

Form **990**

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

OMB No. 1545-0047

2017
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2017 calendar year, or tax year beginning and ending

B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization INTERNATIONAL JUSTICE MISSION		D Employer identification number 54-1722887
	Doing business as		E Telephone number (703) 465-5495
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	P.O. BOX 58147		G Gross receipts \$ 71,825,871.
City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20037-8147			
F Name and address of principal officer: JOHN D. PASSAUER SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527		H(b) Are all subordinates included? Yes No	
J Website: WWW.IJM.ORG		If "No," attach a list. (see instructions)	
K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶		H(c) Group exemption number ▶	
L Year of formation: 1994		M State of legal domicile: VA	

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE MISSION OF INTERNATIONAL JUSTICE MISSION IS TO PROTECT THE POOR FROM VIOLENCE BY RESCUING		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	14
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	315
	6 Total number of volunteers (estimate if necessary)	6	486
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	53,520,882.	71,237,272.
	9 Program service revenue (Part VIII, line 2g)	232,829.	238,079.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,771.	23,009.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-281,971.	57,298.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	53,478,511.	71,555,658.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	864,813.	801,296.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	32,873,932.	39,813,405.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 6,987,797.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	24,124,686.	23,471,416.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	57,863,431.	64,086,117.	
19 Revenue less expenses. Subtract line 18 from line 12	-4,384,920.	7,469,541.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 27,497,810.	End of Year 36,697,026.
	21 Total liabilities (Part X, line 26)	11,825,377.	13,555,052.
	22 Net assets or fund balances. Subtract line 21 from line 20	15,672,433.	23,141,974.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date		
	JOHN D. PASSAUER, CHIEF FINANCIAL OFFICER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name YONG ZHANG, CPA	Preparer's signature <i>Yong Zhang</i>	Date 08/01/2018	Check if self-employed <input type="checkbox"/>	PTIN P01249785
	Firm's name ▶ RSM US LLP	Firm's EIN ▶ 42-0714325		Phone no. 703-336-6400	
Firm's address ▶ 1861 INTERNATIONAL DRIVE, SUITE 400 MCLEAN, VA 22102					

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE MISSION OF INTERNATIONAL JUSTICE MISSION IS TO PROTECT THE POOR FROM VIOLENCE BY RESCUING VICTIMS, BRINGING THE CRIMINALS TO JUSTICE, RESTORING SURVIVORS TO SAFETY AND STRENGTH, AND HELPING LOCAL LAW ENFORCEMENT BUILD A SAFE FUTURE THAT LASTS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 35,394,919. including grants of \$ 671,171.) (Revenue \$ 238,079.) INTERNATIONAL JUSTICE MISSION'S FIELD OPERATIONS RESPOND TO A VAST AND DEVASTATING CATEGORY OF NEED: VIOLENCE AGAINST THE POOR.

IN THE DEVELOPING WORLD, VIOLENCE IS AN EVERYDAY THREAT FOR THE POOR. NEARLY 45 MILLION PEOPLE ARE ESTIMATED TO BE HELD AS MODERN-DAY SLAVES. THE INTERNATIONAL LABOUR ORGANIZATION ESTIMATES THAT HUMAN TRAFFICKING FOR SEXUAL OR LABOR SLAVERY GENERATES PROFITS IN EXCESS OF MORE THAN \$150 BILLION ANNUALLY FOR TRAFFICKERS AND SLAVE OWNERS, AND UNICEF ESTIMATES THAT NEARLY TWO MILLION CHILDREN ARE EXPLOITED IN THE SEX INDUSTRY. THE LAND RIGHTS OF WOMEN ARE VIOLATED ON A MASSIVE SCALE WORLDWIDE, LEAVING WIDOWS AND OTHER VULNERABLE WOMEN UNABLE TO CARE FOR THEMSELVES OR THEIR CHILDREN. IN MANY COUNTRIES, PERPETRATORS OF THIS

4b (Code:) (Expenses \$ 12,529,603. including grants of \$ 130,125.) (Revenue \$ 0.) BUILDING A MOVEMENT:

IJM SEEKS TO FUEL A GLOBAL JUSTICE MOVEMENT AND ADVANCE ITS MISSION BY DRAWING THE WORLD'S ATTENTION TO VIOLENCE AGAINST THE POOR, EXPANDING THE NUMBER OF PEOPLE AND INSTITUTIONS ENGAGED IN THE FIGHT FOR JUSTICE, INFLUENCING LEADERS IN ALL SECTORS TO BECOME CHAMPIONS FOR PROTECTING THE POOR AND EQUIPPING CHRISTIANS TO JOYFULLY SERVE IN THE WORK OF JUSTICE.

IJM'S CHURCH MOBILIZATION EFFORTS ENGAGE CHURCH COMMUNITIES AROUND THE WORLD IN THE FIGHT FOR JUSTICE. IN 2017, MORE THAN 3,200 CHURCHES WERE ENGAGED IN IJM'S FREEDOM SUNDAY PROGRAM, WHICH EQUIPS CHURCHES TO

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 47,924,522.

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	X	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?	X	
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	X	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part 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

X

Table with columns for question numbers (1a-14b), Yes/No checkboxes, and numerical input fields. Contains questions about Form 1096, Form W-2G, Form W-3, Form 990-T, Form 8886-T, Form 8282, Form 8899, Form 1098-C, Form 4947(a)(1), and Form 720.

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

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

Section 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 1a 14 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
b	Enter the number of voting members included in 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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		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?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
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 in Schedule O		X

Section 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?		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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in 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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in 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?		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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **SEE SCHEDULE O**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **JIM BARBEE - (703) 465-5495**
P.O. BOX 58147, WASHINGTON, DC 20037-8147

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) NICOLE MARICE BIBBINS SEDACA BOARD CHAIR	1.00	X		X				0.	0.	0.
(2) ERIC ASCHE DIRECTOR	1.00	X						0.	0.	0.
(3) MARC ALLEN DIRECTOR	1.00	X						0.	0.	0.
(4) PAUL LEE DIRECTOR	1.00	X						0.	0.	0.
(5) TERRY MOCHAR DIRECTOR	1.00	X						0.	0.	0.
(6) NANCY ORTBERG DIRECTOR	1.00	X						0.	0.	0.
(7) RAJ PARKER DIRECTOR	1.00	X						0.	0.	0.
(8) PATTY SISON-ARROYO DIRECTOR	1.00	X						0.	0.	0.
(9) JAY WELKER DIRECTOR	1.00	X						0.	0.	0.
(10) ALFONSO WIELAND DIRECTOR	1.00	X						0.	0.	0.
(11) MARTIN WITTEVEEN DIRECTOR	1.00	X						0.	0.	0.
(12) NICHOLAS SENSLEY DIRECTOR	1.00	X						0.	0.	0.
(13) REBECCA CHAN DIRECTOR	1.00	X						0.	0.	0.
(14) GARY HAUGEN CEO	40.00	X		X				292,267.	0.	34,398.
(15) SEAN LITTON PRESIDENT	40.00			X				220,708.	0.	19,913.
(16) JOHN PASSAUER CFO	40.00			X				203,670.	0.	25,060.
(17) ERIC HA CRO	40.00			X				161,634.	0.	36,392.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) KIM KERLEY CPO	40.00			X				175,399.	0.	30,409.
(19) JEANNIE ROSE BARKSDALE SR. DIR. OF LEGAL AFFAIRS	40.00			X				96,334.	0.	25,218.
(20) BLAIR BURNS SVP, JUSTICE OPS	40.00				X			164,954.	0.	28,932.
(21) MELISSA RUSSELL SVP, GLOBAL ADVANCEMENT	40.00				X			193,578.	0.	30,648.
(22) PHILIP LANGFORD VP, REG OPS SE ASIA	40.00				X			156,874.	0.	28,440.
(23) JESSE RUDY VP, GLOBAL STRATEGY & ADVANCEMENT	40.00				X			161,000.	0.	26,437.
(24) SHAWN KOHL NATL DIRECTOR, UGANDA	40.00					X		271,837.	0.	22,161.
(25) ANDREY SAWCHENKO FIELD OFFICE DIR, BANGKOK	40.00					X		188,029.	0.	22,200.
(26) JOHN TANAGHO FIELD OFFICE DIR, CEBU	40.00					X		184,263.	0.	20,123.
1b Sub-total								2,470,547.	0.	350,331.
c Total from continuation sheets to Part VII, Section A								358,427.	0.	38,895.
d Total (add lines 1b and 1c)								2,828,974.	0.	389,226.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **66**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
COLLABORATIVE SOLUTIONS, LLC, 11190 SUNRISE VALLEY DRIVE, RESTON, VA 20191	IT/ERP CONSULTING	1,275,341.
WORKDAY, INC. P O BOX 396106, SAN FRANCISCO, CA 94139	ERP CLOUD SUBSCRIPTION	668,902.
ASSOCIATES INTERNATIONAL, INC. 100 ROGERS RD, WILMINGTON, DE 19801	PRINTING & PUBLICATIONS	507,537.
SLALOM, LLC P O BOX 101416, PASADENA, CA 91189	IT CONSULTING	371,904.
CDW P O BOX 75723, CHICAGO, IL 60675	IT EQUIPMENT & CONSULTING	307,925.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **27**

