Form **990**

132001 12-09-21

EXTENDED TO NOVEMBER 15, 2022

Return of Organization Exempt From Income Tax

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

AF	OI LITE	2021 calendar year, or tax year beginning	enaing					
B C	heck if pplicabl	C Name of organization		D Employer identifi	cation number			
	Addre	NATIONAL LAWYERS GUILD FOUNDATION, INC		_				
	Name chang	Doing business as		13-33366	40			
]Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suit	i '				
	Final return	PO BOX 1266		212-679-	5100			
	termin ated	City or town, state or province, country, and ZIP or foreign postal code	City or town, state or province, country, and ZIP or foreign postal code					
	Amen- return			H(a) Is this a group re				
	Application			for subordinates	? Yes X No			
	pendi	PO BOX 1266, NEW YORK, NY 10009		H(b) Are all subordinates in	ocluded? Yes No			
		empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1)	or 52	7 If "No," attach a	list. See instructions			
		e: ▶ N/A		H(c) Group exemption				
		organization; X Corporation Trust Association Other	L Yea	r of formation: 1986	A State of legal domicile; NY			
Pa	rt I	Summary						
မွ	1	Briefly describe the organization's mission or most significant activities: PROT	ECTIO	N OF HUMAN R	IGHTS			
Activities & Governance	2	Check this box if the organization discontinued its operations or dispo	sed of mor	a than 25% of its not ass	eate			
Ver				3	13			
ĝ		Number of independent voting members of the governing body (Part VI, line 1b)			13			
که ۷	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)			1			
itie		Total number of volunteers (estimate if necessary)			13			
ξį				7a	0.			
Ă		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.			
				Prior Year	Current Year			
a)	8	Contributions and grants (Part VIII, line 1h)	E	2,781,872.	907,131.			
nue	9	Program service revenue (Part VIII, line 2g)		0.	0.			
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		100,087.	193,066.			
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,881,959.	1,100,197.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,450,116.	1,063,650.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
ç	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		111,234.	124,369.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
xbe	b	Total fundraising expenses (Part IX, column (D), line 25)	<u>66. </u>					
ú	'''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		63,946.	68,287.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,625,296.	1,256,306.			
		Revenue less expenses. Subtract line 18 from line 12		256,663.	-156,109.			
Net Assets or Fund Balances			LB	leginning of Current Year	End of Year			
sset	20	Total assets (Part X, line 16)		5,574,244.	5,326,679.			
at A	21	Total liabilities (Part X, line 26)		516,395.	293,834.			
	rt II	Net assets or fund balances. Subtract line 21 from line 20		5,057,849.	5,032,845.			
C 000 00 0		<u> </u>			. Los controlles de la			
		Ities of perjury, I declare that I have examined this return, including accompanying schedule t, and compl <u>ete. D</u> eclaration of preparer (other than officer) is based on all information of w			knowledge and belief, it is			
uue,	COHEC	t, and complete, becaration of preparer (other than officer) is based on all information of w	пісн рі враге	i ilas ally kilowieuge.				
O:		Signature of officer		Date				
Sigr Here		BRUCE D. NESTOR, PRESIDENT		11-8	-22			
пет	.	Type or print name and title						
		Print/Type preparer's name Preparer's)signature		Date Check	PTIN			
Paid		TRACY L. BADGLEY TRACY L. BADGLE	_Y	11/04/22 if self-employ				
	arer	Firm's name PKF O'CONNOR DAVIES, LAD		Firm's EIN	27-1728945			
	Only	Firm's address 32 FOSTERTOWN ROAD		THIN O CHI				
		NEWBURGH, NY 12550		Phone no. 84	5-565-5400			
Mav	the II	RS discuss this return with the preparer shown above? See instructions			X Yes No			

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Form	n 990 (2021) NA	TIONAL 1	LAWYERS	GUILD	FOUNDAT	ION, IN	IC :	13-3336640	Page 2
Pa	rt III Statement of Prog	gram Servic	e Accompli	shments					
	Check if Schedule O co	ntains a respon	ise or note to a	ny line in th	is Part III				
1	Briefly describe the organizati PROTECTION OF H		SHTS.						
2	Did the organization undertak prior Form 990 or 990-EZ?								es X No
	If "Yes," describe these new s	services on Sch	edule O.						
3	Did the organization cease co			changes in	how it conducts	s, any prograr	n services?	Ү	es X No
4	Describe the organization's pr Section 501(c)(3) and 501(c)(4 revenue, if any, for each progr	rogram service a l) organizations	accomplishmer are required to						
4a	(Code:) (Expenses \$	1,11	1,362. i		of \$1,)
	PROGRAM GRANTS COMMUNITY & THE								
4b	(Code:) (Expenses \$ _		ii	ncluding grants	of \$) (Revenue	\$)
	-								
4c	(Code:) (Expenses \$ _		i	ncluding grants	of \$) (Revenue	\$)
4d		ribe on Schedu	le O.)						
4e	(Expenses \$ Total program service expens	inclu	iding grants of \$	362.) (Revenue \$)	

Form **990** (2021)

