			Extended to May 15, 2023		OMB No. 1545-0047
For	" g	90	Return of Organization Exempt From Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (e)		2021
	_		Do not enter social security numbers on this form as it may	Open to Public	
Interr	nal Reve	of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the lates		Inspection
<u>A</u> F	or th	e 2021 calend	ar year, or tax year beginning $ { m JUL}1,2021$ and ending	<u>JUN 30, 2022</u>	
	heck if pplicat	le: C Name of	organization	D Employer identifica	tion number
	Addr	_е веуо	nd Legal Aid		
	Name chan	ge Doing bu	usiness as	46-538655	6
	returr	Number	, , , , , , , , , , , , , , , , , , , ,	e E Telephone number	
	Final returr termi	n_	. State Street 1380	312-999-0	
	ated ⊐Amer	City or t	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	1,410,300.
	_returr] Appli		ago, IL 60602 nd address of principal officer: Lam Nguyen Ho	H(a) Is this a group retu	
	_ tion pend		as C above	for subordinates? H(b) Are all subordinates inclu	
		empt status:			
			beyondlegalaid.org	H(c) Group exemption	
		f organization:		ar of formation: 2014 M	
	art I	Summary			state et logal definence
	1	Briefly describ	e the organization's mission or most significant activities: Help unde	rserved commun	nities
Governance			justice and pursue social change		
rnai	2	Check this bo	$\mathbf{x} \models \square$ if the organization discontinued its operations or disposed of more	re than 25% of its net asset	S.
ove	3	Number of vot	12		
Ğ	4	Number of ind		12	
es ô	5			24	
Viti	6	Total number	of volunteers (estimate if necessary)	6	150
Activities &			d business revenue from Part VIII, column (C), line 12		0.
_	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11		0.
		O I I I I		Prior Year 1,061,737.	Current Year
ne	8		and grants (Part VIII, line 1h)	480,946.	<u>752,672.</u> 623,070.
Revenue	9	•	ce revenue (Part VIII, line 2g)	328.	304.
Be	10		come (Part VIII, column (A), lines 3, 4, and 7d)	4,897.	34,254.
	11		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,547,908.	1,410,300.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14		to or for members (Part IX, column (A), line 4)	0.	0.
	40		compensation, employee benefits (Part IX, column (A), lines 5-10)	1,070,740.	1,086,785.
Expenses	16a		undraising fees (Part IX, column (A), line 11e)	0.	0.
per	b		ng expenses (Part IX, column (D), line 25)		
ш	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)	171,519.	158,352.
	18	Total expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,242,259.	1,245,137.
	19	Revenue less	expenses. Subtract line 18 from line 12	305,649.	165,163.
0 C ES				Beginning of Current Year	End of Year
sets	20	Total assets (F	Part X, line 16)	1,099,813.	1,249,161.
Net Assets or	21		(Part X, line 26)	74,908.	59,093.
_			fund balances. Subtract line 21 from line 20	1,024,905.	1,190,068.
	art II				
			I declare that I have examined this return, including accompanying schedules and stater		nowledge and belief, it is
true	corre	ct, and complete.	Declaration of preparer (other than officer) is based on all information of which prepare	er nas any knowledge.	

Sign	Signature of officer		Date					
Here	Lam Nguyen Ho, Executive Director							
	Type or print name and title							
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN				
Paid	Jason L. Gierhahn			self-employed P02385275				
Preparer	Firm's name Desmond & Ahern,	Ltd	Firm's	s EIN ▶ 36-3321958				
Use Only	Firm's address 🕨 10827 S. Western	Avenue						
	Chicago, IL 6064	Phon	Phone no. (773)779-4720					
May the IF	RS discuss this return with the preparer shown abo	ve? See instructions		X Yes No				
				- 000 (*****)				

132001 12-09-21 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2021)

Form	990 (2021) Beyond Legal Aid	46-5386556	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		Χ
1	Briefly describe the organization's mission:		
	Beyond Legal Aid (Beyond) uses its model, "community act:	ivism	
	lawyering," to unite lawyers and activists to collaborat:	ivelv help	
	underserved communities access justice and pursue social		
	Through these partnerships, Beyond creates "community act		
2	Did the organization undertake any significant program services during the year which were not listed on the		v .
	prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	XNo
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as r	neasured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	s, the total expenses, ar	nd
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$751,822. including grants of \$) (Revenue)	ue\$ 623,	458.)
	The Organization offers free Legal Services to Low-Income	e Communitie	s;
	Self-Advocacy Pro-Se Workshops (helping low-income indiv:	iduals compl	ete
	their own legal applications); Community Legal Education a		
	Low-Income Communities.	<u></u>	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	ue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	ue \$)
			<i>(</i>
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses > 751,822.		
		Form 9	90 (2021)
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Form 990 (2021) Beyond Legal Aid
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	Х	L
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	L
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	<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
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 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 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 X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			v
46	If "Yes," complete Schedule D, Part IV	9		<u>x</u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			v
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			x
L	Part VI	<u>11a</u>		<u> </u>
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		x
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		x
Ь	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			<u> </u>
u		11d		x
۵	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e		X
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)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	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	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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			1
	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			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			1
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
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	000	
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 Form 990 (2021)
 Beyond Legal Aid

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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			
	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			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
d	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		<u> </u>
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
254	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	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 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c	37	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
~ 1	contributions? If "Yes," complete Schedule M	30		X X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete</i>	32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33		33		x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I			<u> </u>
04		34		x
35a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	1		
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
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 the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a	-		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v	
	(gambling) winnings to prize winners?	<u> 1c</u>	X 000	
132004	↓ 12-09-21	Form	220	(2021)

