Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

OMB No. 1545-0047

Open to Public Inspection

<u>A</u>	For ti	ie 2022 caieno	dar year, or tax year begin	ning	04-0	1 , 2022, a	na enaing	03	-31 ,2023		
В	Check	if applicable:	C Name of organization	lliance for Global Ju	stice (Corp		D Emplo	yer identification number		
	Addres	s change	Doing business as	Doing business as							
	Name o	change	Number and street (or P.O. bo	Room/suite	E Telephone number						
	Initial r	eturn	225 E 26th St	reet		(202) 540-8336					
	Final re	turn/terminated	City or town, state or province	, country, and ZIP or foreign postal code				G Gross	receipts		
	Amend	ed return	Tucson, AZ 85	713				\$	10,703,336		
П	Applica	tion pending	F Name and address of principa				H(a) Is this a	group return fo	or subordinates? Yes X No		
	•						H(b) Are al	l subordinate	s included? Yes No		
$\overline{}$	Tax-exe	empt status:	501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	r 5	27			. See instructions		
J	Websit		TP://AFGJ.ORG	, (exemption n			
		f organization:		sociation Other	L	Year of formation	1 1 1	State of lega			
	art I	Summa		State State		rear or formatio	1990	Otato or logi	ardonnone. Fizz		
	1		-	on or most significant activities:	то а	chieve s	ocial change	a and e	economic justice		
	'	-	-	conger and more unifi				z ana e	economic Juscice		
Activities & Governance		by neipi	ing to built a sti	onger and more unitr	eu gras	STOOLS I	ioveilleirc.				
na		-									
Š	2	Chack this h	ooy	liscontinued its operations or disp	nsed of m	ore than 25%	of its not assets				
ၓ	3		oting members of the gove	·				3	13		
<u>«</u>	4		0	s of the governing body (Part VI, I	ine 1h)			4			
ţie	5		· ·	calendar year 2022 (Part V, line				5			
Ę	6		er of volunteers (estimate if i					6	118		
Ac			`	Part VIII, column (C), line 12				7a			
				from Form 990-T, Part I, line 11				7a 7b	0		
	+	D Net unrelate	u business taxable income	iloiii i oiiii 990-1, Fait i, iiie ii					0		
	١.	Contribution	on and grants (Part VIII line	1b)			Prior Year		Current Year		
Ф	8		s and grants (Part VIII, line	,			10,62		10,556,995		
ž	9	_	rvice revenue (Part VIII, line	= :				4,532	22,121		
Revenue	10		income (Part VIII, column (A				1	8,469	124,220		
~				nes 5, 6d, 8c, 9c, 10c, and 11e)					0		
	12			must equal Part VIII, column (A),			10,66		10,703,336		
	13		similar amounts paid (Part I				2,53	0,769	565,232		
	14	-	d to or for members (Part I)						0		
S	15			e benefits (Part IX, column (A), lin	,		2,45	4,197	3,815,749		
Expenses	16		I fundraising fees (Part IX, o						0		
Kpe	·		ising expenses (Part IX, col			133,333					
Ш		•	nses (Part IX, column (A), lir	,				7,794	4,539,337		
	18	-		equal Part IX, column (A), line 25				2,760	8,920,318		
	19	Revenue les	ss expenses. Subtract line	18 from line 12		· · · · · ·	3,20	8,159	1,783,018		
ō	Sec						Beginning of Cur	rent Year	End of Year		
Net Assets or	<u>ਛ</u> 20		(Part X, line 16)				9,43	7,755	11,170,149		
at As	필 21		es (Part X, line 26)				5	3,531	2,907		
			or fund balances. Subtract I	ine 21 from line 20			9,38	4,224	11,167,242		
	art II		ure Block								
				rn, including accompanying schedules and icer) is based on all information of which pr			my knowledge and bel	iet, it is			
_											
Sig	ın	James Jordan									
		Signature of offi	icer					Date	9		
He	re		es Jordan, Preside	ent							
		Type or print na		T		_	1				
_		Print/Type pr	reparer's name	Preparer's signature		Date	Check	x X if	PTIN		
Pa			e Thompson, CPA			02-12-20	24 self-er	mployed	P00965712		
	epar		Thompson	Accounting Company	PLLC		Firm's EIN	Firm's EIN			
Us	e Or	Firm's addres	ss 1643 N 2	Alvernon Ste 104			Phone no.				
				AZ 85712				520-8	322-8208		
May	the If	RS discuss this	return with the preparer sh	own above? See instructions					Yes X No		

Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	· 🗶
1	Briefly describe the organization's mission:	
	To achieve social change and economic justice by helping to build a stronger and more unifie	ed
	grassroots movement.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	0
	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? · · · · · · · · · · · · · · · · · · ·	0
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$3,900,551 including grants of \$) (Revenue \$5,847,17	<u>7</u>)
	Human Rights: We've established the Lucy Parsons Popular Human Rights School with the aim of	
	reclaiming the concept of "human rights" as a collective tool for the liberation of all peop	ples.
	We initiated the first cohort of students in the popular education program, which trains	
	activists to critically analyze, observe, document, denounce and mobilize around human right	ts
	violations. Working alongside a network of certified Human Rights Observers, we developed as	n
	open-source database to document human right violations in the U.S. As fiscal sponsor for gr	
	dedicated to promoting indigenous rights, environmental rights, labor rights, and human right	nts,
	we've played a crucial role in advancing these causes.	
4 b	(Codes) (Foresees the code and including agents of the code and c	
4b	(Code:) (Expenses \$2,618,412 including grants of \$) (Revenue \$2,210,620	
	Racial Justice Through fiscal sponsorship, we've supported racial justice groups affiliated	
	Black Lives Matter, bail funds, and prison abolition or reform organizations, aiding in the	
	liberation of political prisoners. Additionally, through sponsorship of bail funds, we provi	
	assistance to individuals through legal aid, advocacy, and community support initiatives air	nea a
	addressing systemic racism and promoting racial equity.	
4c	(Code:) (Expenses \$ 894,856 including grants of \$) (Revenue \$ 966,700	o)
	Foreign Policy: We facilitate efforts to change U.S. relations with countries in Latin Amer:	_ ica
	and the Middle East, while advocating for just U.S. immigration policies. We've hosted webin	nars
	addressing various foreign policy and immigration topics, disseminated advocacy alerts, and	
	maintained a strong social media presence to amplify voices for foreign policy reform.	
	Furthermore, we've organized delegations to Latin America, providing participants with first	thand
	experiences of successful initiatives, participatory democracy projects, and human rights	
	advocacy efforts. These experiences have contributed to freeing political prisoners, exposing	ng
	prison conditions, and shedding light on the impact of the exportation of U.S. mass incarce	
	model across the globe.	
4d		
	(Expenses \$ 1,039,713 including grants of \$) (Revenue \$ 1,649,642)	
/lo	Total program convice expenses 0, 453, 533	

2) Alliance for Global Justice Corp
Checklist of Required Schedules Part IV

			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	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
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		Х
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		Х
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			
7	,	6		х
′	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		v
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			X
0	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	_		
J	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		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	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, Part VI	11a	х	
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		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	14h		
15	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		X
13	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	v	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	-13	Х	
	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, 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
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		x
b	and the second of the second o	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	

2) Alliance for Global Justice Corp Checklist of Required Schedules (continued) Part IV

			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		х
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
b	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 any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disgualified person during the year? If "Yes." complete Schedule L. Part I	25a		.,
b	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	23a		X
b	year, and 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		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		X
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or 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		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
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		х
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? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	24		
250	or IV, and Part V, line 1	34		X
35a		35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	330		
-	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	- 00		
•	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? Note: All Form 990 filers are required to complete Schedule O	38	x	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
	·		Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	х	

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Pa	Statements Regarding Other IRS Fillings and Tax Compliance (continued)		Yes	No
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 118			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
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		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).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	60		.,
h	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a		X
b	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OD		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	7a		v
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Х
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
Ū	required to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Α
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
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			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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	_		
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
_b	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			_
	excess parachute payment(s) during the year?	15		Х
16	If "Yes," see the instructions and file Form 4720, Schedule N.	40		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
17	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	- 17		
	100, 00p.o.to 1 0111 0000.			

Г	Governance, Management, and Disclosure For each Yes response to lines 2 through 7b below, and for a re-	10"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI			x
Se	Check if Schedule O contains a response or note to any line in this Part VI	<u>· · · · </u>	• • •	Δ
<u> </u>	ction A. Governing Body and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		163	140
ıu	If there are material differences in voting rights among members of the governing body, or	1		
	if the governing body delegated broad authority to an executive committee or similar			
	, , , ,			
L	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2		Х
3	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		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		х
b	If "Yes," 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's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	

10a	Did the organization have local chapters, branches, or affiliates?	10a		х
b	If "Yes," 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's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	x	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13	х	
14	Did the organization have a written document retention and destruction policy?	14	х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
b	Other officers or key employees of the organization	15b	х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
0	tion C. Disalegues			

17	List the states with which a copy of this Form 990 is required to be filed	

- 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 - X Own website Another's website Upon request Other (explain on Schedule O)
- 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records.

-orm	aan	(2022)
-01111	990	120221

Alliance for Global Justice Corp

52-2094677

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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, box 6 of 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.