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
Ū	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
Ŭ	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	<u> </u>		
10		10		X
11	or in quasi endowments? <i>If</i> "Yes," complete Schedule D, Part V	10		
••	as applicable.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а		11a		x
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	1 1a		
ь		11b		x
С	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
·		11c		x
٨	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110		
u		11d		X
_	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
	the organization's separate of consolidated limited statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
ıza	, , , , , , , , , , , , , , , , , , ,	12a	х	
h	Schedule D, Parts XI and XII	IZa	21	
b		12h		x
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
14a	5:10	14a		X
_		140		
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			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	שדו		
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13	21	
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
"	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	- ''-		
10		18		x
19	1c and 8a? If "Yes," complete Schedule G, Part II	10		
13	·	10		x
20-	complete Schedule G, Part III	19 20a		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		<u> </u>
) 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21	Х	
	aomostio government on l'artin, column (n), inte i : Il res. complete schedule I. Parts I and Il	41	-77	ı

Pa	rt IV Checklist of Required Schedules (continued)		V	NI-
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	1		
•	any tax-exempt bonds?	24c		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	1		
Lou	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	254		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	, , ,	25b		x
06	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		1
26				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			 ₩
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			, v
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			ا
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			l
	"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
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			-
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u></u>	
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
_	(gambling) winnings to prize winners?	1c	Х	

Form 990 (2021) NATIONAL LAWYERS GUILD FOUNDATION, INC
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return 2a 1					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		х		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b				
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a					
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x		
h	If "Yes," enter the name of the foreign country					
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
C	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30				
6a		6a		х		
L	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	0a				
b		Ch				
_	were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).		Х			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		7,7		
	to file Form 8282?	7c		X		
d	If "Yes," indicate the number of Forms 8282 filed during the year					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the					
	sponsoring organization have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.					
а	, , , , , , , , , , , , , , , , , , , ,					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities					
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders 11a					
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?	13a				
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans					
С	Enter the amount of reserves on hand					
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or					
	excess parachute payment(s) during the year?	15		Х		
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х		
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any					
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17				
	If "Yes," complete Form 6069.					

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

	Check if Schedule O contains a response or note to any line in this Part VI			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 13			
	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 on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		_X_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶NY			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.	-		
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial	
	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			_
	NATIONAL LAWYERS GUILD FD - 212-679-5100			
	DO BOY 1266 NEW YORK NY 1000			

PO BOX 1266, NEW YORK, NY 10009

Form **990** (2021)

132006 12-09-21

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of			
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) DANIEL MCGEE	35.00							_	
MANAGING DIRECTOR				Х			101,000.	0.	15,300.
(2) BRUCE NESTOR	2.30							_	_
PRESIDENT		Х		Х			0.	0.	0.
(3) JEFFREY PETRUCELLY	1.20							_	_
TREASURER		Х		Х			0.	0.	0.
(4) JUDY SOMBERG	0.80							_	_
ASST TREASURER		Х		Х			0.	0.	0.
(5) ELENA COHEN	0.40								
TERM ENDED 10/15/2021		Х					0.	0.	0.
(6) BARBARA DUDLEY	0.90								
DIRECTOR		Х					0.	0.	0.
(7) DAVID GESPASS	0.40								
DIRECTOR		Х					0.	0.	0.
(8) TIM HOFFMAN	0.40								
DIRECTOR		Х					0.	0.	0.
(9) KAREN JO KOONAN	0.90							_	_
DIRECTOR		Х					0.	0.	0.
(10) NATASHA LYCIA ORA BANNON	0.40								
TERM ENDED 1/21/2021		Х					0.	0.	0.
(11) REBECCA SHERMAN	0.40								
DIRECTOR		Х					0.	0.	0.
(12) P. BOBBY SHUKLA	0.40								
DIRECTOR		Х					0.	0.	0.
(13) SANDRA TSUNG	0.40								
DIRECTOR		Х					0.	0.	0.
(14) AMREET SANDHU	0.40								
TERM ENDED 1/14/2021		Х					0.	0.	0.
(15) KATIE ADAMIDES	0.40								
DIRECTOR		Х					0.	0.	0.
(16) SUZANNE ADELY	0.40								
DIRECTOR		Х					0.	0.	0.
(17) JOELLE ELIZA LINGAT	0.40								
DIRECTOR		Х					0.	0.	0 • Form 990 (2021)

132007 12-09-21

	(A)		(B)	(C)
	Name and business address	NONE	Description of services	Compensation
2	Total number of independent contractors (including but	not limited to those	listed above) who received more than	

Form 990 (2021)

