#### \*\* PUBLIC DISCLOSURE COPY \*\*

Form **990** 

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury

Do not enter social security numbers on this form as it may be made public. b. On to unusualize any Engelian for instructions and the intest information

		Control of the www.ins.gov/romeso to moudequite and	andina J	UN 30, 2018	
			ending v		
8 4	ineck if pplicable			D Employer identific	ation number
	_Address _change Name _change		NC.	13-26	695683
<u> </u>	ichango	Doing business as	Dagnalauita		
E	Finel Finel relunt/ termin- aled	40 Rector Street	Room/suite 5th Fl		965-2200
	termin-	City or town, state or province, country, and ZIP or foreign postal code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Gross receipt     S     Gross receipt     Gro	63620.
	Amende	New York, NY 10006		H(a) is this a group re	turn
_		F Name and address of principal officer: SHERRILYN A. IFILL		for subordinates	7 Yes 🕮 No
1	Deuglut Trou	same as C above		H(b) Are all subordinales in	chided7 Yes No
		mpt status: \  \( \times \) 501(c)(3) \  501(c)( \) \  \( \times \) (insert no.) \  4947(a)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)	or 527		list, (see instructions)
!	ax-exe	www.naacpldf.org		H(c) Group exemption	
7	Vensile	organization: X Corporation Trust Association Other	I Vest	of formation: 1972 M	State of legal domicite; NY
			12 1601	or ionneady, we i all in	
Pe	rt I	Summary  Iriefly describe the organization's mission or most significant activities: The	missio	n of the Ear	rl Warren
8	1 5	Legal Training Program, Inc. (EWLTP) is	to pro	vide schola	rship aid
Ě		Check this box  if the organization discontinued its operations or disposition		then 75% of its ant as	ante
ě					24
ģ		iumber of voting members of the governing body (Part VI, line 1a)			23
N.		tumber of independent voting members of the governing body (Part VI, line 1b)			Ö
2	4	otal number of individuals employed in calendar year 2017 (Part V, line 2a)			23
Activities & Governance		otal number of volunteers (estimate if necessary)		1 24162 4116 12 117 117 117 117 117 117 117	0.
Ą		otal unrelated business revenue from Part VIII, column (C), line 12		.::	0.
	10	let unrelated business taxable income from Form 990-T, line 34			
2			-	Prior Year 60250 •	Current Year 21.044.
		Contributions and grants (Part VIII, line 1h)		00230.	0.
Ĕ		Program service revenue (Part VIII, line 2g)		93971.	16671.
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		93971.	
Œ		Other revenue (Part Vill, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			30015
	12 7	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		154221.	37715.
	13 (	Brants and similar amounts paid (Part IX, column (A), lines 1-3)		36000.	30000.
		Senefits paid to or for members (Part IX, column (A), line 4)		0.	0.
2	15 5	lataries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		15000.	15000.
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)		0.	0.
Ĝ	ьт	otal fundralsing expenses (Part IX, column (D), line 25)	67.		
ú	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		9962.	6567.
	18 1	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		60962.	51567.
	19 F	Revenue less expenses, Subtract line 18 from line 12		93259.	-13852.
Net Assets or Fund Batances			Ве	ginning of Gurrant Year	End of Year 713680 -
額	20 1	otal assets (Part X, line 16)		709795.	
<b>20</b>	21 7	Total Rabilities (Part X, line 26)		6900.	8167.
題	22 1	let assets or fund balances, Subtract line 21 from line 20		702895.	705513.
P	art II	Signature Block			
Und	er penal	lies of perjuty I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of m	y knowledge and beaet, it is
true,	, correct	, and composte. Declaration of preparer (other than officer) is based on all information of w	hich preparei	has any knowledge.	1/2
		Lymp 1/400		2-/7- Date	<u> </u>
Sig	n	Signature of officer		*	
Her	a	SHERRILYN A. IFILL, President & Direc	tor-cc	nnser	<u> </u>
	l	Type or print name and title			PIN
-		Print/Type preparer's name Preparer's from the	, l	Dale Chack L	
Pale		Frederick E. Davis, Jr. ///////////	<u> </u>	1001 untereday	13-2781641
Pre	parar [	Firm's name Mitchell & Titus, LLP		Firm's EIN 🛌	T3_T\0T0#T
Use	Only	Firm's address One Battery Park Plaza		m	12) 709-4500
		New York, NY 10004		Phone no. ( 2	X Yes No
Mar	y the IA	S discuse this return with the preparer shown above? (see instructions)		(12.11.11.11.11.11.11.11.11.11.11.11.11.1	Form 990 (2017)
		total war managed Darleyston Ant Matter and the engrate (natrict)	nna.		(.01111.00.0 (00.11)

#### No Yes 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? Х If "Yes," complete Schedule A X 2 2 Is the organization required to complete Schedule B, Schedule of Contributors? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X 3 public office? If "Yes," complete Schedule C, Part I 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect X during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X 5 similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to X provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X 8 Schedule D, Part III 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? X If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent Х endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 11a Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 X 11d Part X, line 16? If "Yes," complete Schedule D, Part IX X e Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X ...... 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12a Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? X If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 X 14b or more? If "Yes," complete Schedule F, Parts I and IV \_\_\_\_\_\_ 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any X foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16 Х or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 X 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines Х 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," X complete Schedule G, Part III Form 990 (2017)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	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		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	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		
	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			х
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	OEL		х
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	26		х
077	complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	19816555	\$1167A	70000000000000000000000000000000000000
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	espeliane in	Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
Ū	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
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		X
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, or IV, and			
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			х
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			х
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Х	
	Note. All Form 990 filers are required to complete Schedule O			! (2017)

Form 990 (2017)

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

Form 990 (2017) EARL WARREN LEGAL TRAINING PROGRAM, INC. 13-2695683 Page 6

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

	to line da, 6b, or 10b below, describe the circumstances, processes, or changes in Generalic G. Gee management.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.	(5)/(5)	84926-987 25-97-94	
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	1992 (1992) 1992 (1992)	3000	
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		200	
	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
J	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
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	X	
	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	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	(S. 1703)	100000	10000
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	31.335.11.14.3
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
·	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	95/1555 55/1555	\$168.5	
13	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_	The organization's CEO, Executive Director, or top management official	15a	39102531	X
	Other officers or key employees of the organization	15b		X
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	334346	14.00 kg	2000 E
46~	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			12000000000000000000000000000000000000
108		16a	Siyaspatkii	X
	taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			284/241/25 274/241/25
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
		16b	0000000000000	3604057003
Č.	exempt status with respect to such arrangements?	105		
	tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ►NY, WI			
17	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailah	le	
18		, valiat		
	for public inspection. Indicate how you made these available. Check all that apply.  X Own website Another's website X Upon request Other (explain in Schedule O)			
		lfinon	oial	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	man	oidi	
	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: ► KEVIN C • THOMSON - (212) 965-2200			-
	KEVIN C. THOMSON - (212) 965-2200 40 Rector Street, 5th Floor, NEW YORK, NY 10006			
	40 Rector Bereet, Jen Proof, Man Tokk, Mr. 10000	Form	990	(2017)

