

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Organization Exempt From Income Tax

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ▶The organization may have to use a copy of this return to satisfy state reporting requirements.

A	For th	e 2012 ca	lendar year, or tax year beginning 10/1/2012 , and e		30/2013	
В	Check if	applicable	C Name of organization Peace and Justice Center	D Employe	er identificatio	n number
	Address	change	Doing Business As	03-028147	2	
	Name ch	hange	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telephor	ne number	
	Initial ret	tum	60 Lake Street	(802) 863-	2345	
	Termina	ted	City, town or post office, state, and ZIP code			
	Amende	d return	Burlington VT 05401	G Gross re	ceipts \$	254,774
	Applicati	on pending	F Name and address of pnncipal officer	H(a) is this a group re	turn for affiliate	s? Yes X No
			Rachel Siegel	H(b) Are all affiliates in	ncluded?	Yes No
1	Tax-exen	npt status	X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527	If "No," attach a	ist. (see instru	ctions)
			w.pjcvt.org	H(c) Group exemption	number >	
						of Local demons
		organization		r of formation 1979	I M State C	of legal domicile VT
	art I		mmary	mission of the De	and luc	rtion Conton in to
	1		lescribe the organization's mission or most significant activities: The label intercor	mission of the Pea		
. 0	1		nd human rights.	illected issues of	economic s	ii io sociai lustice
nanc	1	<u>beace a</u>	niu numan ngms.			
ല ട്രീസ്. Governance		Charle 4	his box if the organization discontinued its operations or dispose	d of more than 25	0/ of ita not	
ම ලි	2		of voting members of the governing body (Part VI, line 1a)		3	1 assets.
) ජේ	3		of independent voting members of the governing body (Part VI, line 1a)		4	<u>'</u> 7
计算	5		imber of individuals employed in calendar year 2012 (Part V, line 2a) .		5	7
Activities &	6		imber of individuals employed in calendar year 2012 (Fait V, line 2a).		6	65
` •	7a		related business revenue from Part VIII, column (C), line 12		7a	0
9	b		elated business taxable income from Form 990-T, line 34		7b	
; 	 ~	1101 0111	Satisfa Basilioso taxasis illositis well a situation of the second	Prior Year		Current Year
	8	Contribu	utions and grants (Part VIII, line 1h)	8	8,079	115,533
Revenue	9		n service revenue (Part VIII, line 2g)		0	0
e e	10	_	ent income (Part VIII, column (A), lines 3, 4, and 7d)		441	5
œ	11		evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4	6,307	86,447
	12	Total rev	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13	4,827	201,985
	13	Grants a	and similar amounts paid (Part IX, column (A), lines 1–3)		0	0
	14		paid to or for members (Part IX, column (A), line 4)	0	0	
S	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,275	96,823	
Expenses	16a		ional fundraising fees (Part IX, column (A), line 11e)	Jakon Torres Children State	0	0
ž	b		ndraising-expenses-(Part IX, column (D), line 25) ▶0			经验证证证
ш	17		penses (Part IX, column (A), lines 11a–11d, 11f–24e)		5,943	98,044
	18	Total-ex	penses: Add lines 13417 (must equal Part IX, column (A), line 25)		7,218	194,867
	19	Revenue	e less expenses. Subtract line 18 from line 12		2,391	7,118
Net Assets or		₩ 00	1001	Beginning of Curren		End of Year 45,840
\SS6	20		sets (Part X_line_16) S		7,468 7,051	18,305
ž Ę	21 22		ets or fund balances. Subtract line 21 from line 20		0,417	27,535
	irt II		nature Block		0,7111	27,000
Und	er penalti	les of periun	y, I declare that I have examined this return, including accompanying schedules and statement	ts, and to the best of m	y knowledge	
and	belief, it i	is true, corre	ct, and complete Declaration of prepare? (other than officer) is based on all information of whi	ch preparer has any kr	owledge	
Sig	ın		Mude a GIN Swan	1 ·	28 20	14
	-		Signature of officer	Date		
He	16	 	Andrea E.M. Swan Board member			
			Type or print name and title			
_			Type preparer's name Preparer's signature	Date	Check	PTIN
Pa			Martha About !: Martha Abbott	1 1 1 1 1 1 1 1 1	self-employed	PØ1251582
	parer	·	Indopendent Tay Contine Inc.		03-0302	
Us	e Only	<i>,</i> —	1 Mill Chand Harman		802)86	
				Trilone no (DU 21 00	
			s this return with the preing to தை லா a65401 see instructions)	· · · · · ·	<u>· · · · </u>	X Yes No
For	Paperv	vork Redu	action Act Notice, see the separate instructions.			Form 990 (2012)

916

For Paperwork Reduction Act Notice, see the separate instructions.

