permanently restricted net assets		29	
Ĕ		Organizations that do not follow SFAS 117 (ASC 958), check here			
Net Assets or	00	and complete lines 30 through 34.		0.0	
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ļ	32	Retained earnings, endowment, accumulated income, or other funds		32	252 244
-	33	Total net assets or fund balances			353,244
	34	Total liabilities and net assets/fund balances		• 34	365,440 Form 990 (2016

Form 990 (2016)
Part X Balance Sheet

Form	990 (2016) Community Activism Law Alliance	46-	-5386556	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
				_	
1	Total revenue (must equal Part VIII, column (A), line 12)	1			63.
2	Total expenses (must equal Part IX, column (A), line 25)	2			93.
3	Revenue less expenses. Subtract line 2 from line 1	3			70.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	200),7	74.
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	20),0	00.
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	353	3,2	44.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis	,		
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?			Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit		
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	uired au	dit		1
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			000	L

Form **990** (2016)

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SCHEDULE A	
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(F	o	m	99	90	or	99	0-	ΕZ

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.

2016	-
Open to Public Inspection	

Employer identification number

OMB No. 1545-0047

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.

Name of the organization	
	Commi

		Comm	unity Acti	vism Law All	iance			4	6-5386556
Pa	rt I	Reason for Public	Charity Status (A	All organizations must co	omplete th	is part.) Se	e instruction	S.	
The o	organ	ization is not a private found	lation because it is: (For lines 1 through 12, c	heck only	one box.)			
1	Ľ	A church, convention of ch							
2		A school described in sect					~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
3	\square	A hospital or a cooperative		,			ii).		
4	\square	A medical research organiz)(iii). Enter	the hospital's name.
•		city, and state:		· · · · · · · · · · · · · · · · · · ·				K/ :	···- ·· [- ···· - · ·····- ,
5		An organization operated for	or the benefit of a co	llege or university owned	d or operat	ted by a d	overnmentalı	unit describ	ped in
-		section 170(b)(1)(A)(iv). (C							
6		A federal, state, or local go		nental unit described in s	section 17	70(b)(1)(A)	(v).		
7		An organization that norma	•				. ,	he general	public described in
•		section 170(b)(1)(A)(vi). (C			ioni a gov	orninorita		ne general	
8		A community trust describe			+ II)				
9	\square	An agricultural research org				ad in conii	unction with a	land-grant	college
3		or university or a non-land-				-		-	-
		university:	grant college of agric			name, or	y, and state of	The colleg	
10	X	An organization that norma		than 22 1/20/ of its our	nort from	oontributi	one member	hin food	and groop receipte from
10		activities related to its exen							
				• •	. ,				•
		income and unrelated busin		(less section 511 tax) in	om busine	sses acqu	lired by the or	gamzation	alter June 30, 1975.
		See section 509(a)(2). (Con		walk to toot for public or	faty Cas	a a a ti a n E(O(a)(4)		
11	H	An organization organized a			•				nurnanan of ana ar
12		An organization organized a		•				-	
		more publicly supported or	•						Jneck the box in
_		lines 12a through 12d that				-		-	
а		Type I. A supporting orga		-	•				
		the supported organization		• • • •	a majority (of the dire	ctors or truste	es of the s	supporting
		organization. You must o	-					()	
b		Type II. A supporting org	-				-		-
		control or management o			ame perso	ons that co	ontrol or mana	ige the sup	ported
		organization(s). You mus	-						
С		☐ Type III functionally integration						lly integrate	ed with,
	_	its supported organizatio							
d		☐ Type III non-functionally						-	
		that is not functionally int			-		-	d an attent	iveness
		requirement (see instruct	-	-					
е		☐ Check this box if the orga					а Туре I, Туре	II, Type III	
	- .	functionally integrated, or		nally integrated support	ing organi	zation.			
		er the number of supported o	•						
g		vide the following information i) Name of supported	(ii) EIN	d organization(s).	(iv) Is the orga	nization listed	(v) Amount of	monetary	(vi) Amount of other
	``	organization	(1) =	(described on lines 1-10	in your governi Yes	ng document? No	support (see in		support (see instructions)
		-		above (see instructions))	163				
Tota	l								

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 632021 09-21-16 Schedule A (Form 990 or 990-EZ) 2016 13

Schedule A (Form 990 or 990-EZ) 2016 Community Activism Law Alliance Part II Support Schedule for Organizations Described in Sections 170(b)(1)(