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Par	art V Statements Regarding Other IRS Filings and Tax Compliance (continued)									
	a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements									
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 24									
h		2b	х							
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?									
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х						
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b								
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X						
b	If "Yes," enter the name of the foreign country									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X						
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u> </u>						
-	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	04								
~	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b								
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
	to file Form 8282?	7c		<u>X</u>						
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7b								
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h								
0	sponsoring organization have excess business holdings at any time during the year?	8								
9										
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12 10a									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b									
11	Section 501(c)(12) organizations. Enter:									
	Gross income from members or shareholders									
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
100	amounts due or received from them.) [11b] Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
	Is the organization licensed to issue qualified health plans in more than one state?	13a								
	Note: See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans 13b									
С	Enter the amount of reserves on hand 13c									
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X						
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v						
	excess parachute payment(s) during the year?	15		X						
16	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х						
10	If "Yes," complete Form 4720, Schedule O.	10								
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any									
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17								
	If "Yes," complete Form 6069.									
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Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing 1a pody delegated broad authority to an executive committee or similar committee, explain on Schedule 0. 1a	12			
body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
Enter the number of voting members included on line 1a, above, who are independent 1b	12			
Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other				
officer, director, trustee, or key employee?		2	Х	
Did the organization delegate control over management duties customarily performed by or under the direct supervision				
of officers, directors, trustees, or key employees to a management company or other person?		3		X
		4		X
		5		X
		6		X
•				
		7a		x
		<u> </u>		
		7h		x
		70		- 23
		0-	v	
		dð	~	
		9		X
On B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)				
	ſ		Yes	
		<u>10a</u>		X
		l I		
and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form	1?	11a	Х	
Describe on Schedule O the process, if any, used by the organization to review this Form 990.				
Did the organization have a written conflict of interest policy? If "No," go to line 13		12a		
Nere officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		12b	Х	
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		l I		
on Schedule O how this was done		12c	Х	
Did the organization have a written whistleblower policy?		13	Х	
Did the organization have a written document retention and destruction policy?	[14	Х	
persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
		15a	Х	
		15b		X
, , , , , , , , , , , , , , , , , , , ,				
		16a		x
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	<pre>pficer, director, trustes, or key employee?</pre> Did the organization delegate control over management duties customarily performed by or under the direct supervision of difficers, directors, trustes, or key employees to a management company or other person? Did the organization have members or stockholders? Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members or the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or are members or the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? The governing body the governing body body The governing body? The governing body? The governing body body The governing body? The governing	<pre>officer, director, trustee, or key employee?</pre> Did the organization delegate control over maagement duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization have any significant changes to its governing documents since the prior Form 990 was filed? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? We any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or paesons other than the governing body? Did the organization comenoparously document the meetings held or written actions undertaken during the yar by the following: The governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on complex cory of this Form 990 to all members of its governing body before filing the form? Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization is the governing body before filing the form? Describe on Schedule O the process, if any, used by the organization is the governing body before filing the form? Describe on Schedule O the proce	affact of interctor, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization baceme away significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization baceme away even during the year of a significant diversion of the organization's assets? 5 Did the organization baceme away even during the year of a significant diversion of the organization one or more members of the governing body? 7 Did the organization onterproraneously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization notemporaneously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization notemporaneously document the meetings held or written actions and the power to elect or appoint one or or one B . Didles (<i>This Section B requests information about collicies and schedules</i>) 9 Did the organization have key employee listed in Part VII, Section A, who cannot be reached at the granization have active section and active section as and addresses on Schedule O is approval. 9 Did the organization have key employees required to the schedules of such cha	affiers director, trustee, or key employee? 2 X Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the pior Form 990 was filed? 4 Did the organization have members or stockholders? 6 Did the organization have members, stockholders? 6 Did the organization nave members, stockholders, or other persons who had the power to elect or appoint one or more members, stockholders, or other persons other than the governing body? 7a The governing body? 7a Each committee with authority to act on behalf of the governing body? 8a The governing body? 8a Each committee with authority to act on behalf of the governing body? 8a The governing body? 8a The organization nave written policies and procedures governing the activities of such chapters, affliates, and brancks to calculate or the organization's sempt purposes? 10a The organization have written policies and procedures governing the activities of such chapters, affliates, and brancks to calculate organization is realised written written organization's sempt purposes? 10a The organization have written policies and procedures governing the activities of such chapters, affliates, and brancks to consistent written organization's seconfision? 12a T

Beyond Legal Aid

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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 on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management

Form 990 (2021)

Form 990 (2021) Beyond Legal Aid	46-5386556	Page 7							
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 the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

See the instructions for the order in which to list the persons above.

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	Position (do not check more than one						Reportable	Estimated			
	hours per	box	box, unless persor			s both	n an	compensation	compensation	amount of		
	week		ficer and a director/trustee			r/trus [.] I	tee)	from	from related	other		
	(list any	ector						the	organizations	compensation		
	hours for	or dir	ee			ated		organization	(W-2/1099-MISC/	from the		
	related organizations	ustee	trust		ee	suadu		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related		
	below	ual tr	tional		yolqr	t con /ee		1099-INEC)		organizations		
	line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations		
(1) Lam Nguyen Ho	37.50				×	1 0						
Executive Director				X				112,953.	Ο.	6,540.		
(2) Bindhu Vijayan	37.50							-				
Deputy Director Legal Services						Х		107,484.	0.	6,180.		
(3) LeMinh Hoang	3.00											
President		Х		Х				0.	0.	0.		
(4) Thomas Alaan	3.00											
Vice-President		Х		Х				0.	0.	0.		
(5) Kevin Drucker	3.00											
Treasurer		Х		Х				0.	0.	0.		
(6) Samuel Heppell	3.00											
Secretary		Х		X				0.	0.	0.		
(7) Ellen Craig	2.00											
President-Emeritus		Х		X				0.	0.	0.		
(8) Elizabeth Arumilli	2.00											
Member		Х						0.	0.	0.		
(9) Emily Brown	2.00											
Member		Х						0.	0.	0.		
(10) Berto Aguayo	2.00											
Member		Х						0.	0.	0.		
(11) Irakere Picon	2.00											
Member		Х						0.	0.	0.		
(12) Raymundo Valdez-Chavez	2.00											
Member		Х						0.	0.	0.		
(13) Liza Jager	2.00								0	•		
Member	0.00	X						0.	0.	0.		
(14) Joshua Taylor	2.00								0	0		
Member		X						0.	0.	0.		
						-						
	1	1	1	I	I	1	1	I		Form 990 (2021)		