orm 99	0 (2012)	Peace and Justice Center	03-0281472	Page 2
Par	t III	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III.		. 🗆
	The Per	describe the organization's mission: ace and Justice Center partners with many organizations and community programs on issues of peace and human rights as well as promoting the display and sale of a variety of books, clothes t cultures.		
	the prio	organization undertake any significant program services during the year which were not listed or Form 990 or 990-EZ? ' describe these new services on Schedule O.	Yes	X No
3	Did the services	organization cease conducting, or make significant changes in how it conducts, any program	Yes	X No
4	Describ expense	e the organization's program service accomplishments for each of its three largest program serves. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and expenses, and revenue, if any, for each program service reported		
	The Per films on trade ar also par Internat Skies. opportu	nd other issues that promote human rights and social justice. The Peace and Justice Center	d	
4b) (Expenses \$ including grants of \$) (Rever		
4c	(Code:) (Expenses \$ including grants of \$) (Reven	ue \$)
	Other p	rogram services. (Describe in Schedule O) ses \$ 0 including grants of \$ 0) (Revenue \$	0)	
	_	rogram service expenses > 168.311		

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,"	ł	l E	l
	complete Schedule A	1_1_	X	ـــــ
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	<u> </u>
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		×
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		×
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		<u> </u>
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		×
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	,	,	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a	Χ	L
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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? If "Yes," complete Schedule D, Part VIII.	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	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)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			l
	Schedule D, Parts XI and XII	12a		L _X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"			١.,
	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
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	146		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	140		
13	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
• •	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18]	Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
00-	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," complete Schedule H	20a 20b		
IJ	in the to mie zoa, dig the diganization attach a copy of its addited infancial statements to this fetunit	1-00	I	

Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23	}	×
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			ļ
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			!
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	MARTINE.	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			ŀ
	Part I	31		X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32		X
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,	133		 ^ -
34	III, or IV, and Part V, line 1	34		Х
352	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		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	1		
00	organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			_
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
_	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
			000	

Form 990 (2012) Peace and Justice Center Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response to any question in this Part V. Yes No Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . . . 0 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 1c 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. If at least one is reported on line 2a, did the organization file all required federal employment tax returns?. 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . 3a 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?............... 4a If "Yes," enter the name of the foreign country: ▶ b See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . 5b C If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a organization solicit any contributions that were not tax deductible as charitable contributions? 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or b 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a Х X 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? . С Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7с If "Yes," indicate the number of Forms 8282 filed during the year d е Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . 7g g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 8 organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring 8 Sponsoring organizations maintaining donor advised funds. 9 а Did the organization make any taxable distributions under section 4966?. 9a Did the organization make a distribution to a donor, donor advisor, or related person? 9b b Section 501(c)(7) organizations. Enter: 10 а Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b b 11 Section 501(c)(12) organizations. Enter: 11a а Gross income from other sources (Do not net amounts due or paid to other sources 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

Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which

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

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

Is the organization licensed to issue qualified health plans in more than one state? . . .

Section 501(c)(29) qualified nonprofit health insurance issuers.

13

13a

14a

13b 13c Part VI

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

Sect	on A. Governing Body and Management	· · · · · · · · · · · · · · · · · · ·							
	1			Yes	No				
1a		<u>1a 7</u>							
	If there are material differences in voting rights among members of the governing body, or				١. ١				
	if the governing body delegated broad authority to an executive committee or similar								
	committee, explain in Schedule O	41 7							
D	Employed the management of the	1b 7			1				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation	nsnip with			- :				
_	any other officer, director, trustee, or key employee?		2		<u> </u>				
3	Did the organization delegate control over management duties customarily performed by or under		3		Х				
	supervision of officers, directors, or trustees, or key employees to a management company or other person?								
4									
5	Did the organization become aware during the year of a significant diversion of the organization's	s assets?	<u>5</u>		X				
6 7a	Did the organization have members or stockholders?	r appoint	-		 ^-				
ı a	one or more members of the governing body?	or appoint	7a	1	x				
b	Are any governance decisions of the organization reserved to (or subject to approval by) member		/a		-^-				
D	stockholders, or persons other than the governing body?	10,	7b	' I	х				
8	Did the organization contemporaneously document the meetings held or written actions undertail	en during			7-5-9				
•	the year by the following:	torr during							
а	The governing body?		8a	$\bar{\mathbf{x}}$					
b	Each committee with authority to act on behalf of the governing body?		8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be	e reached							
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х				
Sect	on B. Policies (This Section B requests information about policies not required by the In	ternal Revenue Co	de.)						
				Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?		10a		X				
b	If "Yes," did the organization have written policies and procedures governing the activities of suc	h chapters,							
	affiliates, and branches to ensure their operations are consistent with the organization's exempt		10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body befo	re filing the form?.	11a	X					
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				لــــا				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	 -				
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could g	live rise to conflicts?	12b	X	 				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? describe in Schedule O how this was done	ır Yes,	420	х					
42	Did the organization have a written whistleblower policy?		12c	x					
13	Did the organization have a written document retention and destruction policy?		14	X					
14 15	Did the process for determining compensation of the following persons include a review and app		<u> </u>		३ १७६				
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation	on and decision?			(y,)				
а	The organization's CEO, Executive Director, or top management official.		15a	Х	لمست				
b	Other officers or key employees of the organization		15b	X					
•	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				4				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arra	ngement							
			16a		Х				
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to eva-	aluate its							
	participation in joint venture arrangements under applicable federal tax law, and take steps to sa								
	the organization's exempt status with respect to such arrangements?	<u> </u>	16b						
Sect	ion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ► NONE								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 9	990-T (Section 501(:)(3)s	only))				
	available for public inspection. Indicate how you made these available Check all that apply.								
		olain ın Schedule O)							
19	Describe in Schedule O whether (and if so, how), the organization made its governing document	s, comilict of interest							
20	policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the book	re and records of the							
20									
	organization: Wendy Coe 60 Lake Street Burlington VT 05401	(002) 000-20	/TY						