\$100,000 of compensation from the organization

Provided Head of the Company of th	ı u	1 L V	••••	_	or note to any lin	o in this Dart VIII			
1 a Federated campaigns 1 a				Crieck ii Scriedule O contains a response	Of Hote to arry III		(B)	(C)	
1 a Federated campaigns 1 b Membership dues 15 16 16 16 16 16 16 16						Total revenue	Related or exempt	Unrelated	l , , ,
1 a Federated campaigne 1a Membership dues 10							function revenue	business revenue	
b Membership dues 1c 1c 1c 1c 1c 1c 1c 1	(0, (0	4	_	Endersted compaigns 10					000110110 0 12 0 1 1
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2 a b b c c c c c c c c	<u>ठ</u> ह		h	Total. Add lines 1a-1f		907,131.			
Total. Add lines 2a.2f All other program service revenue					Business Code				
g Total, Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 a Gross rents 6 b Less: rental expenses 6 b b c Rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 7 a Gross income from fundraising events 6 a Gross income from fundraising events 6 b Less: cost or other basis and sales expenses 7 a Gross income from fundraising events 6 b Less: cost or other basis and sales expenses 7 a Gross income from fundraising events 7 b 567, 808. 7 c 145, 641. 145, 641.	9	2	а						
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other similar amounts) 4 Income from investment of tax exempt bond proceeds 5 Royalties 6 a Gross rents 6 b Less: cretal expenses 6 c Rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 7 a Gross income from fundraising events (not including \$			g	Total. Add lines 2a-2f	>				
Page 1 Income from investment of tax-exempt bond proceeds Page 2 Royalites Page 3 Royalites Page 4		3		Investment income (including dividends, inter	est, and				
Formula Form				other similar amounts)		47,425.			47,425.
1		4		Income from investment of tax-exempt bond	proceeds				
1		5		Royalties)				
b Less: rental expenses c Rental income or (loss) d d Net rental income or (loss)				(i) Real					
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7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses C Gain or (loss) 7 b 567,808. C Gain or (loss) 7 b 145,641. 145,641.			С	Rental income or (loss) 6c					
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d Net gain or (loss)				Less: cost or other basis					
d Net gain or (loss)	ē			and sales expenses 76 567,808	,				
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8 a Gross income from fundraising events (not including \$	Şe.		d	Net gain or (loss)	•	145,641.			145,641.
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contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory 11 a	돭	_							
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Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Business Code 11 a b c d All other revenue e Total. Add lines 11a-11d									
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11 a					<u>~</u>				
Total. Add lines 11a-11d				133 HOOTHO OF GOOD, HOTH Sales OF HIVEHOLY	Business Code				
e Total. Add lines 11a-11d	ns	11	a						
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e Total. Add lines 11a-11d	ila Ven								
e Total. Add lines 11a-11d	Sce			All other revenue					
	Ξ								
12 Total revenue. See instructions $\triangleright [1,100,197.]$ 0. 0. 193,066.			<u>e</u>			1,100,197.	0.	0.	193,066.

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

Ω-	Check if Schedule O contains a respons	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	1 042 650	1 042 650		
_	and domestic governments. See Part IV, line 21	1,043,650.	1,043,650.		
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	20,000.	20,000.		
4		20,000.	20,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	116,300.	43,031.	36,053.	37,216
6	Compensation not included above to disqualified	110,300.	43,031.	30,033.	37,210
0	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
J	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
9 10	Payroll taxes	8,069.	2,985.	2,501.	2,583
11	Fees for services (nonemployees):	0,0031	2,3031	2,3011	2,303
' ' а	Management				
b	Legal				
c	Accounting	20,000.		20,000.	
d	Lobbying				
e					
f	Investment management fees	25,959.		25,959.	
g		,		- ,	
9	column (A), amount, list line 11g expenses on Sch O.)	1,274.		1,274.	
12	Advertising and promotion	1,274. 1,000.			1,000
13	Office expenses	14,706.	120.	8,582.	1,000 6,004
14	Information technology			-	-
15	Royalties				
16	Occupancy	4,260.	1,576.	1,321.	1,363
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	1,088.		1,088.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а					
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,256,306.	1,111,362.	96,778.	48,166
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form **990** (2021)

Form 990 (2021) Part X Balance Sheet

Гаі	tΧ	Balance Sneet				
		Check if Schedule O contains a response or n	ote to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		139,867.	1	197,256
	2	Savings and temporary cash investments	1,466,058.		1,148,660	
	3	Pledges and grants receivable, net	308,250.	3	10,000	
	4	Accounts receivable, net		110,896.	4	43,197
	5	Loans and other receivables from any current				
		trustee, key employee, creator or founder, sub	ostantial contributor, or 35%			
		controlled entity or family member of any of the		5		
	6	Loans and other receivables from other disqua	alified persons (as defined			
		under section 4958(f)(1)), and persons describ	ed in section 4958(c)(3)(B)		6	
ည	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
¥	9	Prepaid expenses and deferred charges		1,946.	9	1,602
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D				
	b	Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities		3,547,227.	11	3,925,964
	12	Investments - other securities. See Part IV, line			12	
	13	Investments - program-related. See Part IV, lin		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must ed		5,574,244.	16	5,326,679
	17	Accounts payable and accrued expenses		12,208.	17	32,320
	18	Grants payable	504,187.	18	261,514	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complet	***************************************		21	
es	22	Loans and other payables to any current or fo				
Liabilities		trustee, key employee, creator or founder, suk				
힐		controlled entity or family member of any of the			22	
	23	Secured mortgages and notes payable to unre			23	
	24	Unsecured notes and loans payable to unrela			24	
	25	Other liabilities (including federal income tax,				
		parties, and other liabilities not included on lin of Schedule D	es 17-24). Complete Part X		25	
	26	Total liabilities. Add lines 17 through 25		516,395.	26	293,834
	20	Organizations that follow FASB ASC 958, c	hock hore	310,333.	20	255,054
S		and complete lines 27, 28, 32, and 33.	HECK HEIE			
2	27			4,700,031.	27	4,986,845
39	28	Net assets with donor restrictions		357,818.	28	46,000
<u></u>		Organizations that do not follow FASB ASC		30.70200		
ᆵ		and complete lines 29 through 33.	occ, check here			
5	29	Capital stock or trust principal, or current fund	ds		29	
ets	30	Paid-in or capital surplus, or land, building, or			30	
Ass	31	Retained earnings, endowment, accumulated			31	
Net Assets or Fund Balances	32	Total net assets or fund balances		5,057,849.	32	5,032,845
Z	33	Total liabilities and net assets/fund balances		5,574,244.	33	5,326,679