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Calendar year (of fiscal year beginning in) (g) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total (g) 2016 (g) 201 (g) 20	Se	ction A. Public Support						
membership fees received. (00 not include any 'unusual grants.') 2 2 Tax reverues levied for the organ- ization's benefit and either paid to or expended in its behalf 2 3 The value of services or facilities fumished by a governmental unit to the organization without charge 4 4 Total. Add lines 1 through 3 2 5 The portion of total contributions by such person (often than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 4 6 Public support. Some term is through 3 (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 7 Amounts from line 4 4 4 (a) 2015 (e) 2016 (f) Total 7 Amounts from line 4 4 4 (a) 2015 (e) 2016 (f) Total 8 Oross income from similar sources and income from similar sources and income from similar sources and income from similar sources and or sis from the sale of capital arsets ((sphalin in Part VI)) 12 12 12 Dross receipts from nelated taxiness activities, whether or not the business is regularly carried on securities loans, rents, royalties and income from similar sources 12 9 Net income from similar sources and or come partialed business activities, whether or not the business is regularly carried on securities loans, rents, royalties and or cas from the sale of capital acover partis the form 3	Cale	endar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
include any "unusual grants.") 2 2 Tax revenues levied for the organization in benefit and either paid to or expended on its behalf	1	Gifts, grants, contributions, and						
2 Tar verseruse lavied for the organization is benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Tatal. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 thrackeeds 2% of the amount shown on line 11, column (f) 6 Public support. Burster the strengther Section B. Total Support (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 7 Amounts from line 4 8 Gross income from interest, divided again or securities lower and the strengther or not the business activities, whether or not the business is regularly carried on 2015 (c) 1010 (c) 2016 (c) 20		membership fees received. (Do not						
tration's benefit and either paid to or expanded on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without change 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit to public) supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column () 6 Public support. Exceeded lines (through 3) 6 (f) Total Section B. Total Support Calledar year (of fisel year beginning in) 6 (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 6 Public support and the support of the organization interest, dividends, payments received on securities lossing end to the support of the organization orefers the the		include any "unusual grants.")						
ar expended on its behalf	2	Tax revenues levied for the organ-						
3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 Image: Comparison of the comparison of the organization included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Statustime 5 tem line 4 Image: Comparison of the comparison		ization's benefit and either paid to						
furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3		or expended on its behalf						
the organization without charge Image: the organization without charge 4 Total. Add lines 1 through 3 Image: through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Image: through 3 6 Public support. autreature 5 from line 4 Image: through 3 Image: through 3 8 Ection B. Total Support Image: through 3 Image: through 3 7 Amounts from line 4 Image: through 3 Image: through 3 8 Gross income from lines 4. Image: through 3 Image: through 3 9 Net income from similar sources and income from single and income from similar sources and i	3	The value of services or facilities						
4 Total. Add lines 1 through 3		furnished by a governmental unit to						
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		more, and if the organization meets th	ne "facts-and-circu	umstances" test, o	heck this box and	stop here. Explai	n in Part VI how t	he _
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		organization meets the "facts-and-circ	umstances" test.	The organization	qualifies as a pub	licly supported org	anization	
	18	Private foundation. If the organizatio	n did not check a	box on line 13, 16	6a, 16b, 17a, or 17	b, check this box	and see instruction	ons 🕨 🗔

Schedule A (Form 990 or 990-EZ) 2016

632022 09-21-16

Schedule A (Form 990 or 990-EZ) 2016 Community Activism Law Alliance Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support			-				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")			158,357.	365,383.	552,901.	1076641.	
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose					128,456.	128,456.	
3	Gross receipts from activities that							
	are not an unrelated trade or bus-							
	iness under section 513							
4	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
6	Total. Add lines 1 through 5			158,357.	365,383.	681,357.	1205097.	
	Amounts included on lines 1, 2, and							
	3 received from disgualified persons			135,000.	251,000.	278,500.	664,500.	
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.	
~	Add lines 7a and 7b			135,000.	251,000.	278,500.	664,500.	
	Public support. (Subtract line 7c from line 6.)					2,0,0000	540,597.	
	ction B. Total Support							
	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total	
	Amounts from line 6	(u) 2012	(0) 2010	158,357.	365,383.	681,357.	1205097.	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			161.	957.	1,875.	2,993.	
b	Unrelated business taxable income							
-	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
c	Add lines 10a and 10b			161.	957.	1,875.	2,993.	
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)					731.	731.	
13	Total support. (Add lines 9, 10c, 11, and 12.)			158,518.	366,340.	683,963.	1208821.	
	First five years. If the Form 990 is for	the organization's	s first, second, th	ird, fourth, or fifth ta	x year as a sectio	n 501(c)(3) organiz	ation,	
	check this box and stop here	-	·····		·····			
Sec	ction C. Computation of Publ	ic Support Pe	rcentage					
15	Public support percentage for 2016 (I	ine 8, column (f) d	ivided by line 13,	column (f))		15	%	
16	Public support percentage from 2015	Schedule A, Part	III, line 15			16	%	
Sec	ction D. Computation of Invest	stment Incom	e Percentage)				
17	Investment income percentage for 20	16 (line 10c, colur	nn (f) divided by l	ine 13, column (f))		17	%	
18	Investment income percentage from	2015 Schedule A,	Part III, line 17			18	%	
19a	19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not							
	more than 33 1/3%, check this box a						▶□	
b	33 1/3% support tests - 2015. If the						and	
	line 18 is not more than 33 1/3%, che							
20	Private foundation. If the organizatio	<u>n did not check</u> a	box on line 14, 19	<u>9a, or 19b, check</u> th	is box and see ins	structions	>	
	23 09-21-16					edule A (Form 990	or 990-EZ) 2016	
				15			-	

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Schedule A (Form 990 or 990 EZ) 2016 Community Activism Law Alliance 46-5386556 Page 4

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disgualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990 or 990-EZ) 2016

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Schedule A (Form 990 or 990-EZ) 2016 Community Activism Law Alliance Part IV Supporting Organizations (continued)

			Yes	No
44	Les the examination eccented a gift or contribution from any of the following persons?		165	NO
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? <i>If</i> "Yes" to a, b, or c, provide detail in Part VI .	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
с	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	:).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
63202	5 09-21-16 Schedule A (Form 9	90 or 99	90-EZ)	2016

Schedule A (Form 990 or 990-EZ) 2016 Community Activism Law Alliance

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 🔟 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All

other Type III non-functionally integrated supporting organizations must complete Sections A through E.

ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
Net short-term capital gain	1		
Recoveries of prior-year distributions	2		
Other gross income (see instructions)	3		
Add lines 1 through 3	4		
Depreciation and depletion	5		
Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
Other expenses (see instructions)	7		
Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
Average monthly value of securities	1a		
Average monthly cash balances	1b		
Fair market value of other non-exempt-use assets	1c		
Total (add lines 1a, 1b, and 1c)	1d		
Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
Acquisition indebtedness applicable to non-exempt-use assets	2		
Subtract line 2 from line 1d	3		
Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
Multiply line 5 by .035	6		
Recoveries of prior-year distributions	7		
Minimum Asset Amount (add line 7 to line 6)	8		
on C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, Column A)	1		
Enter 85% of line 1	2		
Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
Enter greater of line 2 or line 3	4		
Income tax imposed in prior year	5		
Distributable Amount. Subtract line 5 from line 4, unless subject to			
	6		
	Net short-term capital gain Recoveries of prior-year distributions Other gross income (see instructions) Add lines 1 through 3 Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) ion B - Minimum Asset Amount Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): Average monthly value of securities Average monthly value of securities Average monthly cash balances Fair market value of other non-exempt-use assets Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions) Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) ion C	Net short-term capital gain 1 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 Add lines 1 through 3 4 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 ion B - Minimum Asset Amount 8 Average monthly value of securities 1a Average monthly value of securities 1a Average monthly cash balances 1b Fair market value of other non-exempt-use assets 1c Total (add lines 1a, 1b, and 1c) 1d Discount claimed for blockage or other 13 factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 <	Net short term capital gain 1 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 Add lines 1 through 3 4 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 ion B - Minimum Asset Amount (A) Prior Year Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1 Average monthly value of securities 1a Average monthly cab balances 1b Fair market value of other non-exempt-use assets 1c Total (add lines 1a, 1b, and 1c) 1d Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions) 5 Multipy line 5 by .035 6 <tr< td=""></tr<>

instructions).

1

Schedule A (Form 990 or 990-EZ) 2016

632026 09-21-16

12501219 402354 160768

Schedule A (Form 990 or 990 EZ) 2016 Community Activism Law Alliance

Pa	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Sect	ion D - Distributions	Current Year		
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	IS		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	he organization is responsive	e	
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount		-	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
с	From 2013			
d	From 2014			
e	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
8	and 4c Breakdown of line 7:			
 	Excess from 2013			
-	Excess from 2013			
-	Excess from 2015			
-				
e	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

632027 09-21-16

Part VI	Supplemental		ity Activis		a 10. Dort II line 17.	46-5386556 Pa
	Part IV Section A	lines 1 2 3h 3c 4h	Ac 5a 6 9a 9b 9c 1	equired by Part II, lin	e 10; Part II, line 1/a	a or 17b; Part III, line 12; es 1 and 2; Part IV, Section C,
	line 1; Part IV, Section A,	tion D, lines 2 and 3;	Part IV, Section E, lines	1c, 2a, 2b, 3a, and	3b; Part V, line 1; Pa	rt V, Section B, line 1e; Part V
	Section D, lines 5,	6, and 8; and Part V,	Section E, lines 2, 5, a	nd 6. Also complete	this part for any add	itional information.
	(See instructions.)					
2028 09-21-	16				Schee	dule A (Form 990 or 990-EZ)
				20		
01219	402354 16	0768	2016.05010	Community	Activism	Law Alli 160768

Schedule of Contributors

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

Name of the organization

Organization type (abook ano):

OMB No.	1545-0047
00	10

2016

Employer identification number

Community	Activism	Law	Alliance
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Organization type (check of	Jiganization type (check one).					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

(d)

Type of contribution

46-5386556

Community Activism Law Alliance

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

 (a)
 (b)
 (c)

 No.
 Name, address, and ZIP + 4
 Total contributions

 1
 Lawyer's Trust Fund
 Image: Contribute of the state of t

1	Lawyer's Trust Fund		Person X		
	180 N. Stetson Avenue, Suite 820	\$7,500.	Payroll Noncash (Complete Part II for		
	Chicago, IL 60601		noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	Echoing Green Foundation	_	Person X Payroll		
	462 7th Avenue, 13th Floor	\$ 44,000.	Noncash (Complete Part II for		
	New York, NY 10018		noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3	Julian Grace Foundation		Person X Payroll		
	1700 Green Bay Road, Suite 202	<u> 163,500.</u>	Noncash (Complete Part II for		
	Highland Park, IL 60035		noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
4	Harvard Law School Venture Fund		Person X Payroll		
	Wasserstein Hall, Room 4039	\$ 40,000.	Noncash		
	Cambridge, MA 02138		(Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
5	Alphawood Foundation		Person X		
	2401 N. Halsted, Suite 210	\$60,000.	Payroll Noncash		
	Chicago, IL 60614		(Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
6	The Chicago Community Trust		Person X		
	225 N. Michigan Ave, Suite 2200	\$ <u>40,000.</u>	Payroll Noncash		
	Chicago, IL 60601		(Complete Part II for noncash contributions.)		
623452 10-1	8-16	Scheanle R (Form 3	90, 990-EZ, or 990-PF) (2016)		