	•	
Form 990 (2012)	Peace and Justice Center 03-0281472	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	
	Employees, and Independent Contractors	
	Check if Schedule O contains a response to any question in this Part VII	
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	
1a Complete organization's	this table for all persons required to be listed. Report compensation for the calendar year ending with or within the stax year	
	of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount tion. Enter -0- in columns (D), (E), and (F) if no compensation was paid.	

- List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. Position (do not check more than one (A) (B) (E) Reportable Name and Title Average box, unless person is both an Reportable Estimated hours per officer and a director/trustee) compensation compensation amount of week (list any from from related other Individual trustee employee or director Institutional trustee Key employee Highest compensated hours for the organizations compensation (W-2/1099-MISC) related organization from the (W-2/1099-MISC) organizations organization below dotted and related line) organizations (1) Autumn Barnett 2 hrs/mo Х Chair (2) Spencer Putnam 12 hrs/mo Х X Secretary-Treasurer (3) Linda Ayer 6 hrs/mo Х 2 hr/smo (4) Judith Yarnall Х 2 hrs/mo (5) David Shiman 0 (6) Nathan Suter 2 hrs/mo 0 2 hrs/mo (7) Andrea Swan Х ol (8) Wendy Coe 10 hrs/wk **Financial Director** 9,711 (10) (11) (12) (13)

03-0281472

art VII Section A. Officers, Directors, Tr	Trustees, Key Employees, and Highes							Compensated	d Employees (continued)			
(A) Name and title	(B) Average hours per	box, office	unles er and	Pos eck s pe d a d	more rson	is both	n an tee)	(D) Reportable compensation	compensa:	tion	(F) Estimated amount of	
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	trom the organization (W-2/1099-MISC)	organizatio	ons	other compensation from the organization and related organizations	
												
					-							
							-			_		
									<u> </u>	-		
												
					-			<u> </u>				
					-							
							-					
									-		·	
										0	(
								<u>_</u>			(
Total number of individuals (including but not l	imited to those	listed	i ab	ove 0) wt	no re						
									ed		Yes No	
											4 X	
									ndividual · · · · ·		5 X	
												