Page 7

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

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

#### Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- ta Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0 in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- ◆ List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	Γ		((	<b>C)</b>			(D)	(E)	(F)
Name and Title	Average	<sub>(da</sub>	notc	Pos	ition	than	000	Reportable	Reportable	Estimated
	hours per	box	t, unle	SS 00	rson	is bol	h an	compensation	compensation	amount of
	week		cer an	dad	irecto	or/trus	tee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	50	9			zajec	İ	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	ge	1 trus		35	mpen m		(44-27 1099-141130)		and related
	below	dual	Institutional trustee	_	Кеу етріоуее	Highest compensated employee	h			organizations
	line)	喜	Institu	Officer	Keye	E P	БЩ			
(1) Sherrilyn A. Ifill	1.00									
President & Director-Couns	59.00	X		Х				0.	340782.	67910.
(2) Gerald S. Adolph	1.00									
Co-Chairman of the Board	8.00	X		X				0.	0.	0.
(3) David W. Mills	1.00									
Co-Chairman of the Board		X		X				0.	0.	0.
(4) Steven B. Pfeiffer	1.00							_	_	_
Secretary of the Board	4.00	X	L	X				0.	0.	0.
(5) James Castillo	1.00	]							•	•
Treasurer of the Board	4.00	X		X				0.	0.	0.
(6) William J. Bynum	0.50	]			İ					•
Board Member	2.00	X				ļ		0.	0.	0.
(7) Judith I. Byrd	0.50									•
Board Member	2.00	X	匚			ļ		0.	0.	0.
(8) Clifford P. Case III	0.50	ļ							_	^
Board Member	2.00	X						0.	0.	0.
(9) Robyn Coles	0.50	ļ								
Board Member		X	ļ		<u> </u>			0.	0.	0.
(10) Damien Dwin	0.50	l			l					0
Board Member	2.00	Х	ļ			_	L	0.	0.	0.
(11) Gregory Evans	0.50					1			_	^
Board Member	2.00	X	ļ		L	<u> </u>		0.	0.	0.
(12) Laurie Robinson Haden	0.50							0.	0.	0.
Board Member		Х	ļ			<u> </u>		U •	U.	U•
(13) Eric H. Holder, Jr.	0.50	١.,						0.	0.	0.
Board Member	2.00	X	<u> </u>					U •	υ.	<u> </u>
(14) David E. Kendall	0.50	٠,,						0.	0.	0.
Board Member	1	X	$ldsymbol{ldsymbol{\sqcup}}$		ļ	<del> </del>		<u> </u>	V •	<u> </u>
(15) Michael R. Klein	2.00	٠,			l			0.	0.	0.
Board Member	0.50	<u>^</u>	<u> </u>		<b> </b>	_	$\vdash$	U •	U •	<u> </u>
(16) Kim Koopersmith		<b>↓</b>						0.	0.	0.
Board Member	0.50	X		_	<u> </u>	_	<del> </del>	J	U •	<u> </u>
(17) William Lighten	2.00	x						0.	0.	0.
Board Member		14	<u> </u>	L	<u> </u>	Щ.	<u> </u>		<u> </u>	Form 990 (2017)

732007 11-28-17

Form 990 (2017)

(A) Name and title	(b) Average hours per		not c	Pos heck		1 than is bot		(D) Reportable compensation	(E) Reportable compensation	Estimated amount of
	week (list any hours for related organizations below	tee or director		dac	directo	Highest compensated	tee)	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
	line)	ladívid	Institut	ië Hije	Key em	Highes	<b>Рог</b> тиег			G. garaut.orc
(18) Cecilia S. Marshall	0.50									
Board Member	2.00	X			ļ	ـــ		0.	0	0.
(19) Adebayo Ogunlesi	2.00	x						0.	0	. 0.
Board Member (20) Luis Penalver	0.50	^		-	├	╁		0.	0	
Board Member	2.00	x						0.	0	. 0.
(21) Michele Roberts	0.50			<b></b>	<del> </del>	T				
Board Member	2.00	х						0.	0	0.
(22) Jonathan Soros	0.50			i	ļ					
Board Member	2.00	Х				L		0.	0	0.
(23) Angela Vallot	0.50									
Board Member	2.00	Х			<u> </u>	<u> </u>		0.	0	0.
(24) Tony West	0.50								0	
Board Member	2.00	X						0.	0	0.
(25) Kevin C. Thomson	0.50 39.50	l		x				0.	181178	14099.
Chief Financial Officer (26) Janai Nelson	0.50			<u> </u>	-	-		0.	<u> </u>	14000.
Associate Director-Counsel	39.50	ł		x				l o.	248066	19460.
1b Sub-total	L	<u> </u>	L	<u> </u>	<u> </u>	.i		0.	770026	
c Total from continuation sheets to Part V	II. Section A					• • • • • • •	•	0.	445643	98364.
d Total (add lines 1b and 1c)								0.	1215669	199833.
2 Total number of individuals (including but r	ot limited to th	ose	liste	ed a	bov	e) w	no re	eceived more than \$100	,000 of reportable	
compensation from the organization										0
										Yes No
3 Did the organization list any former officer,										
line 1a? If "Yes," complete Schedule J for s										3 X
4 For any individual listed on line 1a, is the st										4 X
<ul><li>and related organizations greater than \$15</li><li>Did any person listed on line 1a receive or a</li></ul>										
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," com										5   X
Section B. Independent Contractors					J					
Complete this table for your five highest co	mpensated inc	depe	ende	ent o	cont	racto	ors t	hat received more than	\$100,000 of comper	sation from
the organization. Report compensation for										
(A)				_				(B)	and a se	(C)
Name and business	address	N	ONI	<u> </u>				Description of s	ervices	Compensation
							ᆜ		Parigrap.	no dinggo kang ta di Japaha tang dan kalawa ni bas
2 Total number of independent contractors (		ot li	mite	d to	tho	se li N	stec	above) who received m	iore than	
\$100,000 of compensation from the organi See Part VII, Section	za¤on ► n A Cont	- 1 -	7112	3 t	1.01	n ,	sh	eets	1 300 \$1.00	Form <b>990</b> (2017)
Dee Tate Att Deceto					•	1				(2017)