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Name of organization

Employer identification number

46-5386556

Community Activism Law Alliance

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

 (a)
 (b)
 (c)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Lehman-Stamm Family Fund 101 Hamilton St Evanston, IL 60202	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	Skadden Arps Slade Meagher Foundation Four Times Square, 40th Floor New York, NY 10036	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	Walton Family Foundation PO Box 1860 Bentonville, AR 72712	\$11,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	Tides Foundation PO Box 29903 San Francisco, CA 94209	\$7,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	Anne and Andrew Abel Charitable Fund 211 Main Street San Francisco, CA 94105	\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	Flora Family Foundation 2121 Sand Hill Rd	\$5,000.	Person X Payroll Noncash (Complete Part II for
	<u>Menlo Park, CA 94025</u> 8-16	Schedule B /Form	noncash contributions.) 990, 990-EZ, or 990-PF) (2016)

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23 Community

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Employer identification number

Person Payroll

(d)

Type of contribution

X

46-5386556

Community Activism Law Alliance

	20 W. Kinzie, Suite III0	\$ 25,000.	Noncasn
			(Complete Part II for
	Chicago, IL 60654		noncash contributions.)
(a)	(b)	(c)	(d)
(a) No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	, ,		
14	Fred Eyancher		Person X
			Payroll
	2401 N Halsted St, Suite 200	\$\$,000.	Noncash
	Chicago, IL 60615		(Complete Part II for noncash contributions.)
			noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
15	Lam Ho		Person X
	1512 N Campbell Ave, Unit 1	\$ 10,500.	Payroll Noncash
	IJIZ N CAMPDEII AVE, ONIC I	<u> </u>	(Complete Part II for
	CHicago, IL 60622		noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
16	KIND Foundation		Person X
	KIND Foundation		Person X Payroll
	, PO Box 705, Midtown Station	\$ 10,000.	Noncash
			(Complete Part II for
	New York, NY 10018		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>	Name, address, and ZIF + 4		
			Person
			Payroll
		\$	Noncash
			(Complete Part II for
			noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
			Payroll
		\$	
			(Complete Part II for noncash contributions.)
623452 10-18	8-16	Schedule B (Form	990, 990-EZ, or 990-PF) (2016)

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46-5386556

Community Activism Law Alliance

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_		\$	
(a) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. irom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. irom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

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Name of orga	nization		Employer identification number				
Commun	ity Activism Law Alli	ance	46-5386556				
Part III	Exclusively religious, charitable, etc., co the year from any one contributor. Complet completing Part III, enter the total of exclusively religi Use duplicate copies of Part III if additio	ntributions to organizations described e columns (a) through (e) and the follov ous, charitable, etc., contributions of \$1,000 or	in section 501(c)(7), (8), or (10) that total more than \$1,000 for ving line entry. For organizations				
(a) No.							
`from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
·		(a) Transfor of sift					
	Transferee's name, address,	(e) Transfer of gift	Relationship of transferor to transferee				
-							
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	(b) Fulpose of gift	(c) Use of gift					
		(e) Transfer of gift	t				
-	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee				
(a) No							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
·							
	(e) Transfer of gift						
-	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee				
-							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gift	1t				
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee				
623454 10-18-1	6		Schedule B (Form 990, 990-EZ, or 990-PF) (2016				

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SCHEDULE C (Form 990 or 990-EZ)	5 527	OMB No. 1545-0047	
Department of the Treasury Internal Revenue Service	 Complete if the organization is described below. Attach to Form 990 or Form Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 		Open to Public Inspection
If the organization and	wered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Can	npaign Activitie	es), then
 Section 501(c)(3) or 	ganizations: Complete Parts I-A and B. Do not complete Part I-C.		
 Section 501(c) (other 	er than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete P	art I-B.	
•	ations: Complete Part I-A only.		
-	wered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Ac		
	ganizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do	•	
()()	ganizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-		
If the organization ans Tax) (see separate ins	wered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or For	m 990-EZ, Part	t V, line 35c (Proxy
Name of organization	i), or (6) organizations: Complete Part III.	Employer ide	ntification numbe
······	Community Activism Law Alliance		5386556
Part I-A Comp	ete if the organization is exempt under section 501(c) or is a section	527 organiz	ation.
2 Political campaign3 Volunteer hours fo	r political campaign activities		
	ete if the organization is exempt under section 501(c)(3).		
	of any excise tax incurred by the organization under section 4955		
	of any excise tax incurred by organization managers under section 4955		
•	incurred a section 4955 tax, did it file Form 4720 for this year?	·····	」Yes └── No]Yes └── No
b If "Yes," describe i	nade?	····· L	
	ete if the organization is exempt under section 501(c), except section	1 501(c)(3).	
	lirectly expended by the filing organization for section 527 exempt function activities		
	of the filing organization's funds contributed to other organizations for section 527	···· ·	
	ctivities	▶\$	
	ion expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,		
line 17b		► \$	
	ization file Form 1120-POL for this year?		Yes No
made payments. F contributions rece	ddresses and employer identification number (EIN) of all section 527 political organizations or each organization listed, enter the amount paid from the filing organization's funds. Also ved that were promptly and directly delivered to a separate political organization, such as a nmittee (PAC). If additional space is needed, provide information in Part IV.	enter the amour	nt of political