											n's tax	
(A) Name and business address								(B) Description of ser	vices	C	(C) ompensation	
											0	
								 			0	
		nited •	to th	nose	e lis	ted a	ibov	ve) who received				
	Sub-total . Total from continuation sheets to Part VII, S Total (add lines 1b and 1c). Total number of individuals (including but not I reportable compensation from the organization Did the organization list any former officer, dir employee on line 1a? If "Yes," complete Scher For any individual listed on line 1a, is the sum the organization and related organizations gre individual . Did any person listed on line 1a receive or acc for services rendered to the organization? If "Y tion B. Independent Contractors Complete this table for your five highest comp compensation from the organization. Report or year. (A) Name and business additional number of independent contractors (including the properties).	Sub-total Total from continuation sheets to Part VII, Section A Total from continuation sheets to Part VII, Section A Total from continuation sheets to Part VII, Section A Total fadd lines 1b and 1c). Total number of individuals (including but not limited to those reportable compensation from the organization Did the organization list any former officer, director, or trusted employee on line 1a? If "Yes," complete Schedule J for such For any individual listed on line 1a, is the sum of reportable content the organization and related organizations greater than \$150, individual Did any person listed on line 1a receive or accrue compensate for services rendered to the organization? If "Yes," complete tition B. Independent Contractors Complete this table for your five highest compensated indepe compensation from the organization. Report compensation for year. (A) Name and business address	Sub-total Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c). Total number of individuals (including but not limited to those listed reportable compensation from the organizations greater than \$150,000? individual Did any person listed on line 1a, is the sum of reportable compensation and related organizations greater than \$150,000? individual Did any person listed on line 1a receive or accrue compensation for for services rendered to the organization? Complete this table for your five highest compensated independent compensation from the organization. Report compensation for the year. (A) Name and business address Total number of independent contractors (including but not limited) Total number of independent contractors (including but not limited)	Sub-total Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c). Did the organization list any former officer, director, or trustee, key employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation to organization and related organizations greater than \$150,000? If "individual". Did any person listed on line 1a receive or accrue compensation from for services rendered to the organization? If "Yes," complete Schedule J for such individual. Did any person listed on line 1a receive or accrue compensation from for services rendered to the organization? If "Yes," complete Schedule J for such individual. Did any person listed on line 1a receive or accrue compensation from for services rendered to the organization? If "Yes," complete Schedule J for such individual. Did any person listed on line 1a receive or accrue compensation from for services rendered to the organization? If "Yes," complete Schedule J for such individual. Did any person listed on line 1a receive or accrue compensation from for services rendered to the organization? If "Yes," complete Schedule J for such individual. Did any person listed on line 1a receive or accrue compensation from for services rendered to the organization? If "Yes," complete Schedule J for such individual individual. Name and business address	Name and title (a) Average hours per any hours for related organizations below dotted line) Average hours per and a compensation of time Average hours per and a compensation Average hours per and a com	Average hours per view (list any hours for related organizations below dotted lime) Sub-total Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c). Total number of individuals (including but not limited to those listed above) will reportable compensation and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any un for services rendered to the organization. Report compensated independent contractors (complete this table for your five highest compensated independent contractors compelset in the organization from the organization. Report compensation for the calendar y year. (A) Name and business address Total number of independent contractors (including but not limited to those listed to those list of the calendar y year. (A) Name and business address	(A) Name and title Average hours per week (last any hours for related organization and related organization sheets to Part VII, Section A Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c). Did the organization list any former officer, director, or trustee, key employee, or I employee on line 1a? If "Yes," complete Schedule J for such individual For any individual isted on line 1a, is the sum of reportable compensation and oth the organization and related organization? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelate for services rendered to the organization? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelate for services rendered to the organization? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelate for services rendered to the organization? If "Yes," complete Schedule J for such jinch is the organization and related organization? If "Yes," complete Schedule J for such jinch is the organization and related organization? If "Yes," complete Schedule J for such jinch is the organization and related organization? If "Yes," complete Schedule J for such jinch is the organization and related organization? If "Yes," complete Schedule J for such jinch is the organization and related organization? If "Yes," complete Schedule J for such jinch is the organization and related organization? If "Yes," complete Schedule J for such jinch is the organization and related organization? If "Yes," complete Schedule J for such jinch is the organization and related organization and rela	(A) Name and bitle (B) Average hours per week (tied any hours for grantations below dotted hine) (C) Position (do not check more than one botter and a director/instee). (R) (R) Average hours per week (tied any hours for grantations below dotted hine) (R) (R) Average hours per week (tied any hours for grantations below dotted hine) (R) (R) (R) Average hours per week (tied any hours for grantations below dotted hine) (R) (R) (R) (R) (R) (R) (R) (R) (R) (Companies Comp	(A) Name and title (B) Average week (list any hours for related to those issed above) who received more than \$100,000 of reportable compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual in the organization or individual for services rendered to the organization from the organization or individual. (C) Reportation from the property of the	Co Pousbox Co	

7.	•	1							
Form 9	, 90 (20 [.]	12) Peace and Justice Center						03-0281	1472 Page \$
Par	t VIII								
		Check if Schedule O contain	s a respons	e to	any question in t				
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
"	1a	Federated campaigns		1a	0		<u>-</u>		
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues		1b	0				
P. E	С	Fundraising events		1c	0				
sifts ar A	d	Related organizations		1d	0				
ıs, G imil	е	Government grants (contribution		1e	0			•	
ıtior er S	f	All other contributions, gifts, gra							
rib.		similar amounts not included ab		1f	115,533				
Sont and	g	Noncash contributions included in I		\$	0				
	h	Total. Add lines 1a-1f				115,533			
ne	_				Business Code				
Program Service Revenue	2a					0			
e R	b					0			
5	C					0	·		
Se	a					0			
E	e	All other program consider reven				0			
rog	T	All other program service revenue Total. Add lines 2a–2f.				0			
	<u>g</u>	Investment income (including di	udonde inte		- · · · · - 			****	
	١ ،	other similar amounts)		5163	L, and	5			
	4	Income from investment of tax-e		l pro	nceeds	0			·
	5	Royalties	•			0			
•1		rtoyanios	(ı) Real	···	(II) Personal				
	6a	Gross rents							-
	b	Less: rental expenses							
	С	Rental income or (loss)		0	0				
	d	Net rental income or (loss)			·	0			
	7a	Gross amount from sales of	(ı) Securitie	es	(II) Other				·
		assets other than inventory		0	0				
	b	Less: cost or other basis							
		and sales expenses		0					
	C	Gain or (loss)		0	0				

Other Revenue

d Net gain or (loss) . .