732008 11-28-17

Part VII   Saction A. Officers, Directors, Trustees, Key Employees, and Highest Companiated Employees (continued)   Co									PROGRAM, INC		5683
(27) Verlette RM Cutting (128) Malania Revisean (128) Malania Revisean (129) Manica Redictor (129) Manica Redi	Part VII Section A. Officers, Directors, Tru	istees, Key Ei	nplo	oyee	s, a	nd F	ligh	est	Compensated Employ	rees (continued)	
Nours   Component of the component of					(0	C)			(D)	(E)	
Per week (lat any week (lat	Name and title										
Can   Verlette RM Cutting			(cl	heck	call '	that	арр	ly)			
(list any burse for related organization splane)   1									)		
(27) Verlette RM Cutting		(list any	Ē				8				
(27) Verlette RM Cutting		hours for	direc				E 5			(17 2, 1000 111100)	
(27) Verlette RM Cutting		related	10 83	stee			is is				
(27) Verlette RM Cutting		organizations	ltrus			ayee	ğ.				organizations
(27) Verlette RM Cutting		below	lwiq na	itatio	5	E E	l set	퍝			
(27) Verlette RM Cutting 0.50 chief Development Officer 39.50 X 0. 166326. 49587. (28) Melanie Newman 0.50 Chief Communications Officer 39.50 X 0. 141421. 7699. (29) Monica Madrazo 0.50 Director, HR & Administrat 39.50 X 0. 137896. 41078.		line)	Ē	ISI	喜	ş	£	뗥			
(28) Melanic Newman	(27) Verlette RM Cutting	0.50				l				1.663.06	40505
Chief Communications Officer 39.50 X 0. 141421. 7699. (22) Monica Madraro 0.50 Director, HR & Administrat 39.50 X 0. 137896. 41078.		39.50		<u> </u>		X			0.	166326.	49587.
(29) Monica Madrazo		0.50					,,			1 4 1 4 0 1	7,600
Director, HR & Administrat 39.50 X 0. 137896. 41078.						<u> </u>	X		0.	141421.	/699.
		0.50								127006	41070
	Director, HR & Administrat	39.50				<u> </u>	X	<u> </u>	U.	137896.	410/8.
			l								
			<del> </del>	_	$\vdash$	<del>                                     </del>	_				
					┢						
			- "'								
				_							
				_	_						
					_						
							_	_			
					_						
Total to Part VII, Section A, line 1c 98364.	Total to Part VII, Section A, line 1c									445643.	98364.

Form 990 (2017) EARL WA
Part VIII Statement of Revenue

		Check if Schedule O cont	ains a response	or note to any lir	ne in this Part VIII			<u></u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts st	1 a	Federated campaigns	1a	1044.				
ıran		Membership dues	11					
E,G		Fundraising events						
iifts ar A		Related organizations						
s, G mili		Government grants (contributi						
Sign		All other contributions, gifts, grant	·····/					
he		similar amounts not included abov	1 1	20000.	5.640.006.00			
ĞĒ,	a	Noncash contributions included in lines						
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f			21044.			
				Business Code	1019/61/62/64/50/04/826	garagaran atra	94.357 (2000) 250 (2009)	
يه	2 a							
Ž,	b							
Se	C							
eve	d							
Program Service Revenue	е							
g.		All other program service reve	nue					
		Total. Add lines 2a-2f		-				
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)			17532.			17532.
	4	Income from investment of tax	k-exempt bond p	proceeds				
	5	Royalties		,				
		•	(i) Real	(ii) Personal		al esta l'accellatatega (est este sité Esta composito de l'accellata (est est	griesgridensschlichticht Staffe ausgeschlichticht	
	6 a	Gross rents						
		Less: rental expenses			100100120000000000000000000000000000000			
	С	Rental income or (loss)			440 1240 746 746 755 755 144 755 455 755 755 755 755 755 755 755 755 755			
	d	Net rental income or (loss)	.,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<b>.</b>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	25044.					
	b	Less: cost or other basis			200 (100 (100 (100 (100 (100 (100 (100 (			
		and sales expenses	25905.					
	С	Gain or (loss)	-861.					0.71
	d	Net gain or (loss)		. <u></u>	-861.	Standard value and additional ministration	steerseerinkoira-tarestri sõvete	-861.
e e	8 a	Gross income from fundraising	g events (not			90 97 W - 10 6 FF 197 GE 192		
evenue		including \$	of					
3e		contributions reported on line						
Other R		Part IV, line 18				Antau Britania (Dinasi Dalah		
oth		Less: direct expenses						
		Net income or (loss) from fund	-	·····	e el Secure di respensive se recellanti les de Seci.		ndát a vidá jatelák kárstárog vázilteri	1555 (1855) (1856) (1856) (1856) (1856) (1856) (1856) (1856) (1856) (1856) (1856) (1856) (1856) (1856) (1856)
	9 a	Gross income from gaming ac						
		Part IV, line 19					8 2310 6925	
		Less: direct expenses		<u> </u>				
		Net income or (loss) from gam		. <u></u>	no complete of the sector for Stanfact	son remide stars nes Chiverinos (etc	esta premio provincia di socio de socio	reconsectors and a contract of the contract of
	10 a	Gross sales of inventory, less						
		and allowances						
		Less: cost of goods sold  Net income or (loss) from sale:				(1991)		necvicies austrovistica (1945)
	<u>C</u>			Business Code			ere kustur seter tipliya setiro-bi inteb	agen vela kasal kasa kasa kasa kesa kesa k
	11 a	Miscellaneous Revenu		Luanicaa Code	j na njevijsko gjernys Paves standa Flård Svet VIII (s.	) constant and control (control  esservi studia ducesti dicavi disedile	. 2013 (300) 300 (300) (3	
	ıı a b							
	C							
	_	All other revenue						
		Total. Add lines 11a-11d						::55:0481:55:49899958114344:55.
	12	Total revenue. See instructions.			37715.	0.	0.	16671.
	14				·			Form 000 (2017)

# Form 990 (2017) EARL WARREN L Part IX Statement of Functional Expenses

	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	( <b>D</b> ) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic	30000.	30000.		
_	individuals. See Part IV, line 22	30000.	30000.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members				0.0 NO.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1
Ð	trustees, and key employees	5159.	5159.		
6	Compensation not included above, to disqualified				
Ü	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	6841.	6841.	····	
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	2082.	2082.		
10	Payroll taxes	918.	918.		
11	Fees for services (non-employees):				
а	Management				
b					
С		1500.	1500.		
d					
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	300.		300.	
g	(151)				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses	1500.	1500.		
14	Information technology				
15	Royalties				
16	Occupancy	2700.	2700.		
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	podreogljalik (Karayra) i kara selverocensi i	governo grigoro di subsenesso de enesia.		 
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule ().)				
а					
b					
c					
d					
	All other expenses	567.			567
25	Total functional expenses. Add lines 1 through 24e	51567.	50700.	300.	567
<u> </u>	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

#### Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 6471. 6415. 1 Cash - non-interest-bearing 1 2 Savings and temporary cash investments Pledges and grants receivable, net 3 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L ..... 6 Notes and loans receivable, net 7 8 8 Inventories for sale or use \_\_\_\_\_ 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 0. b Less: accumulated depreciation \_\_\_\_\_\_10b 10c 703324. 707265. 11 11 Investments - publicly traded securities 12 12 Investments - other securities. See Part IV, line 11 13 13 Investments - program-related. See Part IV, line 11 14 14 Intangible assets 15 Other assets. See Part IV, line 11 709795. 713680 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 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 6900. 8167. 6900. 8167. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 250088. 247470. 28 Temporarily restricted net assets 455425. 455425. Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ L and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 702895. 705513. 33 Total net assets or fund balances 33 713680. 709795. 34 Total liabilities and net assets/fund balances

Form 990 (2017)

Form 990 (2017)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization EARL WARREN LEGAL TRAINING PROGRAM, 13-2695683 Part 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). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 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 hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 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). 6 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in 7 section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 in 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, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (iv) is the organization listed in your governing document? (vi) Amount of other (iii) Type of organization (described on lines 1-10 (v) Amount of monetary (i) Name of supported (iii) EIN support (see instructions) support (see instructions) organization Yes above (see instructions))

Schedule A (Form 990 or 990-EZ) 2017 EARL WARREN LEGAL TRAINING PROGRAM, INC.13-2695683 Page 2

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support			,			
	indar year (or fiscal year beginning in)	(a) 2012	(b) 2014	(a) 201E	(4) 2016	(a) 2017	(f) Total
		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(i) iOtal
	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	6291.	62811.	25050.	60250.	21044.	175446.
2	Tax revenues levied for the organ-	0451	02011.	230301	002301	220114	
2	ization's benefit and either paid to						
2	or expended on its behalf The value of services or facilities						
Ş	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	6291.	62811.	25050.	60250.	21044.	175446.
		Medicine application falletis			ation and the second	da terrode i serebilati da	
3	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,						
	•						137217.
6	column (f) Public support. Subtract line 5 from line 4.		esatekiskotkisestäsiyait	siai keiniyesi nyekasi ngeristi	distribution de la company de la company de la company de la company de la company de la company de la company		38229.
	ction B. Total Support	1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to					
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 4	6291.	62811.	25050.	60250.	21044.	175446.
8	Gross income from interest,						
3	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	16585.	17361.	19790.	16340.	17532.	87608.
9	Net income from unrelated business						
3	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10	podegranismo palamina	47/1000/04/04/04/05/05	deservicies de la companie		Mástatol sárciás leáriczierá	263054.
		etc (see instruction	ons)	*** *** *** *** ***********************		12	
	First five years. If the Form 990 is for					<u> </u>	
	organization, check this box and stor						▶□
Sec	tion C. Computation of Publ	ic Support Pe	rcentage				<sub>F</sub>
	Public support percentage for 2017 (			olumn (fi)		14	14.53 %
15	Public support percentage from 2016	Schedule A. Part	II. line 14			15	16.77 %
16a	33 1/3% support test - 2017. If the c	organization did no	t check the box or	line 13, and line	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies						
b	33 1/3% support test - 2016. If the d						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						zation
	meets the "facts-and-circumstances"						[ TTT]
b	10% -facts-and-circumstances tes	_					
_	more, and if the organization meets the	-					
	organization meets the "facts-and-circ						<b></b>
18	Private foundation. If the organization			•			
						dule A (Form 990	
							•

#### Schedule A (Form 990 or 990-EZ) 2017 EARL WARREN LEGAL TRAINING PROGRAM, INC. 13-2695683 Page 3 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Sec	ction A. Public Support	elow, please con	ipiete Fait II.)				
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and	(a) 2013	(b) 2014	(0) 2010	(4)2010	(0) 2017	(1) 10(0)
'	membership fees received. (Do not						
	include any "unusual grants.")						
_	, , , , , , , , , , , , , , , , , , , ,						
2	Gross receipts from admissions, merchandise sold or services per-						
	formed, or facilities furnished in			1			
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to						
	to the standards						
E	The value of services or facilities						······································
o							
	furnished by a governmental unit to			ŀ			
	the organization without charge						
	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)	grassaturaktalaktasa	s Prografy konkrutyje zai	www.			
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	• • • • • • • • • • • • • • • • • • • •	(a) 2010	(0) 2014	(0) 2010	(a) 2010	(0) 20	(i) rotal
	Amounts from line 6 Gross income from interest,						
3Ua	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
1 44-	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for						
	check this box and stop here	<del></del>				***************************************	
	ction C. Computation of Publ						
	Public support percentage for 2017 (					15	%
	Public support percentage from 2016					16	%
Sec	tion D. Computation of Inve	stment Incom	ne Percentage				
17	Investment income percentage for 20	117 (line 10c, colu	mn (f) divided by li	ne 13, column (f))	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	17	%
	Investment income percentage from:						%
	33 1/3% support tests - 2017. If the						17 is not
	more than 33 1/3%, check this box a						
h	33 1/3% support tests - 2016. If the	organization did	not check a box or	line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
~	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
70000		n ala not officer a	CONCLINIO 17, 10	a, or 100, 01100K I		nedule A (Form 990	

#### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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