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a 10,180.				
	b Membership dues	1b				
	c Fundraising events	1c 571,046.				
	d Related organizations	1d				
	e Government grants (contributions)	1e 2,700,000.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 67,956,046.				
	g Noncash contributions included in lines 1a-1f: \$	2,391,750.				
	h Total. Add lines 1a-1f	▶ 71,237,272.				
	Program Service Revenue	2 a CONFERENCE	Business Code 900099	165,951.	165,951.	
b HONORARIUM		900099	52,360.	52,360.		
c ROYALTIES		900099	19,768.	19,768.		
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f		▶	238,079.			
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)	▶	29,642.		29,642.
	4 Income from investment of tax-exempt bond proceeds	▶				
	5 Royalties	▶				
	6 a Gross rents	(i) Real	102,399.			
		(ii) Personal				
		b Less: rental expenses	129,645.			
		c Rental income or (loss)	-27,246.			
	d Net rental income or (loss)	▶	-27,246.		-27,246.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities		21,895.		
		(ii) Other				
		b Less: cost or other basis and sales expenses		28,528.		
		c Gain or (loss)		-6,633.		
	d Net gain or (loss)	▶	-6,633.		-6,633.	
	8 a Gross income from fundraising events (not including \$ 571,046. of contributions reported on line 1c). See Part IV, line 18	a	83,610.			
		b Less: direct expenses	b	112,040.		
c Net income or (loss) from fundraising events		▶	-28,430.		-28,430.	
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities	▶				
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory	▶				
Miscellaneous Revenue		Business Code				
11 a OTHER INCOME	900099	112,974.		112,974.		
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d	▶	112,974.			
12 Total revenue. See instructions.	▶	71,555,658.	238,079.	0.	80,307.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	801,296.	801,296.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,112,264.	1,565,138.	306,543.	240,583.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	26,366,827.	19,537,204.	3,826,494.	3,003,129.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,121,387.	830,921.	162,742.	127,724.
9 Other employee benefits	8,395,930.	6,221,188.	1,218,462.	956,280.
10 Payroll taxes	1,816,997.	1,346,353.	263,692.	206,952.
11 Fees for services (non-employees):				
a Management				
b Legal	364,388.	303,509.	29,812.	31,067.
c Accounting	252,289.	54,420.	193,080.	4,789.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	4,605,464.	3,281,586.	983,138.	340,740.
12 Advertising and promotion	1,722,330.	1,338,903.	56,502.	326,925.
13 Office expenses	2,110,893.	1,834,895.	116,850.	159,148.
14 Information technology	2,458,033.	2,115,445.	241,589.	100,999.
15 Royalties				
16 Occupancy	4,773,923.	3,254,630.	918,273.	601,020.
17 Travel	3,295,052.	2,778,723.	52,863.	463,466.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,705,416.	1,325,755.	55,947.	323,714.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	753,872.	494,806.	250,966.	8,100.
23 Insurance	316,842.	183,627.	101,082.	32,133.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CLIENT EXPENSES	509,413.	434,113.	72,257.	3,043.
b DUES, SUBS & FEES	280,295.	162,446.	89,422.	28,427.
c INTERNSHIP EXPENSE	57,655.	44,820.	1,891.	10,944.
d GOOD SAMARITAN EXPENSES	17,806.	15,174.	2,526.	106.
e All other expenses	247,745.	-430.	229,667.	18,508.
25 Total functional expenses. Add lines 1 through 24e	64,086,117.	47,924,522.	9,173,798.	6,987,797.
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 <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	112,041.	17,481.	3,589.	90,971.

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	3,376,003.	1	879,186.
	2 Savings and temporary cash investments	17,680,078.	2	25,834,811.
	3 Pledges and grants receivable, net	1,422,940.	3	3,403,466.
	4 Accounts receivable, net	234,723.	4	1,864,950.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,424,243.	9	1,053,213.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 8,102,613.		
	b Less: accumulated depreciation	10b 4,838,109.		
		3,045,862.	10c	3,264,504.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	313,961.	15	396,896.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	27,497,810.	16	36,697,026.	
Liabilities	17 Accounts payable and accrued expenses	2,982,081.	17	5,039,350.
	18 Grants payable		18	
	19 Deferred revenue	2,362,596.	19	2,433,971.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	194,155.	21	244,155.
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	6,286,545.	25	5,837,576.
	26 Total liabilities. Add lines 17 through 25	11,825,377.	26	13,555,052.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	14,286,165.	27	13,242,811.
	28 Temporarily restricted net assets	1,386,268.	28	9,899,163.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	15,672,433.	33	23,141,974.	
34 Total liabilities and net assets/fund balances	27,497,810.	34	36,697,026.	

Part 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	71,555,658.
2	Total expenses (must equal Part IX, column (A), line 25)	2	64,086,117.
3	Revenue less expenses. Subtract line 2 from line 1	3	7,469,541.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	15,672,433.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	23,141,974.