(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

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

Schedule C (Form 990 or 990-EZ) 2016

632041 11-10-16

Schedule C (Form 990 or 990-EZ) 2016 C				46-5	386556 Page 2
Part II-A Complete if the organ	nization is e	exempt under section	on 501(c)(3) and fil	ed Form 5768 (e	lection under
section 501(h)).			- Deat N/ and a ffiliate of		
00	•	n affiliated group (and list i	n Part IV each affiliated	group member's nan	ne, address, EIN,
expenses, and share o		0 1 ,	aviaiana anako		
B Check ▶ if the filing organizatio	n checked box	A and "limited control" pr	ovisions apply.	(a) Filing	(h) Affiliated grayer
	on Lobbying E ures" means a	xpenditures mounts paid or incurred.	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influer	nce public opin	ion (grass roots lobbying)			
b Total lobbying expenditures to influer					
c Total lobbying expenditures (add line					
d Other exempt purpose expenditures					
e Total exempt purpose expenditures (
f Lobbying nontaxable amount. Enter t			l l l l l l l l l l l l l l l l l l l		
If the amount on line 1e, column (a) or (lobbying nontaxable am	11		
Not over \$500,000	209	6 of the amount on line 1e			
Over \$500,000 but not over \$1,000,0	00 \$10	0,000 plus 15% of the exc	cess over \$500,000.		
Over \$1,000,000 but not over \$1,500	,000 \$17	5,000 plus 10% of the exc	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,00	0,000 \$22	5,000 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000 \$1,000,000.					
g Grassroots nontaxable amount (enter	r 25% of line 1)			
h Subtract line 1g from line 1a. If zero o	or less, enter -0				
i Subtract line 1f from line 1c. If zero o	r less, enter -0-				
j If there is an amount other than zero					
reporting section 4911 tax for this ye	ar?			[Yes No
	4-Yea	Averaging Period Under	r section 501(h)		
(Some organizations that		on 501(h) election do not eparate instructions for li	•	of the five columns b	elow.
	Lobbying E	xpenditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
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) 2016

632042 11-10-16

Schedule C (Form 990 or 990-EZ) 2016 Community Activism Law Alliance

46-5386556 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(k)
of the lobbying activity.	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
a Volunteers?	Х			
 b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? 	X	X		
 d Mailings to members, legislators, or the public? 		X		
e Publications, or published or broadcast statements?		X		
f Grants to other organizations for lobbying purposes?		X		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		Х		
 h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? 		Х		
i Other activities?	X			450.
j Total. Add lines 1c through 1i				450.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х		
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), sect 501(c)(6).	on 501(c)	(5), or se	ection	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?				
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	• •			ne 3, is
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polit expenses for which the section 527(f) tax was paid).	ical			
a Current year		2a		
b Carryover from last year				
c Total				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou instructions); and Part II-B, line 1. Also, complete this part for any additional information. Part II-B, Line 1, Lobbying Activities:	p list); Part II	A, lines 1 a	and 2 (see	

staff and volunteers attended meetings to discuss proposed changes to

legislation

Schedule C (Form 990 or 990-EZ) 2016

632043 11-10-16

(Form 990)

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.



	■ Attach to Form 990. I Revenue Service Information about Schedule D (Form 990) and its instruct	ions is at www.ir	s.gov/form990.	Inspection
Nam	e of the organization		Employer	identification number
	Community Activism Law Allianc			6-5386556
Par		Similar Funds	s or Accounts.	Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.		<u> </u>	
	(a) Donor advise	ed funds	(b) Funds and	d other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that the assets he			
	are the organization's property, subject to the organization's exclusive legal control?			Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that gr			
	for charitable purposes and not for the benefit of the donor or donor advisor, or for a	ny other purpose	conferring	
Do	impermissible private benefit?			Yes No
Par			Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply)			
			orically important la	
		servation of a cert	ified historic structu	ure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conservation contrib	oution in the form		
-	day of the tax year.			at the End of the Tax Year
	Total number of conservation easements			
	· · · · · · · · · · · · · · · · · · ·			
	()			
u	Number of conservation easements included in (c) acquired after 8/17/06, and not or			
3	listed in the National Register			a tho tax
3	year	terminated by the	e organization dunin	g the tax
4	Number of states where property subject to conservation easement is located			
5	Does the organization have a written policy regarding the periodic monitoring, inspec	tion bandling of		
Ŭ				Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, a			
Ū				is during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and er	nforcina conserva	tion easements du	ring the year
•				
8	Does each conservation easement reported on line 2(d) above satisfy the requirement	nts of section 170)(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation easements in its reve			lance sheet, and
	include, if applicable, the text of the footnote to the organization's financial statemen	-		
	conservation easements.			
Par	rt III Organizations Maintaining Collections of Art, Historical Tre	easures, or O	ther Similar As	ssets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.			
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in	its revenue stater	ment and balance s	heet works of art,
	historical treasures, or other similar assets held for public exhibition, education, or re-	search in furthera	ince of public servic	e, provide, in Part XIII,
	the text of the footnote to its financial statements that describes these items.			
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its re	evenue statemen	t and balance sheet	t works of art, historical
	treasures, or other similar assets held for public exhibition, education, or research in	furtherance of pu	blic service, provide	e the following amounts
	relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			
	(ii) Assets included in Form 990, Part X		🕨 💲 _	
2	If the organization received or held works of art, historical treasures, or other similar a	assets for financia	al gain, provide	
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to			
а	Revenue included on Form 990, Part VIII, line 1			
	Assets included in Form 990, Part X			
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Scheo	dule D (Form 990) 2016