Form **990** (2021)

Pa	T XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1				<u>97.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2				06.
3	Revenue less expenses. Subtract line 2 from line 1	3				09.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,			<u>49.</u>
5	Net unrealized gains (losses) on investments	5		13:	1,1	05.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	5,	03	2,8	45.
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		[
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	0.	_			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		Γ			
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate					
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin					
	Act and OMB Circular A-133?	-		За		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		lit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

SCHEDULE A

(Form 990)

Total

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

2021
Open to Public

Inspection

Employer identification number Name of the organization NATIONAL LAWYERS GUILD FOUNDATION 13-3336640 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I 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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 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 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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	71	1	,			
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and	, ,	, ,	, ,	, ,	, ,	,,
	membership fees received. (Do not						
	include any "unusual grants.")	1023861.	2398422.	640,413.	2781872.	907,131.	7751699.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	1000001	0000400	640 440	0001000	0.00	
	Total. Add lines 1 through 3	1023861.	2398422.	640,413.	2781872.	907,131.	7751699.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						221 006
_	column (f)						331,896. 7419803.
	Public support. Subtract line 5 from line 4.						7419003.
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	1023861.	2398422.	640,413.	2781872.	907,131.	7751699.
	Gross income from interest,			•		•	
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	47,560.	35,541.	65,232.	55,907.	47,425.	251,665.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						8003364.
	Gross receipts from related activities,					12	
13	First 5 years. If the Form 990 is for the	-	st, second, third, t	ourth, or fifth tax y	ear as a section 50	01(c)(3)	
	organization, check this box and stop						>
	ction C. Computation of Publi			- L (5)			92.71 %
	Public support percentage for 2021 (li					14	
	Public support percentage from 2020 33 1/3% support test - 2021. If the control is the support test - 2021.					oro, chock this box	
102	stop here. The organization qualifies						
ŀ	33 1/3% support test - 2020. If the o						
•	and stop here. The organization quali	-					
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts						
	meets the facts-and-circumstances te				vaani-ation		\sim
t	10% -facts-and-circumstances test	- 2020. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th	ne facts-and-circum	stances test, ched	k this box and st	op here. Explain in	n Part VI how the	
	organization meets the facts-and-circu	ımstances test. Th	e organization qua	lifies as a publicly	supported organiz	ation	▶∐
18	Private foundation. If the organizatio	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar	nd see instructions	· >

Schedule A (Form 990) 2021

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
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						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, 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						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	-		· · · · · · · · · · · · · · · · · · ·			
60.							>
	ction C. Computation of Publi			. (5)		1.5	
	Public support percentage for 2021 (li					15	<u>%</u>
	Public support percentage from 2020 ction D. Computation of Inves					16	%
				20 12 column (f)		17	3.0
	Investment income percentage for 20						<u>%</u>
	Investment income percentage from 2 33 1/3% support tests - 2021. If the			on line 14 and line		18 3 1/3% and line 1	7 is not
198							/ 19 IIUL
L	more than 33 1/3%, check this box ar						P
i.	33 1/3% support tests - 2020. If the line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
	i ilitate ibuliuutiolli li tile oigaliizatio	ii ala noi bilebil a	DON OH HITC 14, 136	a, or 100, 011601 ll1	חים איסע מווע אבב וווא		

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	•		
	2		
	2		
	3a		
	3b		
	_		
	3c		
	40		
	4a		
	4b		
	40		
	4c		
	10		
	5a		
	- Fh		
	5b 5c		
	- 50		
	6		
	7		
	8		
	9a		
	9b		
	90		
	9c		
	10a		
	10b	. 000	0001
ule	A (Forn	n 990)	2021

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Sche	dule A (Form 990) 2021 NATIONAL LAWYERS GUILD FOUNDATION, INC 13-33	3664	0 Pa	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
-	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No." explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a	_		
Ū	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	· · · · · · · · · · · · · · · · · · ·	3		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	L		
a	The organization satisfied the Activities Test. Complete line 2 below.	•		
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below</i> .			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in.	otruotion	201	
2	Activities Test. Answer lines 2a and 2b below.	Struction	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	140
а				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	20		
L	that these activities constituted substantially all of its activities.	2a		
a	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	OI.		
•	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			

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Schedule A (Form 990) 2021

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trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

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

	edule A (Form 990) 2021 NATIONAL LAWYERS GUILD			13-3336640 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust or	n Nov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	st complet	e Sections A through E.	
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			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by 0.035.	6		
_7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount	_		Current Year
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
_5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

Schedule A (Form 990) 2021

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

instructions).