Part 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	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? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____	X	

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	45,087,166.	43,992,630.	48,748,015.	53,520,882.	71,237,272.	262,585,965.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	45,087,166.	43,992,630.	48,748,015.	53,520,882.	71,237,272.	262,585,965.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						7,099,618.
6 Public support. Subtract line 5 from line 4.						255,486,347.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	45,087,166.	43,992,630.	48,748,015.	53,520,882.	71,237,272.	262,585,965.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	547,107.	486,208.	315,620.	262,713.	132,041.	1,743,689.
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.)	532,052.	331,879.	301,805.	294,622.	196,584.	1,656,942.
11 Total support. Add lines 7 through 10						265,986,596.
12 Gross receipts from related activities, etc. (see instructions)					12	1,222,153.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	96.05 %
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	95.44 %
16a 33 1/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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 performed, 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 business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
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.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>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.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i>		

Section 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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section 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).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	

Section 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	
e	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 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section 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	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, 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 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

REIMBURSED EXPENSES

2013 AMOUNT: \$ 88,421.

2014 AMOUNT: \$ 90,322.

2015 AMOUNT: \$ 157,166.

2016 AMOUNT: \$ 122,698.

2017 AMOUNT: \$ 0.

OTHER INCOME

2013 AMOUNT: \$ 162,881.

2014 AMOUNT: \$ 50,932.

2015 AMOUNT: \$ 18,069.

2016 AMOUNT: \$ 62,439.

2017 AMOUNT: \$ 112,974.

FUNDRAISING INCOME

2013 AMOUNT: \$ 280,750.

2014 AMOUNT: \$ 190,625.

2015 AMOUNT: \$ 126,570.

2016 AMOUNT: \$ 109,485.

2017 AMOUNT: \$ 83,610.

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2017

Name of the organization

INTERNATIONAL JUSTICE MISSION

Employer identification number

54-1722887

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[X] 501(c)(3) (enter number) organization

[] 4947(a)(1) nonexempt charitable trust not treated as a private foundation

[] 527 political organization

Form 990-PF

[] 501(c)(3) exempt private foundation

[] 4947(a)(1) nonexempt charitable trust treated as a private foundation

[] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ... \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization INTERNATIONAL JUSTICE MISSION	Employer identification number 54-1722887
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>4,075,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>3,251,100.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ <u>2,700,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ <u>2,112,220.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ <u>3,809,031.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ <u>2,486,549.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization INTERNATIONAL JUSTICE MISSION	Employer identification number 54-1722887
---	--

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization INTERNATIONAL JUSTICE MISSION	Employer identification number 54-1722887
---	--

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <p style="text-align: center;">INTERNATIONAL JUSTICE MISSION</p>	Employer identification number <p style="text-align: center;">54-1722887</p>
--	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?														

Yes No

4-Year Averaging Period Under section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?	X		177.
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		22,710.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		4,959.
i Other activities?		X	
j Total. Add lines 1c through 1i			27,846.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

IN 2017, IJM STAFF MOBILIZED VOLUNTEERS TO LOBBY IN SUPPORT

APPROPRIATIONS TO COMBAT INTERNATIONAL TRAFFICKING IN PERSONS. THESE

VOLUNTEER ACTIVITIES INCLUDED CONTACTING MEMBERS OF CONGRESS IN PERSON

IN WASHINGTON, DC AND AT HOME IN THE DISTRICT, VIA EMAIL, SOCIAL MEDIA,

AND PHONE. IJM REACHED VOLUNTEERS THROUGH IN-PERSON TRAININGS, PHONE,

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2017
Open to Public Inspection

Name of the organization INTERNATIONAL JUSTICE MISSION	Employer identification number 54-1722887
--	---

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|----------|
| c Beginning balance | 194,155. |
| d Additions during the year | 50,000. |
| e Distributions during the year | |
| f Ending balance | 244,155. |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ _____ %
 - b** Permanent endowment ▶ _____ %
 - c** Temporarily restricted endowment ▶ _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) unrelated organizations | | |
| (ii) related organizations | | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,891,570.	796,210.	1,095,360.
d Equipment		4,221,375.	2,916,760.	1,304,615.
e Other		1,989,668.	1,125,139.	864,529.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				3,264,504.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	5,837,576.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	5,837,576.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	74,008,718.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	2,211,375.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	241,685.
e	Add lines 2a through 2d	2e	2,453,060.
3	Subtract line 2e from line 1	3	71,555,658.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	71,555,658.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	66,539,177.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	2,211,375.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	241,685.
e	Add lines 2a through 2d	2e	2,453,060.
3	Subtract line 2e from line 1	3	64,086,117.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	64,086,117.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART IV, LINE 2B:

THE ORGANIZATION SERVED AS INTERMEDIARY FOR INSURANCE PROCEEDS FOR VICTIMS

OF VICTIMS KILLED IN NAIROBI.

PART X, LINE 2:

THE ORGANIZATION IS GENERALLY EXEMPT FROM FEDERAL INCOME TAXES UNDER THE

PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE).

IN ADDITION, THE ORGANIZATION QUALIFIES FOR CHARITABLE CONTRIBUTION

DEDUCTIONS AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A

PRIVATE FOUNDATION. INCOME, WHICH IS NOT RELATED TO EXEMPT PURPOSES, LESS

APPLICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE INCOME

TAXES. THE ORGANIZATION DID NOT HAVE ANY NET UNRELATED BUSINESS INCOME FOR

Part XIII Supplemental Information (continued)

THE YEAR ENDED DECEMBER 31, 2017.

THE ORGANIZATION COMPLIES WITH THE ACCOUNTING FOR UNCERTAINTY IN INCOME

TAXES TOPIC, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS

CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN

THE FINANCIAL STATEMENTS. UNDER THIS POLICY, THE ORGANIZATION MAY

RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS

MORE-LIKELY-THAN-NOT THAT THE TAX POSITION WOULD BE SUSTAINED ON

EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE

POSITION. MANAGEMENT HAS EVALUATED THE ORGANIZATION'S TAX POSITIONS AND

HAS CONCLUDED THAT THE ORGANIZATION HAS TAKEN NO UNCERTAIN TAX POSITIONS

THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH

PROVISIONS OF THIS GUIDELINE. THE ORGANIZATION WOULD BE LIABLE FOR INCOME

TAXES IN THE U.S. FEDERAL JURISDICTION. GENERALLY, THE ORGANIZATION IS NO

LONGER SUBJECT TO U.S. FEDERAL TAX EXAMINATIONS BY TAX AUTHORITIES BEFORE

2014.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES ON PART VIII LINE 8B	112,040.
---	----------

RENTAL EXPENSES ON PART VIII LINE 6B	129,645.
--------------------------------------	----------

TOTAL TO SCHEDULE D, PART XI, LINE 2D	241,685.
---------------------------------------	----------

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES ON PART VIII LINE 8B	112,040.
---	----------

RENTAL EXPENSES ON PART VIII LINE 6B	129,645.
--------------------------------------	----------

TOTAL TO SCHEDULE D, PART XII, LINE 2D	241,685.
--	----------

**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

2017

Open to Public Inspection

Name of the organization INTERNATIONAL JUSTICE MISSION	Employer identification number 54-1722887
---	--

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	3	76	PROGRAM SERVICES	SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY	8,353,607.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANT MAKING		34,143.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	FUNDRAISING		667,802.
EAST ASIA AND THE PACIFIC	5	162	PROGRAM SERVICES	LEGAL STATUS DOCUMENTATION; SEXUAL VIOLENCE/TRAFFICKING: INVESTIGATION, VICTIM	13,315,502.
EAST ASIA AND THE PACIFIC	0	0	GRANT MAKING		81,767.
EAST ASIA AND THE PACIFIC	0	0	FUNDRAISING		1,570,522.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	EDUCATION	46,646.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANT MAKING		88,755.
3 a Sub-total	8	238			24,158,744.
b Total from continuation sheets to Part I	10	389			31,049,090.
c Totals (add lines 3a and 3b)	18	627			55,207,834.