8a Gross income from fundraising

Total revenue. See instructions

events (not including \$ 0 of contributions reported on line 1c) See Part IV, line 18 **b** Less: direct expenses . . c Net income or (loss) from fundraising events . 9a Gross income from gaming activities. See Part IV, line 19.

0 **b** Less: direct expenses c Net income or (loss) from gaming activities . 10a Gross sales of inventory, less returns and allowances 139,236 52,789 **b** Less: cost of goods sold.

86,447 c Net income or (loss) from sales of inventory . **Business Code** Miscellaneous Revenue 11a 0 ol d All other revenue . . . ol e Total. Add lines 11a-11d. ▶

201,985

86,447

	t IX Statement of Functional Expenses			03-028	14/2 Page 1
	t IX Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete al	I columns All other	organizations mus	t complete column	(Δ)
Seci	Check if Schedule O contains a response to any			e compicte column	[7]
	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising
1	Grants and other assistance to governments and		expenses	general expenses	expenses
•	organizations in the United States. See Part IV, line 21	0		ļ	
2	Grants and other assistance to individuals in the				
-	United States See Part IV, line 22	o		,	
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	1		1	, * ,
	United States See Part IV, lines 15 and 16 .	o			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	9,711		9,711	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	}		i	
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	74,670	74,670		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	12,442	11,011	1,431	
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
C	Accounting	240		240	
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	45		45	
12	Advertising and promotion	4,121	4,121		
13	Office expenses	2,918	2,334	584	
14	Information technology	2,608	2,086	522	
15	Royalties	0			
16	Occupancy	37,637	30,110	7,527	
17	Travel	0			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	165		165	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization.	777	688	89	
23	Insurance	3,382	1,166	2,216	
24	Other expenses. Itemize expenses not covered	1	[[* * * * * * * * * * * * * * * * * * * *
	above (List miscellaneous expenses in line 24e If	j	}	[
	line 24e amount exceeds 10% of line 25, column		}	-	
	(A) amount, list line 24e expenses on Schedule O)	4 405	2 200	005	
a	Printing and postage	4,125	3,300	825	
b	Development and communications	3,089	3,089		
C	Dues and publications	330	330		
d	Policy and Advocacy	35,406	35,406		
е	All other expenses Merchant and bank fees	3,201	400 044	3,201	
25	Total functional expenses. Add lines 1 through 24e	194,867	168,311	26,556	
26	Joint costs. Complete this line only if the	}	ì	ł	
	organization reported in column (B) joint costs	}	}	ł	
	from a combined educational campaign and	}	}	ł	
	fundraising solicitation. Check here If	}		4	
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response to	o any question in this Part X	<u></u>		·_ <u>.</u>
	·		_	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		7,049	1	8,226
	2	Savings and temporary cash investments			2	
	3			0	3	0
	4	Accounts receivable, net		0	4	0
	5	Loans and other receivables from current and		. 1	Ì	
		trustees, key employees, and highest compen Complete Part II of Schedule L	sated employees.		5	ن .
	6	Loans and other receivables from other disqualified personal			,	
		4958(f)(1)), persons described in section 4958(c)(3)(B), a			, - g	
		sponsoring organizations of section 501(c)(9) voluntary e			,	
र		organizations (see instructions). Complete Part II of Sche		-	6	not record
Assets	7	Notes and loans receivable, net		0	7	0
As	8	Inventories for sale or use		19,597	8	37,569
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or				-
	'0"	other basis. Complete Part VI of Schedule D	10a 145,315			
	ь	Less. accumulated depreciation		4	10c	45
	11	Investments—publicly traded securities		0	11	0
	12	Investments—other securities. See Part IV, lin		0	12	0
	13	Investments—program-related. See Part IV, III	0		0	
	14	Intangible assets	0		- 0	
	15	Other assets See Part IV, line 11			15	0
	16	Total assets. Add lines 1 through 15 (must ed		27,468		45,840
	17	Accounts payable and accrued expenses		2,051	17	4,305
	18	Grants payable			18	
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities	· · · · · · · · · · · · · · · · · · ·	20		
	21	Escrow or custodial account liability Complete			21	
S	22	Loans and other payables to current and form				
Liabilities		trustees, key employees, highest compensate				.
Ē		disqualified persons. Complete Part II of Sche			22	
Ë.	23	Secured mortgages and notes payable to unre		0	-	0
	24	Unsecured notes and loans payable to unrelate		5,000		14,000
	25	Other liabilities (including federal income tax,				
		parties, and other liabilities not included on lin	es 17-24). Complete			
				0	25	0
	26	Total liabilities. Add lines 17 through 25		7,051	26	18,305
		Organizations that follow SFAS 117 (ASC 9	58), check here▶ and			~ , !;
S		complete lines 27 through 29, and lines 33				}
ဋ		•		•	27	
<u>a</u>	27	Unrestricted net assets		· · · · · · · · · · · · · · · · · · ·	28	
8	28	Temporarily restricted net assets			29	
Ĕ	29	Permanently restricted net assets			-20	3 2 3144
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC958) complete lines 30 through 34.				
ష	30	Capital stock or trust principal, or current fund	S		30	
SS	31	Paid-in or capital surplus, or land, building, or	equipment fund		31	
t۸	32	Retained earnings, endowment, accumulated	income, or other funds	20,417	32	27,535
Se	33	Total net assets or fund balances		20,417	33	27,535
	34	Total liabilities and net assets/fund balances .		27,468	34	45,840