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

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

				((C)					
(A)	(B)	Position				(D)	(E)	(F)		
Name and title	Average	,	(do not check more than one box, unless person is both an				Reportable	Reportable	Estimated amount	
Name and the	hours					/trustee)		compensation	compensation	of other
	per week							from the	from related organizations (W-2/	compensation from the
	(list any	악	lns	JO	Ж	en iH	Fo	organization (W-2/ 1099-MISC/	1099-MISC/	organization and
	hours for related	direc	stituti	Officer	y en	ghes	Former	1099-NEC)	1099-NEC)	related organizations
	organizations	Individual trustee or director	Institutional trustee		Key employee	t cor	,			
	below	uste	trus		/ee	nper				
	dotted line)	Ф	tee			Highest compensated employee				
						<u> </u>				
(1) Madeline McClure	40.00									
Secretary				х				59,150	0	0
(2) Elane Spivak Rodriguez	40.00									
Vice President				х				59,150	0	0
(3) James Jordan	40.00									
President				х				59,150	0	0
(4) Evelyn Medina	40.00									
Treasurer				х				45,650	0	0
(5) Katherine Hoyt	1.00									
Director		х						4,200	0	0
(6) Nathan Sheard	1.00									
Director		х						0	0	0
(7) Natali Segovia	1.00									
Director		х						0	0	0
(8) Banbose Shango	1.00									
Director		х						0	0	0
(9) Arnold Matlin, MD	1.00									
Director		х						0	0	0
(10)Charles Delaney	1.00									
Director		х						0	0	0
(11)Robert Siegel	1.00									
Director		х						0	0	0
(12)Mark Burton, Esq	1.00									
Director		х						0	0	0
(13)Vicki Cervantes	1.00									
Director		х						0	0	0
(14)	L									

Fait	VII Section A. Onicers, Directors, in	usices, i	VE Y L	-1111p	JIU	yee.	s, an	u i	ilgilest comp	FIISaleu	Lilibid	уссэ	(CONU	nuea)
	(A) Name and title	(B) Average hours per week	(do not check more than one box, unless person is both ar officer and a director/trustee) er week						(D) Reportable compensation from the	(E) Reportable compensation from related		(F) Estimated amount of other compensation from the		
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organization 1099-MI: 1099-NE	SC/	orgai	om me nization I organiz	
<u>(15)</u>														
<u>(16)</u>														
<u>(17)</u> _														
<u>(18)</u>														
<u>(19)</u>														
(20)_														
<u>(21)</u>														
(22)														
(23)														
(24)														
(25)														
1b	Subtotal							•						
c d	Total from continuation sheets to Part VII, Secti Total (add lines 1b and 1c)								227,300		0			0
2	Total number of individuals (including but not limited													
	reportable compensation from the organization													0
													Yes	No
3	Did the organization list any former officer, director, employee on line 1a? <i>If "Yes," complete Schedule J</i>	-				-			sated			3		v
4	For any individual listed on line 1a, is the sum of re													Х
	organization and related organizations greater than		•											
	individual											4		х
5	Did any person listed on line 1a receive or accrue of			-			_							
Secti	for services rendered to the organization? If "Yes," on B. Independent Contractors	complete Sch	ieauie .	J TOT	suci	n per	rson					5		Х
1	Complete this table for your five highest compensa	ted independ	lent co	ntrac	ctors	that	receiv	ved i	more than \$100.000) of				
-	compensation from the organization. Report compe	•									year.			
	(A)								(B)			(C)		
	Name and business address	S							Description of service	es		Compens	ation	
2	Total number of independent contractors (including received more than \$100,000 of compensation from			nose	liste	d ab	ove) w	vho						

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Part VIII

	Check if Schedule O contains a response	onse or note to any line in this	Part VIII • •			
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts	1a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f	1b	10,556,995	22,121		
Progran Rev	d e f All other program service revenue g Total. Add lines 2a-2f		22,121			
	 3 Investment income (including dividends, other similar amounts) 4 Income from investment of tax-exempt b 5 Royalties 	ond proceeds	87,960	87,960		
	6a Gross rents 6a b Less: rental expenses 6b c Rental income or (loss) 6c	Real (ii) Personal				
	7a Gross amount from sales of assets	curities (ii) Other 26, 260 10, 000				
venue	b Less: cost or other basis and sales expenses 7b	26,260 10,000				
Other Revenue	d Net gain or (loss)	_	36,260	36,260		
	b Less: direct expenses	9a 9b				
	10a Gross sales of inventory, less returns and allowances	10a 10b				
Miscellanous Revenue	to Net income or (loss) from sales of inventing the loss of inventions of inventing the loss of inventions of inventing the loss of inventions of inventing the loss of inventin	Business Code				
	e Total. Add lines 11a-11d		10 702 226	146 241		