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		ty Activis					46-53			age 2
Pa	t III Organizations Maintaining C	Collections of A	rt, Histor	ical Tr	easures, or Ot	her Simi	lar Asse	ts (contir	nued)	
3	Using the organization's acquisition, access	ion, and other record	ls, check a	ny of the	following that are a	a significan	t use of its	collectio	n item	S
	(check all that apply):									
a	Public exhibition	c			hange programs					
b	Scholarly research	e	e 🛄 Otr	ier						
c	Preservation for future generations									
4	Provide a description of the organization's c						pose in Par	t XIII.		
5	During the year, did the organization solicit of							٦		1
Der	to be sold to raise funds rather than to be m							Yes		No
Pa	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the or	ganizatio	n answered "Yes"	on Form 99	90, Part IV,	line 9, or		
10	Is the organization an agent, trustee, custod		diany for cor	otribution	e or other assets r	ot includor	4			
Ia	on Form 990, Part X?							Yes		No
h	If "Yes," explain the arrangement in Part XIII						······ ∟			
U		and complete the it	nowing tab	ie.				Amount		
~	Reginning balance					1c		Amoun		
	Beginning balance									
	Additions during the year									
-	Distributions during the year									
f 20	Ending balance Did the organization include an amount on F							Yes		No
	If "Yes," explain the arrangement in Part XIII					• • • • • •]
Pa										1
		(a) Current year	(b) Prior		(c) Two years back		vears back	(e) Four	vears	hack
1a	Beginning of year balance	(u) ourient your		your			youro buok	(0) + 001	youro	Juon
b	Contributions									
	Net investment earnings, gains, and losses									
d	Grants or scholarships									
	Other expenditures for facilities									
C										
f	Administrative expenses									
	End of year balance									
g 2	Provide the estimated percentage of the cur		L No (line 1 a (column (s)) held as:					
	Board designated or quasi-endowment	Tent year end baland	%		a)) field as.					
a b	Permanent endowment	%								
	Temporarily restricted endowment	%								
C	The percentages on lines 2a, 2b, and 2c sho									
20	Are there endowment funds not in the posse		ation that a	ra hald a	nd administered fo	r the organ	ization			
Ja		ession of the organiz	alion linal a	ie neiu a	nu auministereu iu	i the organ	IIZALION	Г	Yes	No
	by:(i) unrelated organizations								103	110
h	(ii) related organizations If "Yes" on line 3a(ii), are the related organization									
4	Describe in Part XIII the intended uses of the							30		
<u> </u>	t VI Land, Buildings, and Equipn			us.						
	Complete if the organization answere) Part IV li	ne 11a S	See Form 990 Part	X line 10				
	Description of property	(a) Cost or c	· · · ·		<u>i</u>	Accumula	ted	(d) Bool	c value	
		basis (investr				depreciatio		() 0001		•
1a	Land									
	Buildings									
	Leasehold improvements									
	Equipment									
	Other									
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, column	(B), line 1	0c.)		🕨			0.
							<u> </u>		000	0040

Schedule D (Form 990) 2016

632052 08-29-16

Schedule D (Form 990) 2016	Community	Activism	Law	Alliance
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Part VII	Investments - Other Securities.					й
	Complete if the organization answered "Yes"					
	otion of security or category (including name of security)	(b) Book value		(c) Method of v	aluation: Cost or en	d-of-year market value
	al derivatives					
	-held equity interests					
(3) Other						
(A)						
(B) (C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	b) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII	Investments - Program Related.					
	Complete if the organization answered "Yes"	on Form 990, Part IV	/, line 11	c. See Form 990,	Part X, line 13.	
	(a) Description of investment	(b) Book value		(c) Method of v	aluation: Cost or en	d-of-year market value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)	b) must equal Form 990, Part X, col. (B) line 13.)		-			
Part IX	Other Assets.					
	Complete if the organization answered "Yes"	on Form 990. Part IV	/. line 11	d. See Form 990.	Part X. line 15.	
	-	Description	,	,	,	(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colu Part X	Imn (b) must equal Form 990, Part X, col. (B) lin Other Liabilities.	e 15.)				
	Complete if the organization answered "Yes"	on Form 990. Part IV	/. line 11	e or 11f. See Forr	n 990. Part X. line 2	5.
1.	(a) Description of liability	,		Book value		
	deral income taxes					
(2)						
(3)					1	
(4)]	
(5)						
(6)						
(7)						
(8)						
(9)						
	ımn (b) must equal Form 990, Part X, col. (B) lin					
	r for uncertain tax positions. In Part XIII, provide					
organiza	ation's liability for uncertain tax positions under	r FIN 48 (ASC 740). C	heck he	ere if the text of th	e footnote has beer) provided in Part XIII $\lfloor X \rfloor$