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Form 990 (2021)

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	990 (2021) Beyond Le									46-53	386	556	P	age 8
Par	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A) Name and title	(B) Average hours per week (list any	(C) Position o not check more than one x, unless person is both an ficer and a director/trustee)				n an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		an	(F) stimate nount other pensa	of	
		hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key em ployee	Highest compensated employee	Former	organization (W-2/1099-MISC/ 1099-NEC)	(W-2/1099-MIS 1099-NEC)	SC/	fr org and	om th anizat d relat anizati	e ion ed
с	Subtotal Total from continuation sheets to Part VI	I, Section A							220,437. 0. 220,437.		0.0.0.		2,7: 2,7:	0.
2	Total (add lines 1b and 1c) Total number of individuals (including but n compensation from the organization							o re		000 of reportable	-		<u> </u>	200
3	Did the organization list any former officer,	director, truste	ee, k	ey e	empl	oye	e, or	hig	hest compensated emp	oyee on			Yes	No
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su	m of reportabl	e co	mpe	ensat	tion	and	oth	ner compensation from t	ne organization		3		Х
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a	accrue compen	satio	on fr	rom a	any	unre	elate	ed organization or individ	lual for services		4		X
Sec	rendered to the organization? If "Yes." com tion B. Independent Contractors	plete Schedule	e J fo	or sl	<u>ich p</u>	Ders	on .				<u></u>	5		Х
1	Complete this table for your five highest con the organization. Report compensation for t	•									ensat	tion fro	om	
	(A) Name and business	address	NC	ONE	2				(B) Description of s	ervices	(C) Compensation			n
2	Total number of independent contractors (ii \$100,000 of compensation from the organiz	•	ot lin	niteo	d to t	thos C		ted	above) who received mo	ore than				
												Form	990 ()	2021)

		Check if Schedule O	50110	anio a 10000	130	or note to any lift	(A)	(B)	(C)	(D)
							Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue exclu from tax un sections 512 -
2	1 a	Federated campaigns		1a						
				1b						
	с	Fundraising events		1c						
		Related organizations								
	е	Government grants (cont	tributi	ons) 1e						
0	f	All other contributions, gifts	, grant	ts, and						
ויי		similar amounts not include	d abov			752,672.				
	g	Noncash contributions included in	n lines 1	la-1f 1g \$		34,800.				
0	h	Total. Add lines 1a-1f					752,672.			
		T				Business Code	460 500	460 500		
		Fee for servi	LCe			900099	462,589.			
P	b	Service fees				900099	160,481.	160,481.		
D	С									
	d									
Develine	e	All - 44-								
		All other program service					623,070.			
+	<u>g</u> 3	Total. Add lines 2a-2f Investment income (inclu					025,070.			
	3	other similar amounts)					304.			30
	4	Income from investment								
	5	Royalties		-	-					
	Ŭ			(i) Real		(ii) Personal				
	6 a	Gross rents	6a							
		Less: rental expenses								
		Rental income or (loss)	6c							
		Net rental income or (los				>				
		Gross amount from sales of		(i) Securiti		(ii) Other				
		assets other than inventory	7a				1			
	b	Less: cost or other basis								
		and sales expenses	7b							
	с	Gain or (loss)	7c							
	d	Net gain or (loss)				►				
	8 a	Gross income from fundrais including \$	-	ents (not of						
		contributions reported or								
		Part IV, line 18			8a	423.				
		Less: direct expenses \dots			8b	0.				
		Net income or (loss) from		•	ts	····· ►	423.			42
	9 a	Gross income from gami								
	-	Part IV, line 19			<u>9a</u>					
		Less: direct expenses			9b	L				
.		Net income or (loss) from	-	-	, <u></u>					
	iu a	Gross sales of inventory,			10-					
	h	and allowances			10a 10b					
+	C	Net income or (loss) from	1 Sales	5 OF HIVEHLOP	у	Business Code				
.	11 -	Tax Refund				900099	33,443.			33,44
aniiaau		Other			_	900099	388.	388.		
ŝ	c c				_					
å		All other revenue								
		Total. Add lines 11a-11d					33,831.			
	0	Total revenue. See instruct				····· 🚩	1,410,300.	623,458.	0.	34,17

Beyond Legal Aid

Form 990 (2021)

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	Check if Schedule O contains a response				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	140,484.	39,336.	50,172.	50,976.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	055 005	F 4 0 C 0 0		22 055
7	Other salaries and wages	857,825.	549,623.	275,147.	33,055.
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	10 400	0 0 0 0	0.001	
9	Other employee benefits	10,470.	8,239.	2,231.	C 400
10	Payroll taxes	78,006.	46,179.	25,329.	6,498.
11	Fees for services (nonemployees):				
a	Management	20	2.0		
b		32.	32.	17,000.	
C	Accounting	17,000.		17,000.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	10 210	17 126	1 000	102
40	column (A), amount, list line 11g expenses on Sch 0.)	<u>18,319.</u> 370.	17,136. 219.	1,000.	<u> 183.</u> 31.
12	Advertising and promotion	12,832.	7,527.	4,246.	1,059.
13	Office expenses	12,052.	1,521.	4,240.	1,059.
14 15	Information technology				
15 16	Royalties	28,017.	16,586.	9,097.	2 334
10 17	Occupancy Travel	8,049.	5,362.	2,048.	2,334. 639.
	Travel Payments of travel or entertainment expenses	0,045.	5,502:	2,040.	0000
18	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
19 20					
20 21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	7,782.	4,607.	2,527.	648.
23 24	Other expenses. Itemize expenses not covered	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	=,	_,	
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	Donated goods	34,800.	34,800.		
b	Miscellaneous	19,623.	11,181.	6,133.	2,309.
с	Professional dues	10,331.	10,331.		
d	Staff development	1,197.	664.	482.	51.
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,245,137.	751,822.	395,532.	97,783.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
					Form 990 (2021)