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

Schedule F (Form 990) 2017

SEE PART V FOR COLUMN (E) DESCRIPTIONS

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0	0	GRANTMAKING		600.
SOUTH AMERICA	1	23	PROGRAM SERVICES	SEXUAL VIOLENCE/TRAFFICKING: INVESTIGATION, VICTIM SERVICES (LEGAL,	2,421,872.
SOUTH AMERICA	0	0	GRANT MAKING		22,188.
SOUTH AMERICA	0	0	FUNDRAISING		164,526.
SOUTH ASIA	5	242	PROGRAM SERVICES	SEXUAL VIOLENCE/ TRAFFICKING/ FORCED LABOR: INVESTIGATION, VICTIM SERVICES (LEGAL,	13,494,151.
SOUTH ASIA	0	0	GRANT MAKING		478,898.
SOUTH ASIA	0	0	FUNDRAISING		1,669,358.
SUB-SAHARAN AFRICA	4	124	PROGRAM SERVICES	LAND RIGHTS/POLICE BRUTALITY/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL,	11,309,223.
SUB-SAHARAN AFRICA	0	0	GRANT MAKING		94,945.
SUB-SAHARAN AFRICA	0	0	FUNDRAISING		1,393,329.
Totals	10	389			31,049,090.

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)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	INC. ACCESS OF VICTIMS OF SEXUAL & FAMILY VIOLENCE TO CRIMINAL JUSTICE	1,000.	CHECK	0.		
		EAST ASIA AND THE PACIFIC	TO SUPPORT THE MOBILIZATION EFFORTS OF A JUSTICE-MINDED LOCAL ORGANIZATION	100.	CHECK	0.		
		EAST ASIA AND THE PACIFIC	PROVIDE SUPPLIES AND EQUIPMENT TO LOCAL OFFICIALS COMBATTING TRAFFICKING	0.		2,760.	COMPUTERS TO SUPPORT CASEWORK AND INVESTIGATIONS	COST
		EAST ASIA AND THE PACIFIC	TO SUPPORT THE MOBILIZATION EFFORTS OF A JUSTICE-MINDED NGO.	37,500.	WIRE TRANSFER	0.		
		EUROPE	TO SUPPORT THE MOBILIZATION EFFORTS OF A JUSTICE-MINDED NGO.	85,710.	WIRE TRANSFER	0.		
		EUROPE	TO SUPPORT THE MOBILIZATION EFFORTS OF A JUSTICE-MINDED NGO.	3,045.	WIRE TRANSFER	0.		
		SOUTH ASIA	SECURE JUSTICE FOR THOSE TRAPPED BY VIOLENT FORCES OF OPPRESSION.	150,536.	WIRE TRANSFER	0.		
		SOUTH ASIA	SECURE JUSTICE FOR THOSE TRAPPED BY VIOLENT FORCES OF OPPRESSION.	101,159.	WIRE TRANSFER	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 12

3 Enter total number of other organizations or entities 21

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	SECURE JUSTICE FOR THOSE TRAPPED BY VIOLENT FORCES OF OPPRESSION.	65,034.	WIRE TRANSFER	0.		
		SOUTH ASIA	SECURE JUSTICE FOR THOSE TRAPPED BY VIOLENT FORCES OF OPPRESSION.	55,669.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	INC. ACCESS OF VICTIMS OF SEXUAL & FAMILY VIOLENCE TO CRIMINAL JUSTICE	0.		570.	SUPPLIES TO SUPPORT ANTI-TRAFFICKING PUBLIC AWARENESS	COST
		SUB-SAHARAN AFRICA	PROVIDE SUPPLIES AND EQUIPMENT TO LAW ENFORCEMENT OFFICIALS COMBATTING TRAFFIC	0.		1,675.	COMPUTERS TO SUPPORT CASEWORK AND INVESTIGATIONS	COST
		SUB-SAHARAN AFRICA	INC. ACCESS OF VICTIMS OF SEXUAL & FAMILY VIOLENCE TO CRIMINAL JUSTICE	289.	CHECK	0.		
		SUB-SAHARAN AFRICA	TO SUPPORT PUBLIC AWARENESS EFFORTS AGAINST GENDER-BASED VIOLENCE	0.		563.	SUPPLIES TO SUPPORT CASEWORK AND INVESTIGATIONS	COST
		SUB-SAHARAN AFRICA	SUPPPORT TRAINING AND AWARENESS TO IMPROVE PUBLIC JUSTICE SYSTEMS	0.		2,646.	TRANSPORTATION COSTS TO LAW ENFORCEMENT/LEGAL POLICY CONFERENCE	COST
		SUB-SAHARAN AFRICA	INCREASE ACCESS OF VICTIMS OF SEXUAL AND FAMILY VIOLENCE TO THE CRIMINAL JUST	57.	CHECK	0.		
		SUB-SAHARAN AFRICA	SUPPORT LOCAL EFFORTS AGAINST GENDER-BASED VIOLENCE	83.	CASH	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	TO SUPPORT PUBLIC AWARENESS EFFORTS AGAINST GENDER-BASED VIOLENCE	563.	CHECK	0.		
		SUB-SAHARAN AFRICA	INC. ACCESS OF VICTIMS OF SEXUAL & FAMILY VIOLENCE TO CRIMINAL JUSTICE	1,395.	CHECK	0.		
		SUB-SAHARAN AFRICA	PROVIDE SUPPLIES TO NATIONAL ORGANIZATION WORKING ON IMPROVING PUBLIC JUSTICE	0.		414.	COMPUTER AND SUPPLIES TO SUPPORT CASEWORK AND	COST
		SUB-SAHARAN AFRICA	SUPPPORT TRAINING AND AWARENESS TO IMPROVE PUBLIC JUSTICE SYSTEMS	0.		878.	SUPPLIES FOR PLANNING MEETING	COST
		SUB-SAHARAN AFRICA	PROVIDE SUPPLIES TO NAT./LOCAL ORGS WORKING ON IMPROVING PUBLIC JUSTICE SYST.	0.		257.	OFFICE FURNITURE FOR LEGAL AID CLINIC	COST

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)
AFTERCARE ASSIST. FOR VICTIMS; CHARITABLE RESPONSE TO EMERGENCY NEED OF STAFF	CENTRAL AMERICA AND THE CARIBBEAN	89	4,930.	CASH PAYMENT TO RECIPIENT	29,213.	PARTICIPATION IN AFTERCARE PROGRAMS	COST
AFTERCARE ASSIST. FOR VICTIMS; CHARITABLE RESPONSE TO EMERGENCY NEED OF STAFF	EAST ASIA AND THE PACIFIC	286	5,300.	CASH PAYMENT TO RECIPIENT	35,107.	PARTICIPATION IN AFTERCARE PROGRAMS	COST
CHARITABLE RESPONSE TO EMERGENCY NEED OF STAFF	NORTH AMERICA - CANADA AND MEXICO	1	600.	CASH PAYMENT TO RECIPIENT	0.	PARTICIPATION IN AFTERCARE PROGRAMS	COST
AFTERCARE COSTS FOR VICTIMS OF VIOLENCE	SOUTH AMERICA	106	0.	CASH PAYMENT TO RECIPIENT	22,188.	PARTICIPATION IN AFTERCARE PROGRAMS	COST
AFTERCARE COSTS FOR VICTIMS OF VIOLENCE	SOUTH ASIA	1,323	0.	CASH PAYMENT TO RECIPIENT	106,500.	PARTICIPATION IN AFTERCARE PROGRAMS	COST
AFTERCARE ASSIST. FOR VICTIMS; CHARITABLE RESPONSE TO EMERGENCY NEED OF STAFF	SUB-SAHARAN AFRICA	1,210	6,975.	CASH PAYMENT TO RECIPIENT	78,579.	PARTICIPATION IN AFTERCARE PROGRAMS	COST

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 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 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 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 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 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 No

Schedule F (Form 990) 2017

Part V Supplemental Information

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

PART I, LINE 2:

FOR CASH GRANTS THAT ARE GIVEN BY THE ORGANIZATION, IJM REQUIRES, AT A
MINIMUM, QUARTERLY BUDGET TO ACTUAL REPORTS FOR THE PROJECT THAT HAS BEEN
FUNDED BY THE GRANT. FOR SOME PROJECT GRANTS, THE REPORTING REQUIREMENT
IS MONTHLY. FURTHER, IJM REQUIRES A COPY OF THE AUDITED FINANCIAL
STATEMENTS OF THE GRANTEE ORGANIZATION, WHEN AVAILABLE. IJM ALSO RESERVES
THE RIGHT TO EXAMINE PERTINENT BOOKS, DOCUMENTS AND RECORDS RELATED TO
THE FUNDS PROVIDED.