Form 9	990 (2012) Peace and Justice Center	03-	0281472	Pag	_{je} <u>12</u>
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		<u> </u>	[<u></u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		201	,985
2	Total expenses (must equal Part IX, column (A), line 25)	2		194	,867
3	Revenue less expenses. Subtract line 2 from line 1	3		7	,118
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		20	,417
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6	<u> </u>		
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		<u>27</u>	,535
<u>Part</u>	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	· ·	···		_ <u>_</u>
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		_ }	- 1	[
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		}		
	Schedule O.				: لــــ ا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both		1 [- [
	Separate basis Consolidated basis Both consolidated and separate basis			- 1	
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		1		
	separate basis, consolidated basis, or both:		}	- }	
	Separate basis Consolidated basis Both consolidated and separate basis		}	- 1	1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh	of		- 1	
•	the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.			1	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133? .		. 3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	}	
			Form	9 90 (2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Open to Public

OMB No 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury ► Attach to Form 990 or Form 990-EZ.

▶See separate instructions. Employer identification number

Peac	e an	d Justice Cen	iter						İ	03-02	<u> 281472</u>		
Pai	t I	Reason	for Public Ch	arity Status (All org	anization	ns must o	complete	this par	t) See in	struction	ıs.		
The	orgar	nization is not	a private founda	ation because it is: (Fe	or lines 1	through 1	1, check	only one	box.)				
1		A church, co	nvention of chui	rches, or association of	of churche	es describ	ed in sec	tion 170((b)(1)(A)(i	i).			
2		A school des	scribed in <mark>sectio</mark>	on 170(b)(1)(A)(ii). (Ai	ttach Sch	edule E)							
3		A hospital or	a cooperative h	nospital service organi	ization de	scribed in	section	170(b)(1)	(A)(iii).				
4			search organiza	ition operated in conju	inction wi	th a hosp	ıtal descri	bed in se	ction 170)(b)(1)(A)	(iii). En	ter the	
5		An organizat	tion operated for	the benefit of a collection (Complete Part II.)	ge or univ	ersity owi	ned or op	erated by	a govern	mental ur	nit desc	ribed	
6			A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7	X	An organizat	tion that normall	y receives a substanti (1)(A)(vi). (Complete	al part of					or from th	e gener	al pub	lic
8		A community	trust described	in section 170(b)(1)	(A)(vi). (C	omplete i	Part II.)						
9		An organizat	tion that normall	y receives: (1) more th	han 33 1/3	3% of its	support fr				-	_	
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)											
10		An organizat	tion organized a	nd operated exclusive	ly to test	for public	safety S	ee sectio	n 509(a)(4).			
11	同	An organizat	tion organized a	nd operated exclusive	ly for the	benefit of	, to perfo	m the fur	nctions of,	or to car	ry out th	ne	
				olicly supported organ									on
		509(a)(3). CI	heck the box tha	at describes the type o	of support	ing organ	ızation an	d comple	te lines 1	1e throug	h 11h.		
		a Type	I b T	ype II 🛚 c 🔲 Type	III-Func	tionally in	tegrated	d 🔲 T	ype III–N	on-functio	nally in	tegrate	ed
е		By checking	this box, I certify	y that the organization	is not co	ntrolled d	rectly or	indirectly	by one or	more dis	qualifie	d	
		persons other	er than foundation	on managers and othe	er than on	e or more	publicly s	supported	l organiza	itions des	cribed i	n secti	on
		509(a)(1) or	section 509(a)(2	2).									
f		_		a written determination		RS that	ıt is a Typ	e I, Type	II, or Typ	e III supp	orting		
_			, check this box			 	 المحالف المالسة		of the				Ш
9		following per		the organization acce	pied any	giit or con	Ittibution	ioni any i	oi tile				
				or indirectly controls,	either alo	ne or toge	ether with	persons o	described	in (ii)		Yes	No
				verning body of the su							11g(i)		
				person described ın (i							11g(ii)		
		(iii) A 35%	controlled entit	y of a person describe	ed in (i) or	(ii) above	₽?				11g(lii)		
<u>h</u>		Provide the f	following informa	ation about the suppor	rted organ	nization(s))		,				
(1)		of supported	(ii) EIN	(iii) Type of organization			(v) Did y	ou notify		ls the	(vii) Am	ount of mo	onetary
	org	anızatıon		(described on lines 1–9 above or IRC section		sted in your document?		nization in of your		tion in col ized in the		support	
				(see instructions))	3			oort?		S?	1		
					Yes	No	Yes	No	Yes	No	<u> </u>		
(A)													
(B)		·											
(C)													
(D)													
(E)													
_					J	J ,]		j]			