Schedule D	(Form 990)	2016

632053 08-29-16

	dule D (Form 990) 2016 Community Activism Law All				5386556 _{Pag}	ge 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem		Revenue per R	eturr	1.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				740 62	1
1	Total revenue, gains, and other support per audited financial statements			1	740,63	Ι.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments					
b	Donated services and use of facilities		56,668.			
С	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)					~
е	Add lines 2a through 2d			2e	56,66	
3	Subtract line 2e from line 1			3	683,96	3.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a				
b	Other (Describe in Part XIII.)	. 4b				
с	Add lines 4a and 4b			4c		0.
E				_		
<u> </u>	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	683,96	3.
Pa	t XII Reconciliation of Expenses per Audited Financial Staten			•		3.
Pa		nents With		•	irn.	
Pa 1	rt XII Reconciliation of Expenses per Audited Financial Staten	nents With a.	n Expenses per	•		
	TXII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	nents With a.	n Expenses per	Retu	irn.	
1	Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements	nents With	n Expenses per	Retu	irn.	
1 2	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents With a. 2a	n Expenses per	Retu	irn.	
1 2 a	T XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b	n Expenses per	Retu	irn.	
1 2 a	T XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b 2c	n Expenses per	Retu	rn. 608,16	1.
1 2 a	TXII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	56,668.	Retu	rn. 608,16 56,66	8.
1 2 b c d	TXII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	56,668.	1	rn. 608,16	1.
1 2 b c d e	TXII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	56,668.	1 2e	rn. 608,16 56,66	8.
1 2 b c d 3	t XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2b 2c 2d	56,668.	1 2e	rn. 608,16 56,66	8.
1 2 a b c d e 3 4	Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2b 2c 2d	56,668.	1 2e	rn. 608,16 56,66	1.
1 2 a b c d e 3 4 a	It XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d	56,668.	1 2e	rn. 608,16 56,66 551,49	1. 8. 3.
1 2 a b c d e 3 4 a	Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	56,668.	Retu 1 2e 3	rn. 608,16 56,66	1. 8. 3.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part X, Line 2:

Fin 48 Note from the Audited Financials Statements					
The Organization was granted an exemption from federal income taxes by the					
Internal Revenue Service pursuant to the provisions of Internal Revenue					
Code Section 501(c)(3). The Organization qualifies for the charitable					
contribution deduction under Section 170(b)(1)(A)(vi) and has been					
classified as an organization that is not a private Foundation under					
Section 509(a)(1). The tax-exempt purpose of the Organization and the					
nature in which it operates is described above.					
Management believes the Organization continues to operate in compliance					
with its tax-exempt purpose. Thus, no provision for income tax has been					
provided for in the financial statements. The Organization's Form 990,					
632054 08-29-16 Schedule D (Form 990) 2016					
12501219 402354 160768 2016.05010 Community Activism Law Alli 160768_1					

Schedule D (Form 990) 2016 Community Activism Law A Part XIII Supplemental Information (continued)	lliance	46-5386556 Page 5
	wig aubiaat ta	ovamination
Return of Organization Exempt from Income Ta		
by the IRS, generally for three years after	it has been file	<u>ed.</u>
The Organization has adopted the requirement	s for accounting	for uncertain
tax positions and management has determined	that the Organiz	ation was not
required to record a liability related to un	<u>certain tax posi</u>	tions as of
June 30, 2017.		
		Schedule D (Form 990) 2016
632055 08-29-16 34		

12501219 402354 160768

SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service Schedule O (Form 990 or 990-EZ) and its instructions is at WWW.irs.gov/form	ZU1b Open to Public				
	Employer identification number 46-5386556				
Form 990, Part III, Line 1, Description of Organization Mis	ssion:				
communities. CALA accomplishes its two principal objectives	s at once:				
provide cost-effective legal services to underserved indivi	idual clients				
and help our activist partners achieve broader social change	ge. Through				
our work, CALA seeks to change not only how the legal aid s	system				
operates but also how lawyers and activists work together.					
Form 990, Part VI, Section B, line 11b:					
The Form 990 was reviewed by the Board of Directors prior t	to filing.				
Form 990, Part VI, Section B, Line 12c:					
A Case Managment Program checks for conflicts of interest w	whenever a new				
case is opened.					
Form 990, Part VI, Section B, Line 15a:					
Compensation Committee consisting of select board officers	reviewed				
Executive Director's performance, evaluated market comparis	sons, assessed				
organization's financial and strategic position, and made final decision to					
determine compensation package for the Executive Director.					
Form 990, Part VI, Section C, Line 19:					
The Organization makes the governing documents and financia	al statements				
available upon request.					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 632211 08-25-16

Schedule O (Form 990 or 990-EZ) (2016)