Beyond Legal Aid Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

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Form 990 (2021)

Beyond Legal Aid

Pa	17	balance Sheet				
		Check if Schedule O contains a response or note	e to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		697,493.	1	822,306.
	2	Savings and temporary cash investments		305,765.	2	306,991.
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		96,405.	4	119,714.
	5	Loans and other receivables from any current or	former officer, director,			
		trustee, key employee, creator or founder, substa				
		controlled entity or family member of any of these	e persons		5	
	6	Loans and other receivables from other disqualif	ed persons (as defined			
		under section 4958(f)(1)), and persons described	in section 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
Ÿ	9	Prepaid expenses and deferred charges			9	
	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 1		12		
	13	Investments - program-related. See Part IV, line 1		13		
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		150.	15	150.
	16	Total assets. Add lines 1 through 15 (must equa		1,099,813.	16	1,249,161.
	17	Accounts payable and accrued expenses		74,908.	17	59,093.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete F			21	
es	22	Loans and other payables to any current or form				
Liabilities		trustee, key employee, creator or founder, substa				
iab		controlled entity or family member of any of thes			22	
	23	Secured mortgages and notes payable to unrelate			23	
	24	Unsecured notes and loans payable to unrelated			24	
	25	Other liabilities (including federal income tax, pay				
		parties, and other liabilities not included on lines	17-24). Complete Part X			
		of Schedule D		74 000	25	E0 002
	26	Total liabilities. Add lines 17 through 25		74,908.	26	59,093.
S		Organizations that follow FASB ASC 958, check	CK nere 🕨 🔼			
nce	07	and complete lines 27, 28, 32, and 33.		990,642.	27	1,188,965.
ala	27	N N N N N N N N N N		34,263.	27	1,103.
Б В	28		0 ahaak hara 🔊	54,205.	20	1,105.
'n		Organizations that do not follow FASB ASC 95	bo, check here 🕨 🛄			
ъ Т	200	and complete lines 29 through 33.			20	
Net Assets or Fund Balances	29 20	Capital stock or trust principal, or current funds			29 20	
SS	30	Paid-in or capital surplus, or land, building, or eq			30 31	
et⊿	31	Retained earnings, endowment, accumulated inc	Γ	1,024,905.	31 32	1,190,068.
Ž	32			1,099,813.	32 33	1,249,161.
	33	Total liabilities and net assets/fund balances		I,079,0IJ.	33	1,249,101

Form 990 (2021)

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Form 990 (2021) Beyond Le

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<u>Form</u>	1990 (2021) Beyond Legal Aid	46-538	<u>65</u> 56	Pac	_{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	1,410),3(00.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,245	5,13	37.
3	Revenue less expenses. Subtract line 2 from line 1	3	165	5,10	53.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,024	1,90)5.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,190),00	58.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
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 separate	e 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?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	0			
	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 requi				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			E a rea	990 /	0001

Form **990** (2021)

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Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

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

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

OMB No. 1545-0047
2021
Open to Public Inspection

Т

Nan	ne of t	he organization							dentification number	
De	and I	Beyo Beego for Dublic (nd Legal A:	10					6-5386556	
	irt I	Reason for Public (ee instruction	IS.		
The	organi	ization is not a private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)				
1		A church, convention of ch	•			n 170(b)(1	I)(A)(i).			
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990).)					
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).			
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,	
		city, and state:								
5		An organization operated for	or the benefit of a col	llege or university owned	l or operate	ed by a go	overnmental u	nit describe	ed in	
		section 170(b)(1)(A)(iv). (C	Complete Part II.)							
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).								
7		An organization that norma	Ily receives a substa	ntial part of its support fi	rom a gove	ernmental	unit or from th	ne general j	oublic described in	
		section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)					
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college	
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or	
		university:								
10	X	An organization that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from	
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of it	s support f	rom gross investment	
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	om busines	ses acqui	red by the org	anization a	after June 30, 1975.	
		See section 509(a)(2). (Con	mplete Part III.)							
11		An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50	09(a)(4).			
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	ne functio	ns of, or to ca	rry out the	purposes of one or	
		more publicly supported or	ganizations describe	d in section 509(a)(1) d	or section a	5 09(a)(2) .	See section	509(a)(3). (Check the box on	
		lines 12a through 12d that	describes the type o	f supporting organizatior	n and com	plete lines	12e, 12f, and	12g.		
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), t	pically by	giving	
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	f the direc	tors or truste	es of the su	upporting	
		organization. You must o	complete Part IV, Se	ections A and B.						
b		Type II. A supporting org	anization supervised	or controlled in connect	tion with its	s supporte	ed organizatio	n(s), by hav	ving	
		control or management o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	oorted	
		organization(s). You mus	t complete Part IV,	Sections A and C.						
c		Type III functionally inte	grated. A supportin	g organization operated	in connect	ion with, a	and functional	ly integrate	ed with,	
		its supported organization	n(s) (see instructions)). You must complete l	Part IV, Se	ctions A,	D, and E.			
c		Type III non-functionally	/ integrated. A supp	orting organization oper	ated in co	nnection w	ith its suppor	ted organiz	zation(s)	
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	quirement and	I an attentiv	/eness	
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.			
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Туре I, Туре	II, Type III		
		functionally integrated, or	r Type III non-function	nally integrated supporti	ng organiz	ation.				
f	Ente	er the number of supported o	organizations							
<u> </u>		vide the following information			(iv) Is the orga	nization listed				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ng document?	(v) Amount o support (see ir	-	(vi) Amount of other support (see instructions)	
		organization		above (see instructions))	Yes	No		istruction isj		
Tota	al									