0

Total

03-0281472 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III)

	ion A. Public Support	() 0000		(-) 0040 T	411 0044	(-) 0040	(D. T. t. l
Cale	ndar year (or fiscal year beginning in) 🕨 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	165,945	204,763	86,416	88,079	115,533	660,736
2	Tax revenues levied for the organization's						
	benefit and either paid to or expended on				ļ		
	ıts behalf						0
3	The value of services or facilities				i	Ì	
	furnished by a governmental unit to the						
	organization without charge		- · · · · ·				0
4	Total. Add lines 1 through 3	165,945	204,763	86,416	88,079	115,533	660,736
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)						58,325
6	Public support. Subtract line 5 from line 4					-	602,411
Sect	ion B. Total Support				-		
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	165,945	204,763	86,416	88,079	115,533	660,736
8	Gross income from interest, dividends,	100,010			30,0.0	7,10,000	
•	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	136	58	26	441	5	666
9	Net income from unrelated business	100		20			
3	activities, whether or not the business is						
	regularly carried on						0
40	Other income. Do not include gain or				_		
10							
	loss from the sale of capital assets						0
44	(Explain in Part IV)						661,402
11	Total support. Add lines 7 through 10.	oo instructions				12	411,769
12	Gross receipts from related activities, etc (s First five years. If the Form 990 is for the o	ree instructions) . Int papand this	ed fourth or fiff	th tay year as		
13			st, second, triii	u, lourtil, or ill	iii iax yeai as a	a section 501(c	
	organization, check this box and stop here		•	• •	• •	<u> </u>	▶∟_
Sect	ion C. Computation of Public Support	Percentage					
14	Public support percentage for 2012 (line 6,			column (f))		14	91 08%
15	Public support percentage from 2011 Scheo			•		15	91.42%
16a	33 1/3% support test—2012. If the organize				ne 14 is 33 1/3	3% or more, che	
	and stop here. The organization qualifies as	s a publicly sup	ported organiz	ation .			. ► X
b	33 1/3% support test—2011. If the organize				and line 15 is 3	33 1/3% or more	e, check th <u>ıs</u>
	box and stop here. The organization qualified	es as a publicly	supported org	janization			▶∟
17a	10%-facts-and-circumstances test—2012	. If the organiza	ation did not ch	eck a box on li	ne 13, 16a, or	16b, and line 1	4
	is 10% or more, and if the organization mee	ts the "facts-an	id-circumstanc	es" test, check	this box and s	top here. Expl	aın ın
	Part IV how the organization meets the "fact						
	organization.	to and oncome		.o organization	. qua		
b	10%-facts-and-circumstances test—2011	If the organiza	etion did not ch	eck a box on li	ne 13 16a 16	Sb or 17a. and	line
D	15 is 10% or more, and if the organization in	neets the "facts	-and-circumsta	ances" test, che	eck this box an	d stop here. E	Explain in
	Part IV how the organization meets the "fact	te-and-circums	tances" test. Th	ne organization	nualifies as a	nublicly	
		is-ariu-circuitis	ianices lest H	ic organization	i quaimes as a	paonory	
	supported organization			. 405 47	. 476 - 4 1 1 1		· · · · •
18	Private foundation. If the organization did			oa, 160, 17a, or	1/b, check th	is box and see	, r-
	instructions	· · · · ·	· · · ·			· · · · ·	. ▶∟

20

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
If the ergonization fails to qualify under the tests listed below, places complete Dort II.)