	fice Use Only ILLINOIS CHARITABLE ORGANIZATION ANNUAL		Form AG990-IL Revised 3/05
PMT	· · · · · · · · · · · · · · · · · · ·		
	Charitable Trust Bureau, 100 West Randol 11th Floor, Chicago, Illinois 60601	ipn CC	# 01-067,853
			Check all items attached:
AMT	Report for the Fiscal Period:	X	
	D ion_ 0.7 /01 /001 (Make Checks X	
		Payable to the Illinois	Copy of Form IFC
INIT		Charity 🗠	
		Bureau Fund	\$100.00 Late Report Filing Fee
			MO DAY YR
Are c		anization was creat	ed:
	LEGAL NAME Community Activism Law Alliance	Year-end amounts	
	-	A) ASSETS	A) \$ 365,440.
	MAIL DDRESS 17 N. State Street, No. 1380	B) LIABILITIES	B) \$ 12,196.
	A STATE Chicago, IL	C) NET ASSETS	C) \$ 353,244.
	P CODE 60602	O) NET AGGETO	0,0 333,244.
I .	SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:	PERCENTAGE	AMOUNT
"	D) PUBLIC SUPPORT, CONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.)	99.619%	D) \$ 681,357.
	E) GOVERNMENT GRANTS & MEMBERSHIP DUES	<u> </u>	E) \$
	F) OTHER REVENUES	0.381%	F) \$ 2,606.
		00002/0	
	G) TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E, & F)	100 %	G) \$ 683,963.
п.	SUMMARY OF ALL EXPENDITURES DURING THE YEAR:		
	H) OPERATING CHARITABLE PROGRAM EXPENSE	81.715%	н)\$ 450,654.
			, , ,
	I) EDUCATION PROGRAM SERVICE EXPENSE	%	I) \$
	J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I)	81.715%	J) \$ 450,654 .
	J1) JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J): \$		
	K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS	%	K) \$
		01 71 5.	
	L) TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J & K)	81.715%	L) \$ 450,654.
		12.938%	M)\$ 71,354.
	M) MANAGEMENT AND GENERAL EXPENSE	12.930%	M)\$ 71,354.
	N) FUNDRAISING EXPENSE	5.346%	N)\$ 29,485.
	N) TONDRAISING LAI ENSE	5.540%	
	0) TOTAL EXPENDITURES THIS PERIOD (ADD L, M, & N)	100 %	0) \$ 551,493.
		100 //	5) ¢
III.	SUMMARY OF ALL PAID FUNDRAISER AND CONSULTANT ACTIVITIES: (Attach Attorney General Report of Individual Fundraising Campaign- Form IFC. One for each PFR.)		
	PROFESSIONAL FUNDRAISERS:		
	P) TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS	100 %	P) \$ 0.
	Q) TOTAL FUNDRAISERS FEES AND EXPENSES	%	Q) \$
	R) NET RECEIVED BY THE CHARITY (P MINUS Q=R)	%	R) \$
	PROFESSIONAL FUNDRAISING CONSULTANTS:		
	S) TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS		S) \$ 0.
IV.	COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YE	AR:	
1	T) NAME, TITLE Lam Nguyen Ho, Executive Director		T) \$ 52,750.
1	U) NAME, TITLE Deanne Medina, Staff Attorney		U) \$ 74,822.
	V) NAME, TITLE Chad Baker, Staff Attorney		V)\$ 54,637.
v .	CHARITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPENDE CODE CATEGORIES	D)	List on back side of instructions
1-16			CODE
698091 04-01-16	W) DESCRIPTION: Legal Services and Legal Aid		W)# 090
8091	X) DESCRIPTION:		X) #
69	Y) DESCRIPTION:		Y) #

IF	THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:		YES	NO
1.	WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT?	1.		X
2.	HAS THE ORGANIZATION OR A CURRENT DIRECTOR, TRUSTEE, OFFICER OR EMPLOYEE THEREOF, EVER BEEN CONVICTED BY ANY COURT OF ANY MISDEMEANOR INVOLVING THE MISUSE OR MISAPPROPRIATION OF FUNDS OR ANY FELONY?	2.		X
3.	DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSACTION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID ANY OFFICER, DIRECTOR OR TRUSTEE RECEIVE ANYTHING OF VALUE NOT REPORTED AS COMPENSATION?	3.		X
4.	HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR TRUSTEE OWNS MORE THAN 10% OF THE OUTSTANDING SHARES?	4.		X
5.	IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON OR ORGANIZATION?	5.		X
6.	DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC)	6.		X
7a.	DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?	7.		X
7b.	. IF "YES", ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT COSTS \$; (ii) THE AMOUNT ALLOCATED TO PROGRAM SERVICES \$; (iii) THE AMOUNT ALLOCATED TO MANAGEMENT AND GENERAL \$; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING \$			
8.	DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED PURPOSES?	8.		Х
9.	HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY?	9.		X
10.	. WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION, MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS?	10.		X
11.	. LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS:			
	Urban Partnership Bank, 55 East Jackson, Chicago, IL 60604			
12.	. NAME AND TELEPHONE NUMBER OF CONTACT PERSON: Lam Nguyen Ho - 773-888-1404			

ALL ATTACHMENTS MUST ACCOMPANY THIS REPORT - SEE INSTRUCTIONS

UNDER PENALTY OF PERJURY, I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS ANNUAL REPORT AND THE ATTACHED DOCUMENTS, INCLUDING ALL THE SCHEDULES AND STATEMENTS AND THE FACTS THEREIN STATED ARE TRUE AND COMPLETE AND FILED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE OF THE STATE OF ILLINOIS RELY THEREUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGISTRANT HEREBY TO THE JURISDICTION OF THE STATE OF ILLINOIS.

BE SURE TO INCLUDE ALL FEES DUE:	Lam Nguyen Ho				
1.) REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END.	PRESIDENT OR TRUSTEE (PRINT NAME)	SIGNATURE	DATE		
2.) FOR FEES DUE SEE INSTRUCTIONS.	Chirag Badlani				
3.) REPORTS THAT ARE LATE OR INCOMPLETE ARE SUBJECT TO A \$100.00 PENALTY.	TREASURER OF TRUSTEE (PRINT NAME)	SIGNATURE	DATE		
·	Paul Betlinski				
698101 04-01-16	PREPARER (PRINT NAME)	SIGNATURE	DATE		