Schedule A	(Form	990	202
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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

(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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
_	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
_	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	ction B. Total Support						1
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4		, ,				
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10						
	Gross receipts from related activities,		,			12	
13	First 5 years. If the Form 990 is for th	•			•		
800	organization, check this box and stor ction C. Computation of Publi	o here	oontago				
							0/
	Public support percentage for 2021 (I					14	<u>%</u>
	Public support percentage from 2020 33 1/3% support test - 2021. If the c						
104	stop here. The organization qualifies						
h	33 1/3% support test - 2020. If the c		-		line 15 is 33 1/3%		
~	and stop here. The organization qual	-					
17a	10% -facts-and-circumstances test				e 13 16a or 16b		
	and if the organization meets the fact						
	meets the facts-and-circumstances te			-	rachization		
b	10% -facts-and-circumstances test	•	•		•		
	more, and if the organization meets th	-					
	organization meets the facts-and-circu						
18	Private foundation. If the organizatio						s ►
						Schedule A	(Form 990) 2021

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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.)

Section A. Public Support Calendar year (or fiscal year beginning in) (b) 2018 (c) 2019 (d) 2020 (a) 2017 (e) 2021 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 1098120 635,108. 745,109. 1061737. 752,672. 4292746. include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 156,782. 511,162. 485,318. 623,070. 1956913. organization's tax-exempt purpose 180,581. 3 Gross receipts from activities that are not an unrelated trade or business under section 513 5,757. 6,805. 5,269. 33,443. 51,274. 4 Tax revenues levied for the organization'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 1263076. 1284458. 797,159. 1547055. 1409185. 6300933. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 383,500. 325,839. 340,708. 341,500. 343,200. 1734747. 3 received from disqualified persons 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 154,030. 107,708. 182,063. 102,354. 546,155. 2280902. c Add lines 7a and 7b 325,839. 494,738. 449,208. 565,563. 445,554. 4020031. Public support. (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (c) 2019 (d) 2020 (f) Total (a) 2017 (b) 2018 (e) 2021 9 Amounts from line 6 1284458 797,159. 1263076. 1547055 1409185 6300933. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, 1,105. 988. 328. 304. 3,942. 1,217. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 1,217. 1,105. 988. 328. 304. 3,942. c Add lines 10a and 10b 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital 785. 549. 525. 388. 2,247. assets (Explain in Part VI.) 1285675. 799,049. 1264613. 1547908. 1409877. 6307122. 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► Section C. Computation of Public Support Percentage 63.74 % Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) 15 15 61.98 Public support percentage from 2020 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage .06 17 17 Investment income percentage for **2021** (line 10c, column (f), divided by line 13, column (f)) % .10 18 18 Investment income percentage from 2020 Schedule A, Part III, line 17 % 19a 33 1/3% support tests - 2021. 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 ► X more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization gualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions Schedule A (Form 990) 2021 132023 01-04-22

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2021.05080 BEYOND LEGAL AID

15

<u>Beyond</u> Legal Aid

1

Yes No

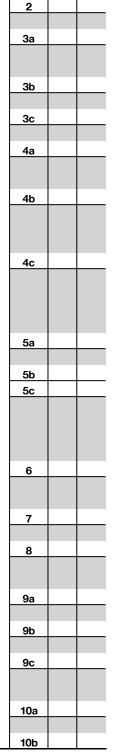
Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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Schedule A (Form 990) 2021

	(Form 990) 2021	Beyond		Aid
Part IV	Supporting Or	ganizations (con	tinued)	

1

2

Yes No

Yes No

			Yes	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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or	
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,	
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported	
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	
2	Did the organization operate for the benefit of any supported organization other than the supported	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

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

 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
 Image: Control organization control or managed

 the supported organization(s).
 Image: Control organization(s)
 Image: Control organization(s)

Sec	tion D. All Type	ons			

1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a		
	significant voice in the organization's investment policies and in directing the use of the organization's		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		
	supported organizations played in this regard.	3	

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organizat	tion used to satisfy the Int	tegral Part Test during the v	ear (see instructions).
•	Check the box hext to the method that the organizat		legial Fait Test during the y	

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c [The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instructions).	
------------	--	---	---	--

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

3b | | Schedule A (Form 990) 2021

2a

2b

3a

Sch	edule A (Form 990) 2021 Beyond Legal Aid			46-5386556 Page 6
_	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	ig Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyir	ig trust on N	Nov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	t complete	Sections A through E.	
Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	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		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
_4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
_				

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2021

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Schedule A (Form 990) 2021

Beyond Legal Aid

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued	d)	
Secti	on D - Distributions				Current Year
_1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
_7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		1	10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021		(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
c	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years			_	
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$			_	
<u>a</u>	Applied to underdistributions of prior years			_	
	Applied to 2021 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.			_	
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
e	Excess from 2021				