PART I, LINE 3:

THE ORGANIZATION USES GAAP TO REPORT EXPENDITURES IN A FOREIGN REGION.

PART I, LINE 3, COLUMN (E):

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(E) SPECIFIC TYPES OF SERVICES IN REGION: SEXUAL VIOLENCE:

INVESTIGATION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING,
EDUCATION.

REGION: EAST ASIA AND THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: LEGAL STATUS DOCUMENTATION;

SEXUAL VIOLENCE/TRAFFICKING: INVESTIGATION, VICTIM SERVICES (LEGAL,
PSYCHOSOCIAL), CAPACITY BUILDING, EDUCATION.

REGION: SOUTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: SEXUAL VIOLENCE/TRAFFICKING:

INVESTIGATION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL), CAPACITY BUILDING,
EDUCATION.

Part V Supplemental Information

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

REGION: SOUTH ASIA

(E) SPECIFIC TYPES OF SERVICES IN REGION: SEXUAL VIOLENCE/ TRAFFICKING/

FORCED LABOR: INVESTIGATION, VICTIM SERVICES (LEGAL, PSYCHOSOCIAL)

CAPACITY BUILDING, EDUCATION.

REGION: SUB-SAHARAN AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: LAND RIGHTS/POLICE

BRUTALITY/SEXUAL VIOLENCE: INVESTIGATION, VICTIM SERVICES (LEGAL,

PSYCHOSOCIAL), CAPACITY BUILDING, EDUCATION.

PART II, COLUMN (D):

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: INC. ACCESS OF VICTIMS OF SEXUAL & FAMILY VIOLENCE

TO CRIMINAL JUSTICE SYST.

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: INC. ACCESS OF VICTIMS OF SEXUAL & FAMILY VIOLENCE

TO CRIMINAL JUSTICE SYST.

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: INC. ACCESS OF VICTIMS OF SEXUAL & FAMILY VIOLENCE

TO CRIMINAL JUSTICE SYST.

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: INC. ACCESS OF VICTIMS OF SEXUAL & FAMILY VIOLENCE

TO CRIMINAL JUSTICE SYST.

Part V Supplemental Information

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

REGION: SUB-SAHARAN AFRICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: COMPUTER AND SUPPLIES TO SUPPORT

CASEWORK AND INVESTIGATIONS

FORM 990, SCHEDULE F, SUPPLEMENTAL INFORMATION:

INTERNATIONAL JUSTICE MISSION EXISTS TO PROTECT PEOPLE FROM VIOLENT

FORCES OF INJUSTICE AND TO ENSURE THAT PUBLIC JUSTICE SYSTEMS

EFFECTIVELY AND SUSTAINABLY PROTECT THE POOR. IN PURSUIT OF THIS

MISSION, IJM CONDUCTS CASEWORK ON BEHALF OF IMPOVERISHED VICTIMS OF

VIOLENT ABUSE IN AFRICA, LATIN AMERICA, SOUTH ASIA AND SOUTHEAST ASIA.

THIS CASEWORK BOTH ENSURES RELIEF FOR INDIVIDUAL VICTIMS OF ABUSE AND

INFORMS IJM'S STRATEGIES FOR PURSUING TRANSFORMATIONAL CHANGE OF PUBLIC

JUSTICE SYSTEMS.

EACH IJM FIELD OFFICE ADDRESSES SPECIFIC FORMS OF OPPRESSION THAT

IMPACT THE POOR IN THE GEOGRAPHIC REGION. IJM'S INVESTIGATIVE AND LEGAL

TEAMS PARTNER WITH LOCAL AUTHORITIES TO ENSURE PERPETRATORS ARE

ARRESTED, CHARGED AND CONVICTED FOR THESE VIOLENT ACTS; IJM SOCIAL

WORKERS PROVIDE LONG-TERM SUPPORT TO VICTIMS OF THE CRIME.

IN AFRICA, IJM FIELD OFFICES DEFEND VULNERABLE WIDOWS AND ORPHANS FROM

PROPERTY GRABBING (UGANDA), PROTECT CHILDREN FROM SEXUAL VIOLENCE AND

DEFEND INNOCENT MEN AND WOMEN VICTIMIZED BY POLICE (KENYA) AND RESCUE

CHILDREN FROM FORCED LABOR SLAVERY (GHANA).

IN LATIN AMERICA, IJM COMBATS SEXUAL VIOLENCE AGAINST CHILDREN (BOLIVIA

Part V Supplemental Information

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

AND GUATEMALA) AND RESCUES VICTIMS OF SEX TRAFFICKING (DOMINICAN
REPUBLIC).

IN SOUTH ASIA, IJM COMBATS TWO FORMS OF MODERN-DAY SLAVERY: SEX
TRAFFICKING AND FORCED LABOR.

IN SOUTHEAST ASIA, IJM'S CASEWORK FOCUS IS SEX TRAFFICKING AND OTHER
FORMS OF SEXUAL VIOLENCE (CAMBODIA AND THE PHILIPPINES). IJM TEAMS
BRING RESCUE TO VICTIMS OF THESE CRIMES, PARTNER WITH EXCELLENT
AFTERCARE PROVIDERS TO ENSURE SURVIVORS ARE SUPPORTED AS THEY HEAL AND
HAVE ACHIEVED SIGNIFICANT SUCCESS IN SECURING CONVICTIONS FOR
PERPETRATORS OF THESE CRIMES. ONE FIELD OFFICE IN SOUTHEAST ASIA
(THAILAND) CONDUCTS CASEWORK TO ENSURE THAT MEMBERS OF HILL TRIBE
ETHNIC MINORITY GROUPS CAN ACCESS THE CITIZENSHIP AND ATTENDANT
BENEFITS TO WHICH THEY ARE ENTITLED. THE GOAL OF THIS CITIZENSHIP
CASEWORK IS TO DECREASE VULNERABILITY TO SEX TRAFFICKING AND OTHER
FORMS OF VIOLENT OPPRESSION.

IJM USES ITS UNIQUE KNOWLEDGE OF SYSTEMIC GAPS, WEAKNESSES AND
DEFICIENCIES GAINED THROUGH INDIVIDUAL CASEWORK TO PURSUE JUSTICE
SYSTEM TRANSFORMATION THAT ENSURES THE POOR ARE EFFECTIVELY AND
SUSTAINABLY SERVED BY THE PUBLIC JUSTICE SYSTEMS UPON WHICH THEY MUST
RELY FOR PROTECTION.

EXPENSE ALLOCATION:

WHEN POSSIBLE, IJM RECORDS EXPENSES DIRECTLY TO THE FIELD OFFICES TO

Part V Supplemental Information

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

WHICH THEY RELATE; FOR PROGRAM EXPENSES NOT DIRECTLY ALLOCATED TO A

SPECIFIC REGION, IJM ALLOCATES EXPENSES BASED ON THE PERCENTAGE OF

OFFICES LOCATED IN THAT REGION OVER THE TOTAL NUMBER OF OFFICES.