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). Check if Schedule O contains a response or note to any line in this Part IX (D) Do not include amounts reported on lines 6b, 7b, (A) (B) (C) Total expenses Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 565,232 565,232 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 5 Compensation of current officers, directors, 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 3,360,955 3,125,688 134,438 100,829 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 156,646 148,922 3,227 4,497 10 298,148 277,278 11,926 8,944 11 Fees for services (nonemployees): Legal b 96,651 96,651 С 6,342 6,342 Professional fundraising services. See Part IV, line 17 е f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 1,155,848 1,155,848 12 20,332 20,332 13 20,133 1,070 19,063 14 20,344 20,344 15 16 465,694 465,694 17 620,936 620,936 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 4,760 4,760 21 22 Depreciation, depletion, and amortization 26,724 8,861 35,585 23 Insurance 26,563 26,563 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 O.) Program expenses 843,014 843,014 b Bank and credit card charges 37,915 37,915 С 8,636 8,636 Payroll company Telephone 48,891 48,891 e All other expenses 1,127,693 1,127,340 353 25 **Total functional expenses.** Add lines 1 through 24e 8,920,318 8,453,532 333,453 133,333 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Cash - non-interest-bearing Savings and temporary cash investments	2,112,556	2	962,639
	3		6,573,377	3	9,781,962
	4	Pledges and grants receivable, net		4	
		1		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%		_	40.400
		controlled entity or family member of any of these persons	62,847	5	42,198
	6	Loans and other receivables from other disqualified persons (as defined			
	_	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
şţs	7	Notes and loans receivable, net		7	7,043
Assets	8	Inventories for sale or use		8	
∢	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 549,823			
	b	Less: accumulated depreciation	411,892	10c	376,307
	11	Investments - publicly traded securities	277,083	11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	9,437,755	16	11,170,149
	17	Accounts payable and accrued expenses		17	
	18	Grants payable	53,531	18	2,907
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
iab		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	53,531	26	2,907
		Organizations that follow FASB ASC 958, check here			
Ses		and complete lines 27, 28, 32, and 33.			
au	27	Net assets without donor restrictions	7,465,585	27	9,248,603
Bal	28	Net assets with donor restrictions	1,918,639	28	1,918,639
힏		Organizations that do not follow FASB ASC 958, check here			
昰		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	
et/	32	Total net assets or fund balances	9,384,224	32	11,167,242
z	33	Total liabilities and net assets/fund balances	9,437,755	33	11,170,149

EEA Form **990** (2022)

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

2c

За

3b

Х

the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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 on Schedule O and describe any steps taken to undergo such audits

Schedule O.

If the organization changed either its oversight process or selection process during the tax year, explain on

SCHEDULE A (Form 990)

6

7

10

12

C

d

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

hospital's name, city, and state:

Attach to Form 990 or Form 990-F7

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

Open to Public Inspection

Name of the organization Employer identification number Alliance for Global Justice Corp 52-2094677 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in

8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)

An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

🗷 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 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.) 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check

the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.

Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Typ functionally integrated, or Type III non-functionally integrated supporting organization.

Enter the number of supported organizations

Provide the following information about the supported organization(s) (i) Name of supported organization (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing other support (see support (see above (see instructions)) document? instructions) instructions) Yes Nο (A) (B) (C) (D) (E)

Total

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.)

	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the						
	organization'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						
4	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						
	on B. Total Support						L
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	(0,7 = 0 1 0	(3) = 3 · 3	(0) = 0 = 0	(3,7 = 3 = 1	(5) = 5 = =	(1)
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.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	(see instructio	ns)			12	
13	First 5 years. If the Form 990 is for the org	•	•				(3)
	organization, check this box and stop here	•			-		
Secti	on C. Computation of Public Suppo						
	Public support percentage for 2022 (line 6			1, column (f))		14	%
15	Public support percentage from 2021 Sch		-			15	%
16a	33 1/3% support test - 2022. If the organi	zation did not d	heck the box o	n line 13, and I	line 14 is 33 1/3	3% or more, ch	eck this
	box and stop here. The organization quali						
b	33 1/3% support test - 2021. If the organi	zation did not d	check a box on	line 13 or 16a,	and line 15 is	33 1/3% or mo	re, check
	this box and stop here. The organization of	qualifies as a p	ublicly supporte	ed organizatior	1		
17a	10%-facts-and-circumstances test - 202	2. If the organi	zation did not c	heck a box on	line 13, 16a, o	r 16b, and line	14 is
	10% or more, and if the organization meet	s the facts-and	d-circumstances	s test, check th	is box and sto	p here. Explain	ı in
	Part VI how the organization meets the fa	cts-and-circum	stances test. T	he organizatio	n qualifies as	a publicly supp	orted
	organization						
b	10%-facts-and-circumstances test - 202	1. If the organi	zation did not d	heck a box on	line 13, 16a, 1	6b, or 17a, and	
	15 is 10% or more, and if the organization	meets the fact	s-and-circumst	ances test, che	eck this box an	d stop here. Ex	xplain
	in Part VI how the organization meets the					-	•
	organization			-	•		· ·
18	Private foundation. If the organization did						
	instructions	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>