Schedule A (Form 990) 2021

Schedule A	(Form 990) 2021	Beyond	Legal	Aid			46-5386556	Page 8
Part VI	Supplemental Inform	mation. Prov	ide the exp	lanations re	quired by Part II, lir	ne 10; Part II, line 17a o	r 17b; Part III, line 12;	0
	Part IV, Section A, lines 1 line 1; Part IV, Section D,	, 2, 3b, 3c, 4b, lines 2 and 3: F	4c, 5a, 6, 9a Part IV. Sect	a, 9b, 9c, 11 ion E. lines 1	a, 11b, and 11c; P 1c. 2a. 2b. 3a. and	3b: Part V. line 1: Part	V. Section B. line 1e: Part	C, t V.
	Section D, lines 5, 6, and	8; and Part V, S	Section E, li	nes 2, 5, and	d 6. Also complete	this part for any addition	onal information.	,
	(See instructions.)							
132028 01-04-2	2						Schedule A (Form 9	90) 2021
				2	^			

SCHEDULE C	Po	litical Campaign a	and Lobbying	g Activities		OMB No. 1545-0047		
(Form 990) For Organizations Exempt From Income Tax Under section 501(c) and section 527						2021		
		•		.,		202 I		
Department of the Treasury Internal Revenue Service		if the organization is described to www.irs.gov/Form990 for i			J-EZ.	Open to Public Inspection		
-		Form 990, Part IV, line 3, or For			n Activit	•		
-		plete Parts I-A and B. Do not com		e 40 (Political Campaig		ues), ulen		
		1(c)(3)) organizations: Complete F	•	Do not complete Part I-E	3.			
 Section 527 organization 								
If the organization answ	wered "Yes," on	Form 990, Part IV, line 4, or For	m 990-EZ, Part VI, lin	e 47 (Lobbying Activiti	ies), ther	ı		
 Section 501(c)(3) org 	anizations that h	nave filed Form 5768 (election unc	ler section 501(h)): Cor	nplete Part II-A. Do not	complete	e Part II-B.		
 Section 501(c)(3) org 	ganizations that h	nave NOT filed Form 5768 (electio	n under section 501(h)): Complete Part II-B. Do	o not con	nplete Part II-A.		
-		Form 990, Part IV, line 5 (Proxy	Tax) (See separate in	structions) or Form 99	90-ЕZ, Р	art V, line 35c (Proxy		
Tax) (See separate inst		ianas Oamalata Dast III						
Name of organization	, or (6) organizat	ions: Complete Part III.		Er	mployor	identification number		
Name of organization	Beyond	Legal Aid				5-5386556		
Part I-A Compl	ete if the org	anization is exempt under	r section 501(c) o	r is a section 527	organi	zation.		
[<u> </u>				<u></u>			
1 Provide a description	on of the organiz	ation's direct and indirect political	campaign activities in	Part IV.				
2 Political campaign					►\$			
3 Volunteer hours for	political campai							
		-						
Part I-B Comple	ete if the org	anization is exempt unde						
		incurred by the organization unde						
		incurred by organization manager						
		n 4955 tax, did it file Form 4720 fo				Yes No		
4a was a correction mb If "Yes," describe ir						Yes No		
		anization is exempt unde	r section 501(c). e	except section 501	1(c)(3).			
-		by the filing organization for sect						
		ization's funds contributed to othe			•			
exempt function ac					►\$			
3 Total exempt functi		. Add lines 1 and 2. Enter here an						
line 17b				🕨	►\$			
4 Did the filing organi	zation file Form	1120-POL for this year?				Yes No		
		ployer identification number (EIN)						
		tion listed, enter the amount paid						
	•	omptly and directly delivered to a s additional space is needed, provic	· · ·	· ·	trate segr	regated fund or a		
		(b) Address	1	(d) Amount paid fror	~ <i>(a</i>	Amount of political		
(a) Name	÷	(b) Address	(c) EIN	filing organization's		tributions received and		
				funds. If none, enter -	0 p	romptly and directly		
						elivered to a separate olitical organization.		
						If none, enter -0		
	ion Act Nation	and the Instructions for Form 00	0 or 000 EZ	1	Coher			

21

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

Schedule C (Form 990) 2021

132041 11-03-21

2021.05080 BEYOND LEGAL AID

Schedule C (Form 990) 2021	Beyond Leg	al Aid			5386556 Page 2
Part II-A Complete if the org	anization is exe	empt under section	n 501(c)(3) and file	d Form 5768 (el	ection under
section 501(h)).					
A Check 🕨 🛄 if the filing organiza	tion belongs to an a	ffiliated group (and list ir	n Part IV each affiliated g	group member's nam	ie, address, EIN,
	e of excess lobbying				
B Check ▶ if the filing organiza	tion checked box A	and "limited control" pro	ovisions apply.		
Limi	ts on Lobbying Exp	enditures		(a) Filing organization's	(b) Affiliated group totals
(The term "expend	ditures" means amo	ounts paid or incurred.)	totals	totais
4. Total labbuing avpanditures to influ					
 1a Total lobbying expenditures to influ b Total lobbying expenditures to influ 					
 b Total lobbying expenditures to influ c Total lobbying expenditures (add li 	-	• • • •			
d Other exempt purpose expenditure					
e Total exempt purpose expenditure					
f_Lobbying nontaxable amount. Ente					
If the amount on line 1e, column (a) o		bbying nontaxable am			
Not over \$500,000		f the amount on line 1e.	11		
Over \$500,000 but not over \$1,000	0,000 \$100,0	000 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000 \$175,0	000 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000 \$225,0	000 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,00	0,000.			
g Grassroots nontaxable amount (en					
h Subtract line 1g from line 1a. If zer					
i Subtract line 1f from line 1c. If zero			•		
j If there is an amount other than ze		r line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this	-	veraging Period Under	Soction 501(b)		Yes No
(Some organizations t			• •	f the five columns b	elow.
		arate instructions for li	•		
	Lobbying Exp	enditures During 4-Ye	ar Averaging Period		
Calandan yaan					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
(e:					
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
-					
c Total lobbying expenditures		+			
d Grassroots postsychia amount					
d Grassroots nontaxable amount e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					
		1	1 1	Sched	lule C (Form 990) 2021