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	izations (continued)	
Sect	tion D - Distributions	Current Year	
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported		
	organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.		
7	Total annual distributions. Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the organization is responsive		
	(provide details in Part VI). See instructions.		
9	Distributable amount for 2021 from Section C, line 6		
10	Line 8 amount divided by line 9 amount	10	
	(i)	(ii)	(iii)

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reason-			
able cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D,			
line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if			
any. Subtract lines 3g and 4a from line 2. For result greater			
than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI. See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j			
and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

Schedule A (Form 990) 2021

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.

2021
Open to Public Inspection

Name of the organization

NATIONAL LAWYERS GUILD FOUNDATION, INC

Employer identification number 13-3336640

Par	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		r Si	milar Funds o	or Ac	coun	ts. Complete if the
	organization anomorou neo orni om oco, natriv, iiii	(a) Donor adv	visec	I funds	(b) Fun	ds 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 v		hel	d in donor advise	d fund	ls	
	are the organization's property, subject to the organization's	-					Yes No
6	Did the organization inform all grantees, donors, and donor ad						
	for charitable purposes and not for the benefit of the donor or						
	impermissible private benefit?						
Par	t II Conservation Easements. Complete if the org	ganization answered "	'Yes	" on Form 990, P	art IV,	line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that appl	ly).				
	Preservation of land for public use (for example, recreat	tion or education)		Preservation of	a histo	rically	important land area
	Protection of natural habitat			Preservation of	a certi	fied his	storic structure
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation cont	tribu	tion in the form o	f a cor	serva	
	day of the tax year.						Held at the End of the Tax Year
а	Total number of conservation easements					2a	
b	Total acreage restricted by conservation easements					2b	
С	Number of conservation easements on a certified historic stru	ucture included in (a)				2c	
d	Number of conservation easements included in (c) acquired a				е		
	listed in the National Register					2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished,	or te	rminated by the	organiz	zation	during the tax
	year ▶						
4	Number of states where property subject to conservation eas		_				
5	Does the organization have a written policy regarding the peri		ecti	on, handling of			
	violations, and enforcement of the conservation easements it						Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, l	nandling of violations	, and	d enforcing conse	ervatio	n ease	ments during the year
-	Amount of auroration madin manifolian instables bounds						to alcoring the consen
7	Amount of expenses incurred in monitoring, inspecting, hand > \$	ling of violations, and	ente	ording conservation	on eas	semeni	is during the year
8	Does each conservation easement reported on line 2(d) above	a satisfy the requirem	onto	of section 170/h	\/ <i>4</i> \/D\/	/i)	
0		•					Yes No
9	and section 170(h)(4)(B)(ii)?						
3	balance sheet, and include, if applicable, the text of the footn						
	organization's accounting for conservation easements.	ote to the organization	/113	manolal Statemen	113 1116	it dese	indes tric
Par	t III Organizations Maintaining Collections of	Art, Historical T	rea	sures, or Oth	ner S	imila	r Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		•			
1a	If the organization elected, as permitted under FASB ASC 95		reve	nue statement an	ıd bala	ınce sh	neet works
	of art, historical treasures, or other similar assets held for pub	•					
	service, provide in Part XIII the text of the footnote to its finan	•					
b	If the organization elected, as permitted under FASB ASC 958					sheet	works of
	art, historical treasures, or other similar assets held for public	•					
	provide the following amounts relating to these items:					•	
	(i) Revenue included on Form 990, Part VIII, line 1						\$
							\$
2	If the organization received or held works of art, historical trea					orovide)
	the following amounts required to be reported under FASB A						
а	Revenue included on Form 990, Part VIII, line 1	-				•	\$
b	Assets included in Form 990, Part X						\$

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Schedule D (Form 990) 2021

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

Schedule D (Form 990) 2021

e Other

Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. column (B), line 10c.)

Complete if the organization answered "Yes" o a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-vear market value
Financial derivatives	(-,		
Closely held equity interests			
Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
II. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
art VIII Investments - Program Related.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
1)			
(2)			
(3)			
(4)			
5)			
6)			
(7)			
(8)			
(9)			
al. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
art IX Other Assets.			
Complete if the organization answered "Yes" o		11d. See Form 990, Part X, line 15.	(b) Deelessless
· · · · · · · · · · · · · · · · · · ·	escription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	451		
		_	
al. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		
art X Other Liabilities.		11e or 11f See Form 990 Part X line 25	
Other Liabilities. Complete if the organization answered "Yes" o		11e or 11f. See Form 990, Part X, line 25	
Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability		11e or 11f. See Form 990, Part X, line 25	
Complete if the organization answered "Yes" o (a) Description of liability (1) Federal income taxes		11e or 11f. See Form 990, Part X, line 25	
Complete if the organization answered "Yes" o (a) Description of liability 1) Federal income taxes 2)		11e or 11f. See Form 990, Part X, line 25	
Complete if the organization answered "Yes" o (a) Description of liability 1) Federal income taxes 2) 3)		11e or 11f. See Form 990, Part X, line 25	
Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability (1) Federal income taxes (2) (3)		11e or 11f. See Form 990, Part X, line 25	
Other Liabilities. Complete if the organization answered "Yes" o (a) Description of liability (1) Federal income taxes (2) (3) (4)		11e or 11f. See Form 990, Part X, line 25	
Complete if the organization answered "Yes" o (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)		11e or 11f. See Form 990, Part X, line 25	
Complete if the organization answered "Yes" o (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)		11e or 11f. See Form 990, Part X, line 25	(b) Book value
Complete if the organization answered "Yes" o (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)		11e or 11f. See Form 990, Part X, line 25	

Schedule D (Form 990) 2021

PART XI, LINE 2D - OTHER ADJUSTMENTS:

BROKERAGE FEES -25,959.