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

(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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	5,004,561	6,818,3135	6,393,774 1	0,614,108 1	0,527,798	89,358,554
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	41,927	133,278	17,739	13,810	22,121	228,875
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
4	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	5 046 400	6 051 501 5	6 411 512 1	0 607 010 1	0 540 010	00 507 400
	Amounts included on lines 1, 2, and 3	5,046,488	6,951,591 5	6,411,513 1	0,627,918 1	0,549,919	89,587,429
1 a	received from disqualified persons -						
b	Amounts included on lines 2 and 3						
b	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
_	line 6.)						89,587,429
Secti	on B. Total Support						103,307,423
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	5,046,488	6,951,5915	` '		_ ` _	89,587,429
10a	Gross income from interest, dividends,			, , , -	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	
	payments received on securities loans, rents,						
	royalties, and income from similar sources •	35,350	54,690	71,868	18,469	87,960	268,337
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b	35,350	54,690	71,868	18,469	87,960	268,337
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 assets						
	(Explain in Part VI.)	(15,735)	(6,580)	773			(21,542
13	Total support. (Add lines 9, 10c, 11,						
							89,834,224
14	First 5 years. If the Form 990 is for the or	•			•	` ,	` ′ _
Cooti	organization, check this box and stop her					<u> </u>	
	on C. Computation of Public Suppo			0		15	0/
15 16	Public support percentage for 2022 (line 8		•			15	99.73 %
16 Socti	Public support percentage from 2021 Sch				<u> </u>	16	99.79 %
<u>3ecti</u> 17	on D. Computation of Investment In			line 12 colum	n (f))	17	2 22 9/
18	Investment income percentage for 2022 (Investment income percentage from 2021		• •		n (I))	18	0.00 %
19a	33 1/3% support tests - 2022. If the organ						100.00 %
134	17 is not more than 33 1/3%, check this bo						
b	33 1/3% support tests - 2021. If the organization	-	-	•			Z X
	line 18 is not more than 33 1/3%, check this box a						
20	Private foundation. If the organization did	•					ons \square

Vaa Na

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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.)

- 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 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).
 - **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?
- 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).
- B 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 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.)

		Yes	No
	1		
	2		
	3a		
b			
3)	3b		
رد	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	00		
	9a		
	9b		
	9с		
	10a		
	10b		
edu		orm 99	0) 2022

EEA Schedule A (Form 990) 202:

3a

3b

Schedule A (Form 990) 2022

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

	e A (Form 990) 2022 Alliance for Global Justice Corp		52-20946	577	Page 6
Part	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7				
1	$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	rust	on Nov. 20, 1970 (explain	in Part VI). S	ee
	instructions. All other Type III non-functionally integrated supporting organiz	ation	ns must complete Sections	A through E	
Sacti	on A - Adjusted Net Income		(A) Prior Year	(B) Currer	nt Year
	on A - Aujusted Net Income		(A) I Hol Teal	(optior	าal)
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			
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Currer	
			(71) 1 1101 1041	(optior	າal)
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
	Average monthly value of securities	1a			
	Average monthly cash balances	1b			
	Fair market value of other non-exempt-use assets	1c			
	Total (add lines 1a, 1b, and 1c)	1d			
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		<u> </u>	
6	Multiply line 5 by 0.035.	6		1	
	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Secti	on 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			

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

Distributable Amount. Subtract line 5 from line 4, unless subject to

EEA Schedule A (Form 990) 2022

Part	v Type III Non-Functionally integrated 509(a)(3	() Supporting Organi	zations (continued	<i>1)</i>	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exer				
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organi	zations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required) -	provide details in Part \	/I)	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 organization is resp			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 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) Underdistribution Pre-2022	s	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022			- 1	
	(reasonable cause required - explain in Part VI). See			- 1	
	instructions.			_	
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
<u> </u>	From 2019				
d	From 2020			_	
e	From 2021			\dashv	
f	Total of lines 3a through 3e			_	
g	Applied to underdistributions of prior years			_	
<u>h</u>	Applied to 2022 distributable amount				
-	Carryover from 2017 not applied (see instructions)			\dashv	
<u></u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2022 from			-	
4	Section D, line 7: \$				
а	Applied to underdistributions of prior years			\dashv	
<u>a</u> b	Applied to 2022 distributable amount			-	
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if			_	
·	any. Subtract lines 3g and 4a from line 2. For result			- 1	
	greater than zero, <i>explain in Part VI</i> . See instructions.			- 1	
6	Remaining underdistributions for 2022. Subtract lines 3h				
-	and 4b from line 1. For result greater than zero, <i>explain in</i>				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2018				
b	Excess from 2019				
С	Excess from 2020				
d	Excess from 2021				
_	Evenes from 2022				

Schedule A (Form 990) 2022 EEA

Schedule A (Form 990) 2022

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Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part II, Part

	III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
_	

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Alliance for Global Justice Corp 52-2094677 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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" on 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 (for example, recreation or education) Preservation of a 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 easement on the last day of the tax year. Held at the End of the Tax Year 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 9 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. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 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. 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 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 FASB ASC 958 relating to these items:

Par	t III Organizations Maintaining	Collections of	Art, Hist	orical T	reasures,	or Oth	er Similar Ass	ets (cor	ntinued)
3	Using the organization's acquisition, accession	on, and other records	s, check an	y of the foll	owing that ma	ake signif	icant use of its		
	collection items (check all that apply):								
а	Public exhibition		d	Loan or	exchange pr	ogram			
b	Scholarly research		е	Other					
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they f	urther the o	organization's	exempt p	ourpose in Part		
	XIII.								
5	During the year, did the organization solicit or	r receive donations o	f art, histor	ical treasur	es, or other si	imilar			
	assets to be sold to raise funds rather than to		art of the or	ganization	s collection?			Yes	☐ No
Par									
	Complete if the organization	answered "Yes"	on Forn	n 990, P	art IV, line	9, or re	ported an amo	ont on F	orm
	990, Part X, line 21.								
1a	Is the organization an agent, trustee, custodi							_	_
	·							· U Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table	e :					
							Amo	ount	
С	Beginning balance								
d	Additions during the year								
е	Distributions during the year								
f	Ending balance								
2a	Did the organization include an amount on Fo					•		Yes	∐ No
Par	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation h	as been pr	ovided on Par	t XIII		<u> </u>	
Par		anawarad "Vaa"	on Forn	- 000 D	ort IV/ line	10			
	Complete if the organization							T.,_	
4.	Designing of year belongs	(a) Current year	(b) Pri	or year	(c) Two years	back	(d) Three years back	(e) Four	ears back
1a	Beginning of year balance							+	
b								+	
С	Net investment earnings, gains, and								
٦	losses							+	
d	Grants or scholarships							+	
е	Other expenditures for facilities and programs								
f	Administrative expenses								
	End of year balance								
g 2	Provide the estimated percentage of the curr	ent year and halance	l (line 1a c	olumn (a))	hold ac:				
a	Board designated or quasi-endowment	-	(iiiic rg, c	olullii (a))	noid as.				
h	Permanent endowment %								
c	Term endowment %								
·	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
3a	Are there endowment funds not in the posses	·	tion that are	e held and	administered	for the			
-	organization by:							Γ	Yes No
	(i) Unrelated organizations							3a(i)	100
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza							3b	
4	Describe in Part XIII the intended uses of the								l l
Par				_					
	Complete if the organization		on Forn	n 990, P	art IV, line	11a. Se	ee Form 990, F	art X, li	ne 10.
	Description of property	(a) Cost or other	er basis	(b) Cost or	r other basis	(c) A	ccumulated	(d) Book	value
		(investme	ent)	(0	other)	dep	oreciation		
1a	Land				33,254				33,254
b	Buildings						8,861		(8,861)
С	Leasehold improvements								
d	Equipment						26,724	(26,724)
е	Other			į	516,569		137,931	3	78,638
Total	Add lines 1a through 1a. (Column (d) must equ	al Form 990 Part Y	column (R)	line 10c)			1	2	76 207

Part VII	Investments - Other Securities. Complete if the organization answered	I "Yes" on For	m 990, Part	IV, line 11	b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)		(b) Book va		(c) Me	ethod of valuation: d-of-year market value
(1) Financial o	lerivatives					
(2) Closely-he	ld equity interests					
(3) Other						
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	(b) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII	Investments - Program Related. Complete if the organization answered	l "Yes" on For	m 990, Part	IV, line 11	c. See Form	990, Part X, line 13.
	(a) Description of investment		(b) Book va	lue	` '	ethod of valuation: d-of-year market value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	(b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX	Other Assets. Complete if the organization answered	l "Yes" on For	m 990, Part	IV, line 11	d. See Form	990, Part X, line 15.
		scription				(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	(b) must equal Form 990, Part X, col. (B) line 15.)					
Part X	Other Liabilities. Complete if the organization answered	l "Yes" on For	m 990, Part	IV, line 11	e or 11f. See	Form 990, Part X,
4	line 25.					
1.	(a) Description of liability	(b) Book v	alue			
(1) Federal in	icome taxes					
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9) Table (0-4)	h)					
	b) must equal Form 990, Part X, col. (B) line 25.) uncertain tax positions. In Part XIII, provide the text of					

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

Part	<u> </u>	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Part	· · ·	er Heturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	1.1	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	-	
b	Prior year adjustments	-	
C	Other losses 2c Other (Describe in Part XIII.) 2d	-	
d		20	
е 3	Add lines 2a through 2d	2e 3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	-	
	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 18.</i>)	5	
Part			
Provide	the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part	t X, line	
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

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

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Alliance for Global Justice Corp 52-2094677 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990. Part IV. line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number (c) Number of (d) Activities conducted in the (e) If activity listed in (d) is (f) Total a program service, describe specific type of of offices in employees, region (by type) (such as, expenditures for and investments the region agents, and fundraising, program services investments, grants to recipients service(s) in the region in the region independent contractors in the region located in the region) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)(11) (12)<u>(13)</u> (14) (15) (16) (17)3a b Total from continuation sheets to Part I Totals (add lines 3a and 3b)