  If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
	(1000)	
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	/a (5)	
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3c		
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4b		
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9b	10/11/20/11	
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10a		6 (65 (51
10b		
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	edule A (Form 990 or 990-EZ) 2017 EARL WARREN LEGAL TRAINING PROGRAM, INC. 13-2	69568	3 P	age 5
Pa	rt IV Supporting Organizations (continued)		1	Г
		43,441,334,485,4	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	72	500 (500 ) 500 (500 ) 700 (500 )	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		REPERT	1998.01 N
	below, the governing body of a supported organization?	11a	<del> </del>	<del> </del>
	A family member of a person described in (a) above?	11b	ļ	<del> </del>
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	<u> </u>	
360	ction B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	3,534,541	2.00	
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	1717,074,000		
	controlled the organization's activities. If the organization had more than one supported organization,			Section
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		20 SS	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	12.000.000.000	30836803
2	Did the organization operate for the benefit of any supported organization other than the supported	(2012)		
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	330000000 37000000		
	supervised, or controlled the supporting organization.	2	DEROGEA.	11,013,011
Sec	tion C. Type II Supporting Organizations			
***************************************			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	976469		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	13/31/35		
	the supported organization(s).	1		<u> </u>
Sec	tion D. All Type III Supporting Organizations			······································
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	750 1940 Apr		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	(0.00000000 0.0000000000000000000000000		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		- 20 - 20 1 2
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	akayarasan.	2010-42-2
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's	73161331991		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
<u> </u>	supported organizations played in this regard.	3		
_	tion E. Type III Functionally Integrated Supporting Organizations  Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeatsee instruction			
1	The organization satisfied the Activities Test. Complete line 2 below.	15].		
a	The organization satisfied the Activities rest. Complete line 2 below.  The organization is the parent of each of its supported organizations. Complete line 3 below.			
b	The organization is the parent of each of its supported organizations. Complete line's below.  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see it	nstructions	2)	
c	Activities Test. Answer (a) and (b) below.	130100110110	Yes	Nο
2	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	salet Les Atible Les Arges (1915)	in district	
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	1000000		
	those supported organizations and explain how these activities directly furthered their exempt purposes,	30.5357.055		
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	SOCHARI.	officialization T
h	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		50 AV	allin
D	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	(A) (B) (B)		
	reasons for the organization's position that its supported organization(s) would have engaged in these	777 (STR. 757) 777 (Str. 757)		
	activities but for the organization's involvement.	2b	L008/99993	TRANSPORT
3	Parent of Supported Organizations. Answer (a) and (b) below.			STEAK
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	7.00	20000	
a	trustees of each of the supported organizations? <i>Provide details in</i> <b>Part VI.</b>	3a	4,64,000,00	-6973E210
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		500,0000	
J	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	viidagjiki	
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	edule A (Form 990 or 990 EZ) 2017 EARL WARREN LEGAL TRAIN  rt V Type III Non-Functionally Integrated 509(a)(3) Supportin			3-2695683 Page 6
1	Check here if the organization satisfied the Integral Part Test as a qualifyin			Part VI.) See instructions. A
•	other Type III non-functionally integrated supporting organizations must co	•	· · ·	·· <b>,</b> ··
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	2000		
	instructions for short tax year or assets held for part of year):	6501939 85747519		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other	21 × 10 × 10 × 10 × 10 × 10 × 10 × 10 ×		
	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 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	la metal de partir de la mercal e se distribuir de la metal de la metal de la metal de la metal de la metal de La metal de la	
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly integr	ated Type III supporting orga	anization (see

Schedule A (Form 990 or 990-EZ) 2017

instructions).

Schedule A (Form 990 or 990-EZ) 2017 EARL WARREN LEGAL TRAINING PROGRAM, INC.13-2695683 Page 7

Part V Type III Non-Functionally Integrated 509			.5 2055005 Page 7
Section D - Distributions	3.73.7.	(continued)	Current Year
Amounts paid to supported organizations to accomplish exc	empt purposes		
2 Amounts paid to perform activity that directly furthers exem			
organizations, in excess of income from activity			
3 Administrative expenses paid to accomplish exempt purpos	es of supported organization	ns	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval required)			
6 Other distributions (describe in Part VI). See instructions.			
7 Total annual distributions. Add lines 1 through 6.			
8 Distributions to attentive supported organizations to which t	he organization is responsiv	e	
(provide details in Part VI). See instructions.	•		
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by line 9 amount			
	(i)	(ii)	(iii)
Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
<ul> <li>Distributable amount for 2017 from Section C, line 6</li> <li>Underdistributions, if any, for years prior to 2017 (reason-</li> </ul>		Parameter value and enter all to where a constitutions and the constitution of the con	gdistringiotarinie grafstationalitations
able cause required- explain in Part VI). See instructions.			
paradija di paragrafija aray na piloni faraka na paragramany na diappy filo filopo na promopoli paragrafija da			
a b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			Zelustis etrilose alemakolistis ata etitologia
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			A CONTRACTOR OF THE PART OF TH
i Carryover from 2012 not applied (see instructions)		pondinskunistiski politika liskala killingsisti.	
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D,			
line 7: \$			
a Applied to underdistributions of prior years	tauto establica e presidente de la composição de la compo		Adense (1 (dense) as en elevidente (1867) et a
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if			disarran dina dili suddi silati ispersoci ish islam
any. Subtract lines 3g and 4a from line 2. For result greater			
than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j			
and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			
e Excessitorii 2017	<ul> <li>Proposition and a security of property of the pro</li></ul>	The second second of the second secon	autorio de la como de

Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Form 990 or 990 EZ) 2017 EARL WARREN LEGAL TRAINING PROGRAM, INC. 13-2695683 Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; 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.)
Part II, Section C, line 17a, Facts and Circumstances Test:
Schedule A, Part II, Section C, line 17a, Facts and Circumstances Test:
The Earl Warren Legal Training Program, Inc. maintains a continuous and
bonafide program for solicitation of funds from the general public by
soliciting board members, former donors, past scholarship recipients, and
other donors known to its affiliate, the NAACP Legal Defense and
Educational Fund, Inc. The governing body represents the broad interests
of the public and has numerous persons having special knowledge or
expertise in the area of legal education. The Earl Warren Legal Training
Program, Inc. provides public interest scholarship to deserving students
who wish to furhter their education in law school.

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

Employer identification number

2017

Ελ	ARL WARREN LEGAL TRAINING PROGRAM, INC.	13-2695683
Organization type (check of	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note: Only a section 501(c) General Rule	s covered by the <b>General Rule</b> or a <b>Special Rule</b> .  (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	
_	n filing Form 990, 990·EZ, or 990·PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor.	
Special Rules		
sections 509(a)(1) any one contribute	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount line 1. Complete Parts I and II.	or 16b, and that received from
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a ations of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educa- cruelty to children or animals. Complete Parts I, II, and III.	
year, contributions is checked, enter i purpose. Don't co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled manere the total contributions that were received during the year for an exclusively religious mplete any of the parts unless the <b>General Rule</b> applies to this organization because it reference, contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box , charitable, etc., received <i>nonexclusively</i>
	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fo	

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

#### EARL WARREN LEGAL TRAINING PROGRAM, INC.

<u>13-269568</u>3

Part I Contri	ibutors (see instructions). Use duplicate copies of Part I	if additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$20000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$Sahadula P (For	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

#### EARL WARREN LEGAL TRAINING PROGRAM, INC.

13-2695683

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

Employer identification number Name of organization 13-2695683 EARL WARREN LEGAL TRAINING PROGRAM, INC. Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Part III the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (d) Description of how gift is held from (b) Purpose of gift (c) Use of gift Part l (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization EARL WARREN LEGAL TRAINING PROGRAM, INC. 13-269568