APPLICABLE TAXING JURISDICTIONS FOR PERIODS PRIOR TO DECEMBER 31, 2018.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021	NATIONAL	LAWYERS	GUILD	FOUNDATION,	INC	13-3336640 Pag	је 5
Schedule D (Form 990) 2021 Part XIII Supplemental Infor	mation (continue	d)					
BROKERAGE FEES						25,959	•
							—
							—
							—

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

Employer identification number

JΑΊ	TIONAL LAWYER:	S GUTLD I	TTAGNUTOS	ON . TNC		13-333664	10	
Pai	rt I General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organi	zation answered "	Yes" on	
	Form 990, Part IV	/, line 14b.						
1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance,							
	the grantees' eligibility for	or the grants or a	ssistance, and t	he selection criteria used to award the	grants or assis	tance? L	Yes X No	
2	For grantmakers. Desc	ribe in Part V the	organization's r	procedures for monitoring the use of its	grants and oth	ner assistance outs	side the	
_	United States.		- e. ga <u>-</u> ae.,		9.4			
3								
	(a) Region	(b) Number of	(c) Number of employees,	(d) Activities conducted in the region		vity listed in (d)	(f) Total expenditures	
		offices in the region	agents and	(by type) (such as, fundraising, program services, investments, grants to		gram service, specific type	for and	
		in the region	independent contractors	recipients located in the region)		(s) in the region	investments in the region	
			in the region				in the region	
							+	
							+	
							+	
3 2	Subtotal	0	0				0.	
	Total from continuation		•				, · · · · · · · · · · · · · · · · · · ·	
	sheets to Part I	0	0				0.	
С	Totals (add lines 3a							
	and 3b)	0	0				0.	

132071 12-20-21

Schedule F (Form 990) 2021

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

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			TO SUPPORT THE					
		ICELAND & GREENLAND) -	INTERNATIONAL COMMISSION OF INQUIRY					
			ON RACIST POLICE	20,000.	CHECK	0.		
			recognized as charities by the f					
exempt 501(c)(3) orga			or counsel has provided a sect	ion 501(c)(3) equ	livalency letter			

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.											
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)				
		I	ı	l							

Schedule F (Form 990) 2021 Part IV Foreign Forms

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

Schedule F (Form 990) 2021

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service	► Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.										
			Go to www.ir	s.gov/Form990 to	r the latest inform	nation.		Inspection			
Name of the organizat		LAWYERS G	UILD FOUNDA	TION, INC				Employer identification number 13-3336640			
Part I General Information on Grants and Assistance											
	zation maintain records										
	award the grants or assist IV the organization's pro							ZI Tes NO			
	d Other Assistance to					anization answered "V	/os" on Form 000 Par	t IV line 21 for any			
	hat received more than S					anization answered i	es offrontingso, rai	try, line 21, for any			
1 (a) Name and a	ddress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance			
								TO PROVIDE ASSISTANCE TO			
NATIONAL LAWYERS	GUILD OF LOS						THE LOS ANGELES CHAP				
ANGELES - 3916 SE	PULVEDA BLVD #105						OF THE NATIONAL LAW				
- CULVER CITY, CA	90230	84-4304440	501(C)(4)	15,510.	0.			GUILD, AN ASSOCIATION			
								TO PROVIDE ASSISTANCE TO			
NATIONAL LAWYERS	GUILD, INC						THE NATIONAL OFFICE,				
P.O. BOX 1266								WHOSE PRIMARY PURPOSE IS			
NEW YORK, NY 1000	19	13-5606408	501(C)(4)	405,763.	0.			DEDICATED TO THE NEED FOR			
								TO PROVIDE ASSISTANCE TO			
WATER PROTECTOR L	EGAL COLLECTIVE							THE WATER PROTECTOR LEGAL			
PO BOX 37065								COLLECTIVE, AN			
ALBUQUERQUE, NM 8	7176	81-4180619	501(C)(4)	516,086.	0.			ORGANIZATION DEDICATED TO			
								TO PROVIDE ASSISTANCE TO			
NATIONAL LAWYERS	GUILD - SAN							THE SAN FRANCISCO CHAPTER			
FRANCISCO BAY ARE	A CHAPTER - 558							OF THE NATIONAL LAWYERS			
CAPP ST - SAN FRA	NCISCO, CA 94110	94-1695299	501(C)(6)	29,100.	0.			GUILD, AN ASSOCIATION			
								TO PROVIDE ASSISTANCE TO			

14,100.

37,600.