500	tion A Public Support	der the tests	ilsted below,	piease coimpi	ele Part II.)				
	tion A. Public Support ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
Ouic		(a) 2000	(b) 2009	(0) 2010	(u) 2011	(e) 2012	(I) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						0		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						0		
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0		
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						. 0		
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0		
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0		
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				1		0		
c	amount on line 13 for the year . Add lines 7a and 7b	0	0	0	0	0	<u>0</u> 0		
8	Public support (Subtract line 7c from					THE THE SECTION			
·	line 6).					1 333	0		
Sec	tion B. Total Support								
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
9	Amounts from line 6	0	0	0	0	0			
10a	Gross income from interest, dividends,			<u>_</u>		——— <u>—</u>			
	payments received on securities loans,								
	rents, royalties and income from similar sources	1			_		. 0		
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0		
c	Add lines 10a and 10b	0	0	0		0	0		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0		
12	Other income. Do not include gain or					 			
•-	loss from the sale of capital assets (Explain in Part IV).						0		
13	Total support. (Add lines 9, 10c, 11, and 12.)	0	o	0	0	0	0		
14	First five years. If the Form 990 is for the organization organization, check this box and stop here		d, third, fourth, d	or fifth tax year as	s a section 501(c)(3) 	. ▶		
Sec	tion C. Computation of Public Support F								
15	Public support percentage for 2012 (line 8, column (e 13, column (f))			15	0.00%		
16	Public support percentage from 2011 Schedule A, F					16	0 00%		
	tion D. Computation of Investment Incom			(0)		47 [0.000/		
17	Investment income percentage for 2012 (line 10c, c		-	mn (1)) .		17	0.00%		
18	Investment income percentage from 2011 Schedule			and line 15 is mo	· re than 33 1/2%		0.00%		
19a	not 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—2011. If the organization d line 18 is not more than 33 1/3%, check this box and						. ▶□		

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer Identification number

03-0281472 Peace and Justice Center Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year . . . 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) . . . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV. line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements. 2a 2b b 2c C Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization 3 during the tax year Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (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. If the organization elected, as permitted under SFAS 116 (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: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

Land, Buildings, and Equipment. See Form 990, Part X, line 10. Part VI (b) Cost or other Description of property (a) Cost or other basis (c) Accumulated (d) Book value basis (other) depreciation (investment) 0 0 0 0 0 0 0 0 ol 0 0 Leasehold improvements 0 145,270 145,315 45 d 0 0 Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . Describe in Part XIII the intended uses of the organization's endowment funds.

45

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization Employer identification number Peace and Justice Center 03-0281472 Form 990 Part VI Section B Line 11b The members of the Board of Directors review the return before it is filed. Form 990 Part VI Section B Line 12c The Board of Directors has a conflict of interest policy that potential conflicts are discussed at Board meetings Form 990 Part VI Section B Line 15b The Board of Directors approves all compensation arrangements. Form 990 Part VI Section C Line 19 The Peace and Justice Center makes its governing documents, conflict of interest policy, financial statements and Form 990 available to any member of the public upon request.

Depreciation and Amortization (Including Information on Listed Property)

2012

OMB No 1545-0172

Department of the Treasury Internal Revenue Service

► See separate instructions.

► Attach to your tax return.

Name(s) shown on return Identifying number Peace and Justice Center 03-0281472 Business or activity to which this form relates Form 990 Election To Expense Certain Property Under Section 179
Note: If you have any listed property, complete Part V before you complete Part I Part I 1 Maximum amount (see instructions) 500,000 2 2 Total cost of section 179 property placed in service (see instructions) 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year. Subtract line 4 from line 1, If zero or less, enter -0- If married filing separately, see instructions 5 6 (b) Cost (business use only) (C) Elected cost (a) Description of property Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) 11 12 Section 179 expense deduction, Add lines 9 and 10, but do not enter more than line 11 Carryover of disallowed deduction to 2013 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the 14 tax year (see instructions) 15 Property subject to section 168(f)(1) election Other depreciation (including ACRS) 16 Partill? MACRS Depreciation (Do not include listed property) (See instructions) 17 777. MACRS deductions for assets placed in service in tax years beginning before 2012 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B -Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (a) Classification of property (C) Basis for depreciation (b) Month and (g) Depreciation year placed in service (business/investment use only — see instructions) deduction 19 a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/L 25 yrs g 25-year property 27.5 yrs S/L h Residential rental MM 27.5 yrs S/L MM property i Nonresidential real 39 yrs MM S/L S/L MM property Section C — Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System S/L 20 a Class life 12 yrs S/L b 12-year 40 yrs MM S/L c 40-year Partive Summary (See instructions.) 21 Listed property Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions 22 777. For assets shown above and placed in service during the current year, enter