ADDITIONALLY, IJM ALLOCATES BANK FEES AND TRANSFER FEES AS THEY RELATE

TO MAINTAINING BANK ACCOUNTS FOR EACH OFFICE AS WELL AS TRANSFER FEES

ASSOCIATED WITH THE MOVEMENT OF FUNDS TO FIELD OFFICES. THE ALLOCATION

USED FOR BANK FEES IS ALSO WEIGHTED BASED ON THE NUMBER OF FIELD

OFFICES IN EACH REGION. FINALLY, IJM ALLOCATES FUNDRAISING EXPENSES TO

EACH REGION BASED ON THE BUDGET FOR THAT REGION AS A PERCENTAGE OF THE

TOTAL IJM BUDGET.

SCHEDULE F, PART IV, LINE 6:

THE ORGANIZATION HAS FILED FORM 5713 UNDER SEPARATE COVER TO THE IRS.

THE ORGANIZATION IS NOT REQUIRED TO FILE FORM 990-T.

WHILE THE ORGANIZATION DOES NOT CONDUCT ANY OF ITS PROGRAMS WITHIN THE

BOYCOTTING COUNTRIES THAT REQUIRE THE FILING OF FORM 5713, SOME MEMBERS

OF THE ORGANIZATION HAVE FLOWN AIRLINES RELATED TO AT LEAST ONE OF

THESE COUNTRIES TO CARRY OUT THEIR DUTIES. DUE TO THE BROAD NATURE OF

THE INSTRUCTIONS AND DEFINITIONS RELATED TO THE FORM, THE ORGANIZATION

HAS DETERMINED THAT IT IS REQUIRED TO FILE THE FORM IN ORDER TO REPORT

THE PROCUREMENT OF AIRFARE FROM COMPANIES LOCATED IN THESE COUNTRIES.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		DALLAS BENEFIT DINNER (event type)	(event type)	NONE (total number)	
Revenue	1 Gross receipts	654,656.			654,656.
	2 Less: Contributions	571,046.			571,046.
	3 Gross income (line 1 minus line 2)	83,610.			83,610.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	2,667.			2,667.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	109,373.			109,373.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				112,040.
11 Net income summary. Subtract line 10 from line 3, column (d)				-28,430.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2017

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
INTERNATIONAL JUSTICE MISSION

Employer identification number
54-1722887

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|---|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input checked="" type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2017

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) GARY HAUGEN CEO	(i)	282,749.	8,663.	855.	16,197.	18,201.	326,665.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SEAN LITTON PRESIDENT	(i)	219,935.	0.	773.	13,275.	6,638.	240,621.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JOHN PASSAUER CFO	(i)	187,387.	15,000.	1,283.	11,500.	13,560.	228,730.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ERIC HA CRO	(i)	161,301.	0.	333.	17,579.	18,813.	198,026.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KIM KERLEY CPO	(i)	174,997.	0.	402.	10,915.	19,494.	205,808.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) BLAIR BURNS SVP, JUSTICE OPS	(i)	164,593.	0.	361.	10,243.	18,689.	193,886.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) MELISSA RUSSELL SVP, GLOBAL ADVANCEMENT	(i)	193,199.	0.	379.	11,959.	18,689.	224,226.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) PHILIP LANGFORD VP, REG OPS SE ASIA	(i)	156,395.	0.	479.	9,751.	18,689.	185,314.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) JESSE RUDY VP, GLOBAL STRATEGY & ADVANCEMENT	(i)	160,659.	0.	341.	8,260.	18,177.	187,437.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) SHAWN KOHL NATL DIRECTOR, UGANDA	(i)	118,951.	9,500.	143,386.	7,334.	14,827.	293,998.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) ANDREY SAWCHENKO FIELD OFFICE DIR, BANGKOK	(i)	114,423.	0.	73,606.	7,305.	14,895.	210,229.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) JOHN TANAGHO FIELD OFFICE DIR, CEBU	(i)	87,022.	7,000.	90,241.	5,460.	14,663.	204,386.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) BRANDON KAOPUIKI SPECIALIST, INTERNET CRIMES	(i)	108,639.	0.	75,891.	4,432.	14,663.	203,625.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) NATHAN SANGER DIR OF INVEST. & LAW ENFORCEMENT DEV	(i)	105,686.	0.	68,211.	5,137.	14,663.	193,697.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 1A:

INTERNATIONAL JUSTICE MISSION PROVIDES COMPANION TRAVEL FOR EXPATRIATES AS

PART OF THE ORGANIZATION'S STAFF CARE PLAN. THERE ARE TWO SPECIFIC

INSTANCES WHERE COMPANION TRAVEL IS ALLOWED. THESE ARE ANNUAL REQUIRED

FURLOUGH TRAVEL AND REQUIRED ATTENDANCE AT AN ANNUAL EVENT HELD BY THE

ORGANIZATION. ALL TRAVEL IS SUBJECT TO THE PROCUREMENT POLICY OF THE

ORGANIZATION. ALL COMPANION TRAVEL IS TREATED AS TAXABLE INCOME TO THE

EMPLOYEE.

THE ORGANIZATION HAS A TAX EQUALIZATION PROGRAM FOR ITS EXPATRIATE STAFF.

THIS PROGRAM EQUALIZES THE TAX LIABILITY OF THE STAFF IN ORDER TO SIMULATE

A TAX LIABILITY EQUAL TO WHAT THEY WOULD PAY IF THEY WERE EARNING THEIR

INCOME AT OUR HEAD QUARTERS OFFICE IN WASHINGTON, DC. ANY TAXES PAID ON

BEHALF OF AN EMPLOYEE PARTICIPATING IN THE TAX EQUALIZATION PROGRAM ARE

TREATED AS TAXABLE INCOME TO THAT EMPLOYEE.

SHAWN KOHL: \$2,376

ANDREY SAWCHENK: \$11,303

JOHN TANAGHO: \$1,054

Part III Supplemental Information

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

IJM PAYS FOR THE REASONABLE AND NECESSARY COSTS OF HOME SECURITY SERVICES

FOR EXPATRIATE EMPLOYEES IN HOST CITIES WHERE THERE ARE SIGNIFICANT SAFETY

CONCERNS, AS DEEMED APPROPRIATE BY A DESIGNATED HOME SECURITY COMMITTEE.

THESE SECURITY SERVICES MAY INCLUDE ONE OR MORE SECURITY GUARDS BASED AT

THE EMPLOYEE'S HOME. EMPLOYEES ON PART VII WHO RECEIVED THESE SERVICES ARE:

SHAWN KOHL: \$7,011

THESE AMOUNTS ARE TREATED AS TAXABLE INCOME TO THE EMPLOYEE.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2017

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
- ▶ **Attach to Form 990.**
- ▶ **Go to www.irs.gov/Form990 for the latest information.**

Name of the organization **INTERNATIONAL JUSTICE MISSION** Employer identification number **54-1722887**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
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	166	2,391,750.	HISTORICAL PRICE DATA
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 ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

- 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? **X**
- b If "Yes," describe the arrangement in Part II.
- 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? **X**
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **X**
- b If "Yes," describe in Part II.
- 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31	X	
32a		X

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public
Inspection

Name of the organization

INTERNATIONAL JUSTICE MISSION

Employer identification number

54-1722887

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

VICTIMS, BRINGING THE CRIMINALS TO JUSTICE, RESTORING SURVIVORS TO

SAFETY AND STRENGTH, AND HELPING LOCAL LAW ENFORCEMENT BUILD A SAFE

FUTURE THAT LASTS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

ABUSE AGAINST THE POOR FACE VIRTUALLY NO RECOURSE, DESPITE CLEAR LAWS

AGAINST THE VIOLATIONS. THE RULE OF LAW SHOULD OFFER PROTECTION TO

VULNERABLE PEOPLE, BUT, ACCORDING TO A UNITED NATIONS REPORT, MORE THAN

4 BILLION PEOPLE LIVE OUTSIDE THE PROTECTION OF THE LAW. IJM IS

ADDRESSING THIS CRISIS BY ENSURING ACCESS TO RULE OF LAW FOR THE POOR

THROUGH THE PROVISION OF INDIVIDUAL CASEWORK SERVICES AND IN

COLLABORATION WITH GOVERNMENT PARTNERS TO REFORM THE JUSTICE SYSTEM.