0.

0.

	organizations listed in the line 1 table

20-0624814

Enter total number of other organizations listed in the line 1 table

NATIONAL LAWYERS GUILD - DETROIT

CHAPTER - PO BOX 311458 - DETROIT.

NATIONAL LAWYERS GUILD - MINNESOTA

CHAPTER - 3547 CEDAR AVE. S -

MINNEAPOLIS, MN 55407

0.

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

THE DETROIT CHAPTER OF

THE NATIONAL LAWYERS

THE NATIONAL LAWYERS

GUILD, AN ASSOCIATION

GUILD, AN ASSOCIATION TO PROVIDE ASSISTANCE TO

THE MINNESOTA CHAPTER OF

38-1914943 501(C)(6)

MI 48231

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
							TO PROVIDE ASSISTANCE TO			
NATIONAL LAWYERS GUILD MILITARY							THE MILITARY LAW TASK			
AW TASK FORCE - 730 N. FIRST							FORCE OF THE NATIONAL			
TREET - SAN JOSE, CA 95112	20-8381952		10,050.	0.			LAWYERS GUILD, AN			
ATIONAL LAWYERS GUILD-							TO PROVIDE ASSISTANCE TO			
NTERNATIONAL COMMITTEE - 3537							THE NATIONAL LAWYERS			
ENNY AVE., #121 - PASCAGOULA, MS							GUILD- INTERNATIONAL			
39567	92-0578899		8,000.	0.			COMMITTEE, WHO PLAYS AN			

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	e organization answe	ered "Yes" on Form 9	90, 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 req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.	
PART I, LINE 2:					
GRANTEES ARE REQUIRED TO SUBMIT A	REPORT EV	ERY SIX MC	NTHS DESCR	IBING THE	
MANNER IN WHICH THE FUNDS HAVE BEE	N SPENT A	ND THE PRO	GRESS MADE	IN	
ACCOMPLISHING THE PURPOSE OF THE G	RANT.				
PART II, LINE 1, COLUMN (H):					
NAME OF ORGANIZATION OR GOVERNMENT	: NATIONA	L LAWYERS	GUILD OF L	OS ANGELES	
(H) PURPOSE OF GRANT OR ASSISTANCE	: TO PROV	'IDE ASSIST	TANCE TO TH	E LOS	
ANGELES CHAPTER OF THE NATIONAL LA					
120100 10 06 01					Schodulo I (Form 000) 2021

TO THE NEED FOR BASIC CHANGES IN THE STRUCTURE OF OUR POLITICAL AND ECONOMIC SYSTEM.

NAME OF ORGANIZATION OR GOVERNMENT: NATIONAL LAWYERS GUILD, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE ASSISTANCE TO THE

NATIONAL OFFICE, WHOSE PRIMARY PURPOSE IS DEDICATED TO THE NEED FOR BASIC

CHANGE IN THE STRUCTURE OF OUR POLITICAL AND ECONOMIC SYSTEM.

NAME OF ORGANIZATION OR GOVERNMENT: WATER PROTECTOR LEGAL COLLECTIVE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE ASSISTANCE TO THE WATER

PROTECTOR LEGAL COLLECTIVE, AN ORGANIZATION DEDICATED TO PROVIDING LEGAL

SUPPORT AND KNOWLEDGE SHARING FOR INDIGENOUS CENTERED AND GUIDED

ENVIRONMENTAL AND CLIMATE JUSTICE MOVEMENTS.

NAME OF ORGANIZATION OR GOVERNMENT:

NATIONAL LAWYERS GUILD - SAN FRANCISCO BAY AREA CHAPTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE ASSISTANCE TO THE SAN

FRANCISCO CHAPTER OF THE NATIONAL LAWYERS GUILD, AN ASSOCIATION DEDICATED

TO THE NEED FOR BASIC CHANGES IN THE STRUCTURE OF OUR POLITICAL AND

ECONOMIC SYSTEM.

NAME OF ORGANIZATION OR GOVERNMENT:

NATIONAL LAWYERS GUILD - DETROIT CHAPTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE ASSISTANCE TO THE DETROIT

CHAPTER OF THE NATIONAL LAWYERS GUILD, AN ASSOCIATION DEDICATED TO THE

NEED FOR BASIC CHANGES IN THE STRUCTURE OF OUR POLITICAL AND ECONOMIC

SYSTEM.

Schedule I (Form 990)

Schedule I (Form 990)

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

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

NATIONAL LAWYERS GUILD FOUNDATION, INC Employer identification number 13-3336640

Pai	rt I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if applicable	Number of contributions or	Noncash contribution amounts reported on	Method of de noncash contribu		•	_
		applicable		Form 990, Part VIII, line 1g	Horicasii contribu	lion am	ounts	>
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	2	67,239.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ()	a del a consideración de						
29	Number of Forms 8283 received by the organiz		,				0	
	for which the organization completed Form 828	is, Part V, L	onee Acknowleag	ement 29		т,	Ť	Na.
200	During the year did the organization receive by	contributio	n any proporty ron	arted in Dart L lines 1 through	sh 00 that it		Yes	No
30a	During the year, did the organization receive by must hold for at least three years from the date							
	exempt purposes for the entire holding period?		•	·		30a		Х
h						30a		
31	If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance p	olicy that re	auires the review o	of any nonstandard contribu	tions?	31		Х
	Does the organization have a gift acceptance p					31	\dashv	
uza						32a		Х
b	contributions? If "Yes," describe in Part II.					UZ.a		
33	If the organization didn't report an amount in co	olumn (c) for	a type of property	for which column (a) is che	cked			
-	describe in Part II.	(0) 101	a type of property	is. Willott Solutilit (a) is offe	J. 100,			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2021