C (Form 990) 2

132042 11-03-21

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

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	ı)	(t)
	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
_	or referendum, through the use of:		x		
a L	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	x	Δ		
			X		
	Media advertisements? Mailings to members, legislators, or the public?		X		
	Publications, or published or broadcast statements?		X		
	Grants to other organizations for lobbying purposes?		X		
	Direct contact with legislators, their staffs, government officials, or a legislative body?		X		
-	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		
	Other activities?	Х			685.
j	Total. Add lines 1c through 1i				685.
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х		
	If "Yes," enter the amount of any tax incurred under section 4912				
	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?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5	ō), or sec	tion	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from t				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4)				0 :-
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"NO" UR	(b) Part i	II-A, IIne	3, 15
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polit	ical			
	expenses for which the section 527(f) tax was paid).				
	Current year				
	Carryover from last year				
-	Total				
3			3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	Dolitical			
5	expenditure next year? Taxable amount of lobbying and political expenditures. See instructions		4		
	t IV Supplemental Information		5		
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	n list): Part II .	Δ lines 1 o	nd 2 (See	
	ictions); and Part II-B, line 1. Also, complete this part for any additional information.	o 1.50, 1 alt 117	, iii co i a	10 2 (000	
	t II-B, Line 1, Lobbying Activities:				
- ~ -					

Staff attorneys spend time on cases involving lobbying.

Schedule C (Form 990) 2021

15420501 402354 160768

SCHEDU	LE D	Sı	upplementa	al Financial	Statement	S			OMB No. 1	<u>-</u>
(Form 990)			Complete if the orga	anization answered	"Yes" on Form 990),			20	21
Department of the	reasury	Part		, 11a, 11b, 11c, 11d, Attach to Form 990.		2b.			Open to	Public
Internal Revenue Se		►Go to w		90 for instructions a		nation.			Inspect	ion
Name of the o	organization	Beyond Le	egal Aid				Emp	-	entificatio 53865	n number 556
Part I (Organizatio	ons Maintaining	g Donor Advised	d Funds or Othe	r Similar Funds	or Ac	coun			
	-		orm 990, Part IV, line							
				(a) Donor ad	vised funds	(b) Fund	ds and ot	her accou	unts
1 Total nu	mber at end c	of year								
			ng year)							
		ants from (during ye								
4 Aggrega	te value at en	d of year								
5 Did the	organization ir	nform all donors and	d donor advisors in v	writing that the asset	s held in donor advis	sed fund	ls			
are the o	organization's	property, subject to	o the organization's e	exclusive legal contro	ol?				Yes	No No
				dvisors in writing that						
for chari	table purpose	s and not for the be	enefit of the donor or	r donor advisor, or fo	r any other purpose	conferri	ng			
impermi	ssible private	benefit?							Yes	No No
Part II 0	Conservation	on Econmonto				D	line 7			
1 Purpose	(s) of conserv	ation easements he	eld by the organizatio	ganization answered on (check all that app tion or education)	oly).			moortan	t land are	
1 Purpose	(s) of conserv eservation of otection of na eservation of	ation easements he land for public use ttural habitat open space	eld by the organizatic (for example, recreat	on (check all that app	oly). Preservation o Preservation o	of a histo of a certi	orically i fied his	toric stru	cture	
1 Purpose Pr Pr 2 Complet	(s) of conserv eservation of otection of na eservation of	ation easements he land for public use ttural habitat open space	eld by the organizatic (for example, recreat	on (check all that app tion or education)	oly). Preservation o Preservation o	of a histo of a certi	rically i fied his	toric stru ion easer	cture ment on tl	he last
1 Purpose Pr Pr 2 Complet day of th	(s) of conserv eservation of otection of na eservation of the lines 2a thro he tax year.	ation easements he land for public use ttural habitat open space	eld by the organizatic (for example, recreat nization held a qualifi	on (check all that app tion or education)	bly). Preservation o Preservation o Preservation o tribution in the form	of a histo of a certin of a cor	rically i fied his	toric stru ion easer	cture ment on tl	he last
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Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990. Part VIII line 1

			ቅ
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, pro	ovid	le
	the following amounts required to be reported under FASB ASC 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		\$

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Schedule D (Form 990) 2021

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2021.05080 BEYOND LEGAL AID

Sche	dule D (Form 990) 2021 Beyond	Legal Aid						46-53	8655	<u>бр</u>	age 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	easures, or	r Othe	r Simi	lar Assets	conti	nued)	
3	Using the organization's acquisition, accession	on, and other record	s, check	any of the	following that	make s	ignificar	nt use of its			
	collection items (check all that apply):										
а	Public exhibition	c	1 🗌 k	Loan or exc	change progra	am					
b	Scholarly research	e	•	Other							
с	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n how th	ey further th	he organizatio	n's exe	mpt pur	pose in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations of	of art, his	storical trea	sures, or othe	er simila	r assets		_		_
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arrange		ete if the	e organizatio	on answered "	'Yes" or	n Form 9	90, Part IV,	line 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.									
1a	Is the organization an agent, trustee, custodi								_		-
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing t	able:							
									Amour	t	
	Beginning balance										
	Additions during the year										
	Distributions during the year										
	•										7
	Did the organization include an amount on Fe						• • • •	∟	Yes		No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete i										
1 41		(a) Current year		Prior year	(c) Two year			e years back	(e) Fou	r vears	hack
10	Paginning of year balance	(a) Ourient year		nor year		5 Duon	(a) mit		(0) 1 00	yours	buok
1a 5	Beginning of year balance										
u o	Contributions										
d	Grants or scholarships										
	Other expenditures for facilities										
e											
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent vear end balance	e (line 1c	n column (a)) held as:						
a	Board designated or quasi-endowment		%	y, e e la la la la la	,,,						
	Permanent endowment										
		<u></u> /-									
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.									
3a	Are there endowment funds not in the posse		ation tha	t are held a	nd administer	ed for th	ne orgar	nization			
	by:	C C					Ū.			Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza								Зb		
4	Describe in Part XIII the intended uses of the		wment f	unds.							
Par	t VI _ Land, Buildings, and Equipm	ent.									
	Complete if the organization answere	d "Yes" on Form 990), Part IV	/, line 11a. S	See Form 990	, Part X,	, line 10.				
	Description of property	(a) Cost or o basis (investr			t or other (other)	• •	Accumul epreciati		(d) Boo	k valu	е
1a	Land										
b	Buildings										
с	Leasehold improvements										
	Equipment										
	Other										
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X. colur	<u>nn (B). line 1</u>	0c.)			🕨			0.
								Cabad		- 000	0004