IJM ATTORNEYS, INVESTIGATORS, SOCIAL WORKERS, COMMUNITY ACTIVISTS AND

OTHER PROFESSIONALS WORK IN 18 COMMUNITIES THROUGHOUT AFRICA, LATIN

AMERICA, SOUTH ASIA AND SOUTHEAST ASIA.

IJM PROTECTS THE POOR FROM VIOLENCE BY PARTNERING WITH LOCAL

AUTHORITIES TO:

-RESCUE VICTIMS

-BRING CRIMINALS TO JUSTICE

-RESTORE SURVIVORS

-STRENGTHEN JUSTICE SYSTEMS

Name of the organization INTERNATIONAL JUSTICE MISSION	Employer identification number 54-1722887
---	--

IJM COMBATS VIOLENCE AND OPPRESSION AGAINST THE POOR-LIKE SLAVERY, SEX

TRAFFICKING, SEXUAL VIOLENCE AND PROPERTY GRABBING. BY COLLABORATING

WITH COMMUNITIES AND GOVERNMENTS, IJM SERVES INDIVIDUAL VICTIMS OF

VIOLENCE AND PURSUES DRAMATIC IMPROVEMENTS IN THE JUSTICE SYSTEM TO

PROTECT ALL PEOPLE VULNERABLE TO THE CRIME.

IJM'S UNIQUE MODEL TO DRIVE MAXIMUM-IMPACT, LONG-TERM CHANGE IS CALLED

JUSTICE SYSTEM TRANSFORMATION:

PHASE 1: COLLABORATIVE CASEWORK

IJM PARTNERS WITH LOCAL AUTHORITIES TO RESCUE INDIVIDUAL VICTIMS OF A

SPECIFIC CRIME, BRING CRIMINALS TO JUSTICE AND RESTORE SURVIVORS. BY

TAKING ON INDIVIDUAL CASES, IJM ALSO WORKS TO STRENGTHEN THE JUSTICE

SYSTEM.

PHASE 2: SYSTEM REFORM

IJM CONTINUES COLLABORATIVE CASEWORK, AND LAUNCHES INTENSE,

COLLABORATIVE PROJECTS THAT AIM TO DRAMATICALLY IMPROVE THE JUSTICE

SYSTEM'S RESPONSE TO THE TARGETED CRIME. BY USING WHAT THEY HAVE

LEARNED THROUGH SCORES OF INDIVIDUAL CASES, IJM TEAMS DESIGN PROJECTS

THAT WILL HELP FIX WHAT IS MOST BROKEN IN THE JUSTICE SYSTEM.

PHASE 3: SUSTAIN GAINS

IJM MONITORS AND EVALUATES RESULTS AND CONTINUES TO SUPPORT LOCAL

GOVERNMENT PARTNERS. AT THIS POINT, THE JUSTICE SYSTEM CAN BE COUNTED

ON TO EFFECTIVELY PROTECT POOR PEOPLE FROM THE TARGETED FORM OF

VIOLENCE.

Name of the organization INTERNATIONAL JUSTICE MISSION	Employer identification number 54-1722887
---	--

IN 2017, IJM AND IJM-TRAINED PARTNERS BROUGHT RELIEF TO 4,616 VICTIMS

OF VIOLENCE AND OPPRESSION. EACH VICTORY REPRESENTS THE TENACIOUS WORK

OF IJM'S FRONTLINE TEAM OF ATTORNEYS, SOCIAL WORKERS, AND INVESTIGATORS

- WORK THAT CONTINUES LONG-TERM AS SURVIVORS HEAL AND REBUILD THEIR

LIVES WITH THE ASSISTANCE OF IJM AFTERCARE AND AS IJM ATTORNEYS PURSUE

JUSTICE IN COURT, PROCESSES THAT CAN TAKE YEARS.

IN 2017, A TOTAL OF 271 CRIMINALS WERE RESTRAINED THROUGH COURT-ORDERED

DETENTION OR CONVICTIONS. AS OF DECEMBER 2017, MORE THAN 3,000

SURVIVORS AND THEIR FAMILY MEMBERS WERE RECEIVING AFTERCARE SERVICES.

MORE THAN 27,000 PEOPLE WERE TRAINED, INCLUDING LAW ENFORCEMENT

OFFICERS, JUDGES, COMMUNITY MEMBERS, PROSECUTORS AND SOCIAL SERVICES

PROFESSIONALS.

THESE FIGURES ENCOMPASS IJM'S CASEWORK IN 18 COMMUNITIES AROUND THE

WORLD.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

ENGAGE THEIR CONGREGATIONS IN BRINGING AN END TO SLAVERY.

IJM STUDENT MOBILIZATION SUPPORTS A GROWING "JUSTICE GENERATION" OF

STUDENTS SERVING AS NEW LEADERS IN THE FIGHT FOR INTERNATIONAL HUMAN

RIGHTS. WORKING WITH COLLEGE CAMPUS CHAPTERS AND HIGH SCHOOLS ACROSS

THE U.S., IJM'S PROGRAMS EMPOWER STUDENTS TO LEVERAGE THEIR TALENTS AND

ENERGY TO FIGHT SLAVERY AND OTHER FORMS OF EVERYDAY VIOLENCE AGAINST

THE POOR.

IJM'S ADVOCACY AND MOBILIZATION TEAM ENGAGES GRASSROOTS ADVOCATES IN

Name of the organization INTERNATIONAL JUSTICE MISSION	Employer identification number 54-1722887
---	--

SUPPORTING U.S. GOVERNMENT POLICIES THAT WILL COMBAT VIOLENCE AGAINST THE POOR. IJM HAS PROVIDED THOUSANDS OF INDIVIDUALS AND GROUPS WITH CONCRETE TOOLS FOR SHARING ABOUT EVERYDAY VIOLENCE AND MOBILIZING POLICYMAKERS TO HELP END IT. IJM HAS TRAINED 178 VOLUNTEER LEADERS TO MOBILIZE THEIR COMMUNITIES TO ENGAGE IN THE FIGHT AGAINST SLAVERY AND VIOLENCE.

IN IJM'S FIELD OFFICES AROUND THE WORLD, COMMUNITY RELATIONS TEAMS WORK WITHIN THEIR OWN CITIES TO SPREAD INFORMATION ON LEGAL RIGHTS AND HELP THE POOR PURSUE JUSTICE THROUGH POLICE AND LOCAL COURTS. IN PLACES LIKE INDIA AND THE PHILIPPINES, MEDIA AND LOCAL CHURCHES ARE TAKING HOLD OF THE VISION AND EMPOWERING COMMUNITIES TO SEEK JUSTICE IN NEW AND EXCITING WAYS.