Part Le Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the 13-2695683

1 4	Organizations Maintaining Donor Advised		o or recounted complete in the
	organization answered "Yes" on Form 990, Part IV, line	e 6. (a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advi-	sed funds
_	are the organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and donor ac		
•	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?		
Pa	rt II Conservation Easements. Complete if the orga	anization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or ed		orically important land area
	Protection of natural habitat	,	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualific	ed 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
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic stru		*******
	Number of conservation easements included in (c) acquired a		
u	listed in the National Register		1 1
3	Number of conservation easements modified, transferred, rele		101100011
3	year ►	sacce, oxaligabiles, ox terminates by an	5 5. gara
4	Number of states where property subject to conservation eas	ement is located	
5	Does the organization have a written policy regarding the period		
3	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, i	andling of violations, and enforcing con	
U	Start and volunteer means devoted to memoring, inoposing,	in the state of th	
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conserva	ation easements during the year
•	\$		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	)(h)(4)(B)(i)
Ŭ	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expens	e statement, and balance sheet, and
Ŭ	include, if applicable, the text of the footnote to the organizati		
	conservation easements.		-
Pa	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or C	ther Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (ASC	C 958), not to report in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public exhi		
	the text of the footnote to its financial statements that describ		
b	If the organization elected, as permitted under SFAS 116 (ASC		t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		· ·
2	If the organization received or held works of art, historical trea	sures, or other similar assets for financi	al gain, provide
-	the following amounts required to be reported under SFAS 11		
2	Revenue included on Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		<b>.</b> .
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2017

732051 10-09-17

		RREN LEGAL						
Pai	t III Organizations Maintaining C							
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are a	significa	ant use of its	collection	items
	(check all that apply):							
а	Public exhibition	d		hange programs				
þ	Scholarly research	e	L Other					
С	Preservation for future generations							
4	Provide a description of the organization's co						t XIII.	
5	During the year, did the organization solicit o						٦	<del></del> 1
-	to be sold to raise funds rather than to be ma						J Yes	No_
Par	t IV Escrow and Custodial Arran	•	te if the organizatio	n answered "Yes" o	n Form	990, Part IV,	line 9, or	
	reported an amount on Form 990, Par				A to a to a d			
1a	Is the organization an agent, trustee, custod					3	Yes	□ No
	on Form 990, Part X?						ı res	NO
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:			-T	Amount	
	On the last trans				10		Amount	
	Beginning balance							
	Additions during the year  Distributions during the year							
f	Ending balance				••••			
	Did the organization include an amount on Fe						Yes	No
	If "Yes," explain the arrangement in Part XIII.							
	t V Endowment Funds. Complete i							
		(a) Current year	(b) Prior year	(c) Two years back		ee years back	(e) Four y	ears back
1a	Beginning of year balance	703323.	618794.	631910,		655725.		594525.
	Contributions		53000.					
С	Net investment earnings, gains, and losses	32841.	59924.	15049.		3185.		87700.
	Grants or scholarships							
	Other expenditures for facilities							
	and programs	28900.	28395.	28165,		27000.		26500.
f	Administrative expenses							
g	End of year balance	707264.	703323.	618794.		631910,		655725.
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1g, column (a	i)) held as:				
а	Board designated or quasi-endowment		_%					
	Permanent endowment ► 64.55	%						
С	Temporarily restricted endowment ▶3	5.45 %						
	The percentages on lines 2a, 2b, and 2c sho	,						
За	Are there endowment funds not in the posse	ssion of the organiza	ition that are held a	nd administered for	the org	anization	_	
	by:							es No
	(i) unrelated organizations							$\frac{X}{X}$
	(ii) related organizations							<del> -^-</del> -
b	If "Yes" on line 3a(ii), are the related organiza						3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Par	t VI Land, Buildings, and Equipm		March IV line day C	See Form 000 Bort	/ lina 16	,		
	Complete if the organization answere						(d) Book	· · · · · · · · · · · · · · · · · · ·
	Description of property	(a) Cost or ot		! ' '	Accumu epreciat	I	(a) Book	value
		basis (investm	ioni, basis	(00.101) 00	A. COIGI	3597469999999		
	Land				1,600,000,000,000,000	55.00000000080000		
	Buildings							
	Leasehold improvements							
	Equipment							
Total	Other	oual Form 990 Part	X. column (B). line 1	(Oc.)				0.
ı oldi	eriod miles ra unicagn to location by most o	are	,					

732053 10-09-17

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017

Management has analyzed the tax positions taken by these entities and has

732054 10-09-17

Schedule D (Form 990) 2017 EARL WARREN LEGAL TRAINING PROGRAM, INC. 13-2695683 Page 5  Part XIII Supplemental Information (continued)
concluded that as of June 30, 2018, there were no uncertain tax positions
taken or expected to be taken. Accordingly, no interest or penalties
related to uncertain tax positions have been accrued in the accompanying
combined financial statements.
EWLTP is subject to audit by taxing jurisdictions; however, no audits for
any tax periods are currently in progress. Management believes that the
entity is no longer subject to income tax examinations by either Federal
or New York state tax authorities for years ended on or prior to June 30,
2015.

Schedule D (Form 990) 2017

SCHEDULE (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

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.

2017
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► Go to www.irs.gov/Form990 for the latest information. ▶ Attach to Form 990.

Employer identification number 13-2695683 Open to Public Inspection

13-2695683		; •	No No No No	S many primary primary primary primary in a second	/, line 21, for any		(h) Purpose of grant or assistance					Schedule I (Form 990) (2017)
		istance, and the selectio			and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any		(g) Description of noncash assistance					
		y for the grants or ass			anization answered "Y		(f) Method of valuation (book, EMV, appraisal, other)					
Ċ.		grantees' eligibility		d States.	complete if the orga	ded.	(e) Amount of non-cash assistance					
PROGRAM, INC		or assistance, the		ne use of grant funds in the United States.	c Governments. C	ional space is need	(d) Amount of cash grant				1	7
NING		amount of the grants		oring the use of grant		be duplicated if addit	(c) IRC section (if applicable)				ganizations listed in the line 1 table	ions for Form 990.
EN LEGAL	nd Assistance	substantiate the	tance?	cedures for monite	Jomestic Organiz	5,000. Part II can	(b) EIN				nd government or	see the Instructi
ŀ	Part I General Information on Grants and Assistance	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	criteria used to award the grants or assistance?	2 Describe in Part IV the organization's procedures for monitoring th	Part II Grants and Other Assistance to Domestic Organizations	recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	1 (a) Name and address of organization or government				2 Enter total number of section 501(c)(3) and government organizate.	4

31

Page 2

13-2695683

Schedule I (Form 990) (2017) EARL WARREN LEGAL TRAINING PROGRAM, INC.