Schedule D (Form 990) 2021

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	on Form 990, Fart IV, line	TID. See FOITI 990, Fait A, IIIle 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
<u>(C)</u>			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ► Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990. Part IV. line 1	11c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-vear market value
			a or your market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990 Part IV line 1	11d See Form 990 Part X line 15	
	Description		(b) Book value
	Description		
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	45)	`	
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	:::::::::::::::::::::::::::::::::::::::		1
			-
Complete if the organization answered "Yes"	on Form 990, Part IV, line	The of Th. See Form 990, Part X, line 23	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line			
2. Liability for uncertain tax positions. In Part XIII, provide			that reports the

X organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2021

15420501 402354 160768

		(Form 990)		Beyond		Aid
Part	: VII	Investn	nents ·	 Other Securit 	ties.	

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

(,,,,,,,,,,,,,,	()	(-,
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line ⁻	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		

Sche	dule D (Form 990) 2021 Beyond Legal Aid			46-5	5386556	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With F				0
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.				
1	Total revenue, gains, and other support per audited financial statements			1	1,470,	,583.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a				
b	Donated services and use of facilities		60,283.			
с	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)					
е	Add lines 2a through 2d			2e		,283.
3	Subtract line 2e from line 1			3	1,410,	,300.
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.)					
с	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,410	,300.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	nents With	Expenses per F	Returr	າ.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12:	a.				
1	Total expenses and losses per audited financial statements			1	1,305,	,420.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	. 2a	60,283.			
b	Prior year adjustments	2b				
с	Other losses					
d	Other (Describe in Part XIII.)					
е	Add lines 2a through 2d			2e	60 1,245	,283.
3	Subtract line 2e from line 1			3	1,245,	<u>,137.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,245	,137.
Pa	t XIII Supplemental Information.					
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par	t IV, lines 1b a	nd 2b; Part V, line 4	; Part X	K, line 2; Part X	ïl,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ad	ditional inform	ation.			

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,						
132054 10-28-21 Schedule D (Form 990) 202 27	21					
15420501 402354 160768 2021.05080 BEYOND LEGAL AID 1607	68_1					

Schedule D (Form 990) 2021 Beyond Legal Aid 46-5386556 Page
Part XIII Supplemental Information (continued)
Return of Organization Exempt from Income Tax, is subject to examination
by the IRS, generally for three years after it has been filed.
The Organization has adopted the requirements for accounting for uncertain
tax positions and management has determined that the Organization was not
required to record a liability related to uncertain tax positions as of
June 30, 2022.
Schedule D (Form 990) 20

132055 10-28-21

15420501 402354 160768

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047 2021

Department of the Treasury
Internal Revenue Service

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

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

	Open to Public Inspection
Employer	identification number

46 - 5386556

Name of the organization

Beyond Legal Aid

Par	TI Types of Property						
		(a)	(b)	(c)	(d)		
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of de	•	1
		applicable		Form 990, Part VIII, line 1g	noncash contribu	tion amoun	IS
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded						
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other (Program softw)	X	1	34,800.	FMV		
26	Other ► ()						
27	Other ► ()						
28	Other 🕨 ()						
29	Number of Forms 8283 received by the organiz	-					
	for which the organization completed Form 828	83, Part V, D	onee Acknowledg	ement			
						Yes	No
30a	During the year, did the organization receive by						
	must hold for at least three years from the date		l contribution, and	which isn't required to be u	sed for		
	exempt purposes for the entire holding period?					30a	<u> </u>
b	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance p				tions?	31	<u> </u>
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash			<u></u>
	contributions?					32a	X
	If "Yes," describe in Part II.						
33	If the organization didn't report an amount in co	olumn (c) foi	r a type of property	r for which column (a) is che	cked,		

describe in Part II.

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

Schedule M (Form 990) 2021

132141 11-17-21

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

132142 11-17-21	Schedule M (Form 990) 2021

SCHEDULE	0
(Form 990)	

Name of the organization

46-5386556

Beyond Legal Aid

Form 990, Part III, Line 1, Description of Organization Mission:

clinics" within and co-operated by communities. Beyond accomplishes its

two principal objectives at once: provide cost-effective legal services

to underserved individual clients and help our activist partners

achieve broader social change. Through our work, Beyond seeks to change

not only how the legal aid system operates but also how lawyers and

activists work together.

Form 990, Part VI, Section A, line 2:

The Vice-President of the Board and the Executive Director are in a

domestic relationship and own a house together.

Form 990, Part VI, Section B, line 11b:

The Form 990 was reviewed by the Board of Directors prior to filing.

Form 990, Part VI, Section B, Line 12c:

A Case Managment Program checks for conflicts of interest 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 comparisons, 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:

2021.05080 BEYOND LEGAL AID

Schedule O (Form 990) 2021	Page 2
Name of the organization	Employer identification number
Beyond Legal Aid	46-5386556

The governing documents and financial statements are available on the

Organization's website.

Form 990, Part XII, line 2c:

The process has not changed from the prior year.

Schedule O (Form 990) 2021

132212 11-11-21