Schedule F (Form 990) 2022	Alliano	e for Global J	ustice Corp				52-2094677	Page 2
							ation answered "Yes" o	on Form 990,
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America	and					
(1)		the Caribbean	Hurricane Aid	5,429				
		Central America	and					
(2)		the Caribbean	Human Rights	5,230				
		Central America	and					
(3)		the Caribbean	Human Rights	20,000				
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
	er of recipient organiza	ations listed above that	are recognized as chari	ties by the foreign count	ry, recognized as a tax	(
			antee or counsel has pro				▶	

Enter total number of other organizations or entities

Schedule F (Form 990) 2022

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	Central America and						
(1)SISTEMA NACIONAL PARA LA P	the Caribbean		18,000				
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2022 Alliance for Global Justice Corp 52–20

Part IV Foreign Forms

1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes."

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	x	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	x	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	x	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	x	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	x	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	x	No

EEA Schedule F (Form 990) 2022

 Schedule F (Form 990) 2022
 Page 5

Part V	Supplemental Information
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and
	Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

EEA Schedule F (Form 990) 2022

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Open to Public Inspection Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number

Alliance for Global Justice Cor	.m					52-2094677	
Part I General Information on G		ance					
1 Does the organization maintain records to s	substantiate the amount	of the grants or assista	nce, the grantees' eligi	bility for the grants or as	ssistance, and		
the selection criteria used to award the gran	nts or assistance?						. X Yes No
2 Describe in Part IV the organization's proce	dures for monitoring the	e use of grant funds in th	ne United States.				
Part II Grants and Other Assistance	e to Domestic Orga	nizations and Dom	estic Government	s. Complete if the or	ganization answered "\	res" on Form 990,	
Part IV, line 21, for any recipie	nt that received mor	re than \$5,000. Part	Il can be duplicated	d if additional space	is needed.		
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)Black and Pink MA							
11 South Edlin Street							Racial
Worcester MA 01603			5,535		Cash		Justice
(2)Black Lives Matter 5280							
P.O. Box 7617							Racial
Denver CO 80207			20,000		Cash		Justice
(3)Black Trans Media Mutual Ai							
P.O. Box 27368							Racial
Columbus OH 43227			10,000		Cash		Justice
(4) Center for NuLeadership							
"7 Marcus Garvey Blvd 2nd F							Racial
Brooklyn NY 11206			15,000		Cash		Justice
(5) Community Justice Exchange							
P.O. Box 889385							Racial
Los Angeles CA 90088			5,500		Cash		Justice
(6) East Bay Sanctuary Covnant							
2362 Bancroft Way							Movement
Berkeley CA 94704			53,558		Cash		Building
(7) Kensington Organizing Initi							
231 Watkins St							Movement
Philadelphia PA 19148			13,800		Cash		Building
(8) Resurgent Seeds Collaborati							
921 E Orange Dr.							Human
Phoenix AZ 85014			20,108		Cash		Rights
(9) The Mechanical Gardens Inc							
913 Union St. Apt 1							Movement
Brooklyn NY 11215			26,096		Cash		Building
(10)							
2 Enter total number of section 501(c)(3) and	government organization	ons listed in the line 1 ta	ble				
3 Enter total number of other organizations lis	sted in the line 1 table						

OMB No. 1545-0047 2022

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
V Supplemental Information. Pro	ovide the information re	equired in Part I li	ne 2 [.] Part III. columi	n (b): and any other addit	tional information

SCHEDULE L (Form 990)

Transactions With Interested Persons
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 2022