Part III | Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III | Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Part I, Line 2:	juired in Part I, lin	e 2; Part III, column	(b); and any other a	dditional information.	
The Earl Warren Legal Training Pro	Program obtains		documentation f	from every	
student receiving a Warren scholar	ship whi	scholarship which indicates	that	s/he remains in	
good standing with the university	or college	ge s/he is	attending.		

#### **SCHEDULE J** (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury Internal Revenue Service

Employer identification number 13-2695683 EARL WARREN LEGAL TRAINING PROGRAM, INC.

Pa	art I Questions Regarding Compensation		,	
<u> </u>			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			ASSESSES.
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		<u> </u>
			200	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to	(499363) (G. 900		
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			34846
	Independent compensation consultant Compensation survey or study			2001.000 2004.000
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			124(2)
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	750 GG.	Total	
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.	100 (40) 130 (40)		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			15000 (1) 15000 (1)
	contingent on the net earnings of:		STATE OF	
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	100000000	Sayar.	
	not described on lines 5 and 6? If "Yes," describe in Part III	7	<u> </u>	X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		2000 EV	
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	<u> </u>	<u></u>

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

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(c)-(b)(s)	in column (B) reported as deferred on prior Form 990
(1) Sherrilyn A. Ifill	©	0	0	0	0	0	0	0
sun	: €	305782.		35000.	11800.	56110.	408692.	0.
(2) Kevin C. Thomson	Ξ	0	0	0.	0	0		0
Chief Financial Officer	Ξ	181178.		0	8407.	5692.	195277.	0
(3) Janai Nelson	Ξ	0	0	0.	0	• 0		0
Associate Director-Counsel	€	248066.	0	0	11213.	8247.	26752	0
(4) Verlette RM Cutting	Ξ	0		0	0	0		• 0
Chief Development Officer	▣	166326.	• 0	.0	8284.	41303.	215913.	• 0
(5) Monica Madrazo	Ξ	0	0	0.	0	0		0
Director, HR & Administrat	Ξ	137896.	0.	0.	3976.	37102.	178974.	0
	Ξ							
	Œ							
	ε							
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	(1)							
	(ii)							
	Ξ							
	(11)							
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	(ii)							
	(i)				-			
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	3							
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	(iii)							
	8							
	⊞							
	9							
	▣							
	Ξ							
	Ξ							
				•			Schedu	Schedule J (Form 990) 2017

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Form 990, Part VI, Line 15a and Schedule J, Part I, Line 3
The Earl Warren Legal Training Program, Inc. ("EWLTP") does not pay
compensation to its officers, directors, or trustees. The EWLTP and the
NAACP Legal Defense and Educational Fund, Inc. ("LDF") share the same
officers and key employees, and the EWLTP has adopted the policies of
its affiliate - NAACP LDF. The NAACP LDF utilizes compensation
studies, and Form 990 of other organizations to establish the
compensation of the organization's President and Director-Counsel.
l
Schedule J (Form 990) 2017

#### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### 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.

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

OMB No. 1545-0047

Name of the organization

EARL WARREN LEGAL TRAINING PROGRAM, INC.

Employer identification number 13-2695683

Form 990, Part I, Line 1, Description of Organization Mission: It aims to increase African-American to minority law students. representation in law schools and the legal profession and to help increase the number of African-American attorneys working in the public interest to help achieve civil rights for all.

Form 990, Part III, Line 1, Description of Organization Mission: increase the number of African-American attorneys working in the public interest to help achieve civil rights for all.

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

A draft of form 990 is prepared by the Finance Department and reviewed by the CFO. Copies are then sent to Mitchell & Titus LLP for their review and Once this is done, the Board of Directors receives a copy of the The final draft is then filed. 990.

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

The Conflict of Interest Policy provides that the board members and officers complete a questionnaire and forward the completed document to the The COO reviews the completed office of the Chief Operating Officer (COO). questionnaires for completeness, responsiveness and potential conflicts of The COO seeks the advice and counsel of the General Counsel with respect to further steps necessary to apprise the board of potential conflicts of interest appearing on the questionnaires. In the event of recognized conflicts of interest, the President contacts the involved board member to assure his or her compliance with recusal requirements prior to LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2017) 732211 09-07-17

SCHEDULE R (Form 990) Name of the organization

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

2017

OMB No. 1545-0047

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

INC

Part I lentification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

EARL WARREN LEGAL TRAINING PROGRAM,

▶ Attach to Form 990.

Open to Public Employer identification number Inspection

13-2695683

(g) Section 512(b)(13) controlled Schedule R (Form 990) 2017 å × entity? Direct controlling Yes Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Ξ Direct controlling entity End-of-year assets N/A status (if section 501(c)(3)) e Public charity Total income Exempt Code ਉ section 501(c)(3) Legal domicile (state or Legal domicile (state or foreign country) foreign country) Justice, Education, Voting New York To support litigation in the areas of Poverty & Primary activity Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. NAACP Legal Defense & Educational Fund, Inc. 13-1655255, 40 Rector Street, 5th Floor, Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity 10006 New York, NY Part II

13-2695683

Page 2

Schedule R (Form 990) 2017 EARL WARREN LEGAL TRAINING PROGRAM, INC.

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

Percentage ownership Schedule R (Form 990) 2017 Yes No Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. (i) Section 512(b)(13) controlled entity? Percentage ownership Yes Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets 6 Disproportionate Yes No allocations? Ξ Share of total income Share of end-of-year assets <u>6</u> Type of entity (C corp, S corp, or trust) e Share of total income Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) Direct controlling entity ਉ Primary activity (c)
Legal
domicile
(state or
foreign Primary activity <u>a</u> Name, address, and EIN of related organization Name, address, and EIN of related organization â 732162 09-11-17 Part IV

13-2695683

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Schedule R (Form 990) 2017 EARL WARREN LEGAL TRAINING PROGRAM, INC.