Part II	Supple reporti	mental I	I nfor i , colur	mation. Promn (b), the nur linformation.	vide the	informa contribut	tion require	d by Part umber of i	I, lines 30b tems receiv	, 32b, and yed, or a d	d 33, and w combination	hether the of both. A	organization organization organization
SCHEDUL	Е М,	PART	I,	COLUMN	(B):	1							
SCHEDUL	ЕМ,	PART	I,	COLUMN	(B)	REPF	RESENT	S THE	NUMBE	R OF	CONTR	IBUTI	ONS.

132142 11-17-21

SCHEDULE O (Form 990)

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 Form 990-EZ.

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

2021
Open to Public Inspection

Name of the organization

NATIONAL LAWYERS GUILD FOUNDATION, INC

Employer identification number 13-3336640

FORM 990, PART VI, SECTION A, LINE 7A:

ONE OF THE DIRECTORS SHALL BE THE CURRENT PRESIDENT OF THE NATIONAL LAWYERS

GUILD, A SECOND SHALL BE THE CURRENT TREASURER OF THE NATIONAL LAWYERS

GUILD, AND A THIRD THE CURRENT EXECUTIVE DIRECTOR OF THE NATIONAL LAWYERS

GUILD. THOSE DIRECTORS SHALL SERVE ONLY SO LONG AS THEIR TERM OF OFFICE

WITH THE NATIONAL LAWYERS GUILD. ALL OTHER DIRECTORS SHALL SERVE FOR A TERM

OF THREE YEARS, AND SHALL BE NOMINATED BY THE NATIONAL EXECUTIVE COMMITTEE

OF THE NATIONAL LAWYERS GUILD AND ELECTED BY THE BOARD.

FORM 990, PART VI, SECTION B, LINE 11B:

WHEN THE FORM 990 HAS BEEN PREPARED, REVIEWED BY MANAGEMENT, AND IS READY

TO BE FILED WITH THE INTERNAL REVENUE SERVICE, A COPY OF THE FORM 990 IS

PROVIDED TO ALL BOARD MEMBERS FOR REVIEW AND COMMENT PRIOR TO SUBMISSION.

ALL QUESTIONS AND COMMENTS ARE ADDRESSED UNTIL THE RETURN IS FINALIZED AND

APPROVED FOR FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST POLICY SHALL REQUIRE THAT PRIOR TO THE INITIAL SUCH DIRECTOR COMPLETE ELECTION OF ANY DIRECTOR, AND ANNUALLY THEREAFTER, SIGN AND SUBMIT TO THE SECRETARY OF NATIONAL LAWYERS GUILD FTN, INC WRITTEN STATEMENT IDENTIFYING, TO THE BEST OF THE DIRECTOR'S KNOWLEDGE, ENTITY OF WHICH SUCH DIRECTOR IS AN OFFICER, DIRECTOR, TRUSTEE MEMBER (EITHER AS A SOLE PROPRIETOR OR A PARTNER), OR EMPLOYEE AND WITH WHICH NATIONAL LAWYERS GUILD FTN, INC HAS A RELATIONSHIP, AND ANY TRANSACTION IN WHICH NATIONAL LAWYERS GUILD FTN, INC IS A PARTICIPANT AND IN WHICH THE DIRECTOR MIGHT HAVE A CONFLICTING INTEREST. THE SECRETARY OF LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2021

132211 11-11-21

Schedule O (Form 990) 2021 Page 2 Name of the organization **Employer identification number** 13-3336640 NATIONAL LAWYERS GUILD FOUNDATION, INC NATIONAL LAWYERS GUILD FTN, INC SHALL PROVIDE A COPY OF ALL COMPLETED STATEMENTS TO THE CHAIR OF THE AUDIT COMMITTEE OR, IF THERE IS NO AUDIT COMMITTEE, TO THE CHAIR OF THE BOARD. FORM 990, PART VI, SECTION B, LINE 15A: THE SALARY OF THE MANAGING DIRECTOR WAS REVIEWED AND APPROVED BY A COMMITTEE OF THE BOARD AFTER RESEARCHING THE SALARIES OF COMPARABLE POSITIONS IN OTHER ORGANIZATIONS. WRITTEN SUBSTANTIATION OF DELIBERATION AND THE DECISION RELATED TO THIS PROCESS IS MAINTAINED BY THE ORGANIZATION. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION AS REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE. THE RETURN IS POSTED ON GUIDESTAR.ORG AND SIMILAR TYPES OF WEBSITES. IN ADDITION, THE FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, FORM 990 AND BYLAWS ARE ALSO AVAILABLE UPON WRITTEN REQUEST AT THE ORGANIZATION'S ADDRESS.