Open To Public Inspection

Department of the Treasury Internal Revenue Service

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

lame of the organization							Employ	er iden	tification	on nun	nber		
lliance for Global	Justice Co	orp					52-2	0946	77				
Part I Excess Bene	fit Transactio	ns (section 501	(c)(3),	section !	501(c)(4), a	and se	ction 501(c)(29)	orgar	nizatio	ns or	ıly).		
Complete if th	e organization	answered "Yes	s" on F	orm 990	, Part IV, lir	ne 25a	or 25b, or Forn	า 990-	-EZ, F	art V	, line	40b.	
1 (a) Name of disqualified p	person	(b) Relationship between disqualified person and				(c) Description of	f transac	ction			(d) Corrected?		
		orç	ganization									Yes	No
(1)													
(2)													
(3)													
2 Enter the amount of tax i	ncurred by the o	rganization mana	gers or o	disqualifie	d persons du	ring the	e year						
under section 4958 • •										\$ <u>_</u>			
3 Enter the amount of tax,	if any, on line 2,	above, reimburse	d by the	organizat	ion • •					\$ _			
Dowl II	/ F II												
		rested Person		'arm 000	LTZ Dort V	/ line	200 or Form 000) Dor	4 IV / III	no 26	. or if	tha	
		nount on Form 9					38a or Form 990	, Par	LIV, III	ne zo	, OI II	ıne	
Organization	Т	T T	T	art A, iii ic	, 0, 0, 01 <u>22</u>								
(a) Name of interested person	(b) Relationship	(c) Purpose of	1 (.,	oan to or om the	(e) Origin		(f) Balance due	(g) In d	efault?	1 ` ′ '	proved	(i) W	
	with organization	loan		nization?	principal amount				by board committee				
			<u> </u>	Τ_	-			Yes	No	Yes	No	Yes	No
Eduardo Garcia			То	From				162	140	163	NO	162	NO
(1) Rodriguez	Emm lassa	Welm.		x	40	467	40 110		x	x		x	
(1) Roariguez	Employee	Help		+^	40,	40/	40,118		_			^	
(2) James Jordan	President			×	13	130	2,080		x	x		x	
Elane Spivak	Tresident				13,	130	2,000						
(3) Rodriguez	Employee			x	1.	308			x	x		х	
· / 1.00===guo=	Past					-							
(4) Chuck Kaufman	President	Personal		x	8,	698			x		x		x
					·								
(5)													
otal						\$	42,198						
Part III Grants or Ass	sistance Ben	efiting Interest	ed Per	rsons.									
Complete if th	e organizatior	answered "Ye	s" on F	orm 990	, Part IV, lir	ne 27.							
(a) Name of interested person	(b) Relat	ionship between interes	sted	(c) A	mount of		(d) Type of assistance			(e) Purp	ose of a	ssistanc	е
	pers	on and the organization	1	assi	istance								
(1)									L				
									1				
(2)									 				
									1				
(3)									├──				
(4)									1				
(4)									—				

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction		aring of ization's nues?
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5) Part V Supplemental Information					
	1. ion for responses to questions	on Schedule I (see	instructions)		
Trondo adamenta imerinati	ion for responded to questions	011 001100010 2 (000	mondonono).		

Schedule L (Form 990) 2022 EEA

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Alliance for Global Justice Corp 52-2094677 01. Form 990 governing body review (Part VI, line 11) Organization's process to review form 990 The secretary, or treasurer, or president will email form 990 to the board for discussion via email prior to filing. The Treasurer will receive email authorization by board members to file. 02. Conflict of interest policy compliance (Part VI, line 12c) Enforcement Of Conflicts Policy Conflict Of Interest is posted at www.afgj.org 03. CEO, executive director, top management comp (Part VI, line 15a) Compensation process for top officials AFGJ's core staff receive the same pay regardless of title or senority with the exception that new staff start at \$2,000 below the base salary and reach parity on their first anniversary. There is a precedent as well for a cost of living salary addition for staff in expensive locales. AFGJ's fiscally sponsored projects set their own compensation policies. 04. Other officer or key employee compensation (Part VI, line 15b Compensation process for top officials AFGJ's core staff receive the same pay regardless of title or senority with the exception that new staff start at \$2,000 below the base salary and reach parity on their first anniversary. There is a precedent as well for a cost of living salary addition for staff in expensive locales. AFGJ's fiscally sponsored projects set their own compensation policies.

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022		Page 2
Name of the organization		Employer identification number
Alliance for Global Justice Cor	p	52-2094677
05. Governing documents, etc, a	vailable to public (Part VI, line 19)	
Governing Documents Disclosure E	xplanation	
Governing documents, Board biogr	aphies, Key Policies and 990'S are posted o	n the website:
www.afgj.org		
06. List of other fees for serv	ices expenses (Part IX, line 11g)	
Part IX, Line 11G - Other fees f	or services	
Description Total Prog	Service	
1099 Contract Labor \$1,090,09	5	
Foreign Contract Labor \$ 65,75	3	
Total \$1,155,84	8	
07. List of other expenses (Par	t IX, line 24e)	
Part IX, Line 242 - All Other Ex	penses	
Description Total Progra	m	
IT Subscription \$66,594.0	0	
Local Event Costs \$395,772.0	0	
Closed Projects \$53,215.0	0	
Postage \$4,374.0	0	
<u>Printing</u> \$30,444.0	0	
<u>Supplies</u> \$378,399.0	0	
<u>Training</u> \$130,114.0	0	
Taxes and Licenses \$898.0	0	
Repair and Maintenance \$11,324.0	0	
Web Domain \$4,509.0	0	
Office Support \$51,666.0	0	

EEA Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page 2

Name of the organization	Employer identification number
Alliance for Global Justice Corp	52-2094677
<u>Misc</u> \$31.00	
Total \$1,127,340.00	
08. Part III, response or note to any other line in Part III	
Part III, Line 4D - All other accomplishments	
Online publishing of information and alerts, participation in coalitions,	, hosting
webinars, co-sponsor and logistics for conferences, and other miscellaneous	ous services