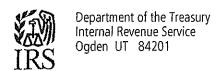
Note: Complete line 1 if any entity is listed in Parts II. III. or IV of this schedule.				Yes	l c
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	lated organizations listed	in Parts II-IV?	-	-649 -637
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				Ta X	L
b Gift, grant, or capital contribution to related organization(s)				1b X	L
(0)				1c X	<u>ا</u> ــا
	*************************		***************************************		Ļ
d Loans or loan guarantees to or for related organization(s)	***************************************			DL DL	إر
e Loans or loan guarantees by related organization(s)				1e X	W
					1 27
f Dividends from related organization(s)				<b>4</b> €	اہ
g Sale of assets to related organization(s)				1g X	м
Purchase of assets from related organization(s)				₩ 4-	l,
	***************************************				ļ,
I Exchange of assets with related organization(s)					۱,
j Lease of facilities, equipment, or other assets to related organization(s)				1j X	ایا
k Lease of facilities, equipment, or other assets from related organization(s)				¥ ⊠	ы
1 Performance of services or membership or fundraising solicitations for related organization(s)	nization(s)			11 X	ы
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			1m X	ы
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)			t X	
				10 X	
			***************************************		1865
a Dainhumann naid to related aronivation(s) for avacana				×	
	***************************************			╬	l,
d הפוווטעוטפווופוון טמע טץ ופומופט טוטמווזעמוטון אין וטן פאטפווטפט	***************************************			2000	1 200
					8167 8167 8174 <b>2</b>
r Other transfer of cash or property to related organization(s)	,			- Y	ا ہے
s Other transfer of cash or property from related organization(s)				1s   X	ы.
	who must complete the	is line, including covered	relationships and transaction thresholds.		
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved	volved	
NAACP Legal Defense & Educational Fund,	z	4200.	Past Usage		ŀ
	0	15000.	Past		
	4	1 7			
(a) Inc.	Ъ	31500.	FMV		
(4)					١
(5)					1
(9)					
732163 09-11-17	40		Schedul	Schedule R (Form 990) 2017	017

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

Primary activity	Legal domicile (state or foreign country)	(a) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all SI of the sec. SI of the sec	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionale allocations?	Code V-UBI General of Percentage amount in box 20 managing ownership of Schedule K-1 partner? (Form 1065)	General or managing partner? Yes No	(k) Percentage ownership
						-			
							:		

Schedule R (Form 990) 2017 EARL WARREN LEGAL TRAINING PROGRAM, INC. 13-2695683 Page 5
Part VII   Supplemental Information.  Provide additional information for responses to questions on Schedule R. See instructions.
Schedule R, Part II, Line (b)
To support litigation in the areas of poverty and justice, education,
voting rights, fair employment, capital punishment, administration of
criminal justice and to increase educational opportunities through
scholarships.



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EARL WARREN LEGAL TRAINING PROGRAM INC 40 RECTOR ST FL 5 NEW YORK NY 10006-1738

Notice	CP211A			
Tax period	June 30, 2018			
Notice date	November 26, 2018			
Employer ID number	13-2695683			
To contact us	Phone 1-877-829-5500			
	FAX 801-620-5555			

Page 1 of 1



2641

Important information about your June 30, 2018 Form 990

# We approved your Form 8868, Application for Extension of Time To File an Exempt Organization Return

We approved the Form 8868 for your June 30, 2018 Form 990.

Your new due date is May 15, 2019.

# What you need to do

File your June 30, 2018 Form 990 by May 15, 2019. We encourage you to use electronic filing—the fastest and easiest way to file.

Visit www.irs.gov/charities to learn about approved e-File providers, what types of returns can be filed electronically, and whether you are required to file electronically.

#### Additional information

- Visit www.irs.gov/cp211a
- For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).
- Keep this notice for your records.

If you need assistance, please don't hesitate to contact us.

#### Form **8868** (Rev. January 2017)

# Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 •

			•					
Electroni	c filing (e-file). You can electronically file Form 8868 to	request a	6-month automatic extension of time	e to file an	y of the			
forms list	ed below with the exception of Form 8870, Information F	Return for	Transfers Associated With Certain Pe	ersonal Be	nefit			
	s, for which an extension request must be sent to the IRS				he electronic			
filing of th	nis form, visit www.irs.gov/efile, click on Charities & Non-	Profits, an	d click on e-file for Charities and Nor	n-Profits.				
Automa	atic 6-Month Extension of Time. Only subm	iit origin	al (no copies needed).					
All corpor	rations required to file an income tax return other than Fo	orm 990-T	(including 1120-C filers), partnerships	s, REMICs	, and trusts			
	Form 7004 to request an extension of time to file income							
				Enter file	r's identifying	number		
Type or	Name of exempt organization or other filer, see instru	ctions.		Employer	identification	number (EIN) or		
print	,							
	EARL WARREN LEGAL TRAINING	PROGR	AM, INC.		13-269	5683		
File by the due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruct	tions.	Social se	curity number	(SSN)		
filing your return, See	40 RECTOR STREET, 5TH FLOOR							
instructions.	city, town or post office, state, and ZIP code. For a foreign address, see instructions.							
	NEW YORK, NY 10006							
Enter the	Return Code for the return that this application is for (file	a separa	te application for each return)			0 1		
Applicati	on	Return	Application			Return		
Is For		Code	Is For			Code		
Form 990	or Form 990-EZ	01	Form 990-T (corporation)		<u></u>	07		
Form 990		02	Form 1041-A			08		
Form 472	(0 (individual)	03	Form 4720 (other than individual)			09		
Form 990		04	Form 5227	,		10		
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11 12		
Form 990	-T (trust other than above)	06	Form 8870					
	KEVIN C THOMSON		TH FLOOR - NEW YORK	NV.	10006			
• The bo	poks are in the care of $\blacktriangleright$ 40 RECTOR STREE	11, J	Fax No. ▶	., 111	10000			
l elepr	none No. > 212 965-2214  organization does not have an office or place of business	in the lin				▶ □		
• If this	is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	f this is fo	r the whole are	oup, check this		
box >	. If it is for part of the group, check this box	-1	ach a list with the names and EINs of	all memb	ers the extensi	on is for.		
	quest an automatic 6-month extension of time until				npt organization			
	the organization named above. The extension is for the							
101	the digalization harmed above. The oxidate in the tips							
▶	calendar year or							
	X tax year beginning JUL 1, 2017	, ar	nd ending JUN 30, 2018					
	ne tax year entered in line 1 is for less than 12 months, c			Final retur	'n			
	Change in accounting period							
3a If ti	nis application is for Forms 990-BL, 990-PF, 990-T, 4720	or 6069,	enter the tentative tax, less any			_		
	nrefundable credits. See instructions.			3a	\$	0.		
b if ti	nis application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and					
est	imated tax payments made. Include any prior year overp	ayment al	lowed as a credit.	3b	\$	0.		
c Ba	lance due. Subtract line 3b from line 3a. Include your pa	ıyment wit	h this form, if required,			•		
by	using EFTPS (Electronic Federal Tax Payment System).	See instru	ctions.	3c	\$	0.		
Caution:	If you are going to make an electronic funds withdrawal	(direct de	bit) with this Form 8868, see Form 84	153-EO an	d Form 8879-E	:O for payment		
1 4 5	or Privacy Act and Panerwork Reduction Act Notice	see instri	uctions.		Form 88	68 (Rev. 1-2017)		