BY RAISING AWARENESS OF THE ISSUE OF VIOLENCE AGAINST THE POOR, IJM BRINGS ALLIES FROM ALL WALKS OF LIFE INTO THE STRUGGLE TO PROTECT THE POOR FROM VIOLENCE. IJM'S WORK HAS BEEN FEATURED BY OUTLETS SUCH AS FORBES MAGAZINE, THE WASHINGTON POST, THE TIMES OF INDIA, THE GUARDIAN, THE NEW YORK TIMES, THE NEW YORKER, FOREIGN AFFAIRS, "THE TODAY SHOW," "THE OPRAH WINFREY SHOW," "DATELINE NBC," MSNBC, CNN, BBC WORLD NEWS AND NATIONAL PUBLIC RADIO, NATIONAL GEOGRAPHIC, AMONG MANY OTHERS.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

INDIA, THAILAND, KENYA, PHILIPPINES,
BOLIVIA, CAMBODIA, GUATEMALA, UGANDA,
GHANA, DOMINICAN REPUBLIC, EL SALVADOR

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

Name of the organization INTERNATIONAL JUSTICE MISSION	Employer identification number 54-1722887
---	--

FIRST, INFORMATION IS GATHERED BY THE ORGANIZATION. THEN, THE DIRECTOR OF ACCOUNTING REVIEWS AND COMPILES ALL OF THE INFORMATION AND SUBMITS THE INFORMATION TO TAX PREPARERS (AT RSM US LLP). THE CFO AND PRESIDENT REVIEW THE DRAFT OF THE FORM 990 THAT HAS BEEN PREPARED BY RSM US LLP, AND SUGGEST CORRECTIONS/MODIFICATIONS AS NEEDED. AFTER THE FINAL DRAFT OF THE FORM 990 IS PREPARED, THE CHAIR OF THE FINANCE AND AUDIT COMMITTEE OF THE BOARD REVIEW IT IN TURN; AFTER WHICH POINT, THE BOARD OF DIRECTORS IS NOTIFIED THAT THE FINAL 990 IS AVAILABLE ON OUR INTRANET FOR THEIR REVIEW. FINALLY, RSM US LLP PREPARES AND REMITS THE FINAL 990 TO THE IRS.

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

THE CONFLICT OF INTEREST POLICY IS DETAILED AS AN APPENDIX TO THE IJM EMPLOYEE MANUAL AND SPECIFICALLY PROVIDES GUIDANCE ON TO WHOM TO COMMUNICATE CONFLICTS THAT ARISE. EACH STAFF MEMBER IS REQUIRED TO SIGN AN ACKNOWLEDGEMENT FORM UPON RECEIPT AND REVIEW OF THE IJM EMPLOYEE MANUAL. ADDITIONALLY, ALL STAFF WHO ARE AUTHORIZED TO APPROVE EXPENSES ARE SENT THE CONFLICT OF INTEREST POLICY VIA E-MAIL AND REQUIRED, ON AN ANNUAL BASIS, TO AFFIRM THAT THEY DID NOT ENGAGE IN OR KNOW ABOUT ANY CONFLICTS OF INTEREST. IJM REQUIRES BOARD MEMBERS TO COMPLY WITH THIS SAME POLICY AND INDIVIDUAL BOARD MEMBERS ALSO ANNUALLY AFFIRM ADHERENCE TO THE POLICY.

FORM 990, PART VI, SECTION B, LINE 15:

EXECUTIVE COMPENSATION:

THE BOARD OF DIRECTORS (THE "BOARD") HAS THE RESPONSIBILITY FOR OVERSEEING IJM'S EXECUTIVE COMPENSATION PROGRAM. THE BOARD RECOGNIZES THAT IN ORDER FOR IJM TO ACHIEVE ITS AMBITIOUS STRATEGIC GOALS, IJM MUST BE ABLE TO ATTRACT, RETAIN AND REWARD QUALIFIED EXECUTIVES WHO WILL BE ABLE TO OPERATE

Name of the organization INTERNATIONAL JUSTICE MISSION	Employer identification number 54-1722887
---	--

EFFECTIVELY IN A CHALLENGING, COMPLEX ENVIRONMENT.

CHIEF EXECUTIVE OFFICER:

THE BOARD INDEPENDENTLY DETERMINES THE SALARY AND BENEFITS FOR THE CHIEF

EXECUTIVE OFFICER. THE CPO PROVIDES THE BOARD WITH COMPETITIVE MARKET

SALARY DATA OBTAINED FROM EXTERNAL COMPENSATION SURVEYS. BASED ON THE

INFORMATION PRESENTED, THE BOARD DISCUSSES THE CHIEF EXECUTIVE OFFICER'S

PERFORMANCE, THE OVERALL PERFORMANCE OF IJM, AND THE COMPETITIVE MARKET.

THE BOARD INDEPENDENTLY MAKES COMPENSATION DECISIONS IN AN EXECUTIVE

SESSION, WITHOUT THE CHIEF EXECUTIVE OFFICER PRESENT.

SENIOR EXECUTIVES (VICE PRESIDENT LEVEL AND ABOVE):

THE BOARD HAS DELEGATED TO THE CHIEF EXECUTIVE OFFICER THE AUTHORITY TO

DETERMINE THE SALARY AND BENEFITS FOR ALL SUBORDINATE EXECUTIVES AND

EMPLOYEES. THE CHIEF EXECUTIVE OFFICER HAS IN TURN DELEGATED TO THE

PRESIDENT THE AUTHORITY TO DETERMINE THE SALARY AND BENEFITS FOR ALL

SUBORDINATE EXECUTIVES AND EMPLOYEES. THE CHIEF EXECUTIVE OFFICER

DETERMINES THE SALARY AND BENEFITS FOR THE PRESIDENT AND SENIOR VICE

PRESIDENT OF GLOBAL ADVANCEMENT IN CONSULTATION WITH THE CPO. THE CPO

PROVIDES COMPETITIVE MARKET SALARY DATA OBTAINED FROM EXTERNAL COMPENSATION

SURVEYS, AND MAKES RECOMMENDATIONS BASED ON INPUT OBTAINED FROM EACH SENIOR

EXECUTIVE'S DIRECT MANAGER.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AK, CO, FL, GA, HI, MN, MS, ND, NH, NC, OR, PA, SC, TN, VA, WV, WI

Name of the organization INTERNATIONAL JUSTICE MISSION	Employer identification number 54-1722887
---	--

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON ITS WEBSITE. ADDITIONALLY, THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST, FOR THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN SECTION 6104 (D).

FORM 990, PART XII, LINE 2C:

THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEARS.

FORM 990, PART I, LINE 5 AND PART V, LINE 2A:

AS OF 12/31/2017, IJM EMPLOYED A TOTAL OF 842 EMPLOYEES. OF THESE, 215 WERE EMPLOYED AT HQ IN WASHINGTON, DC; 18 WERE U.S. EXPATRIATES; 3 WERE THIRD COUNTRY NATIONALS; AND 606 WERE LOCAL NATIONAL STAFF IN OUR FIELD OFFICES. THIRD COUNTRY NATIONALS ARE CITIZENS OF NEITHER THE U.S. NOR THE COUNTRY IN WHICH THEY ARE WORKING, AND LOCAL NATIONAL STAFF MEMBERS LIVE IN, WORK IN AND ARE CITIZENS OF THE COUNTRY IN WHICH OUR OFFICE IS LOCATED. THESE TWO TYPES OF EMPLOYEES ARE NOT SUBJECT TO U.S. INCOME TAXES AND THEREFORE ARE NOT REPORTED ON IRS FORM W-3. THE NUMBER IN PART I LINE 5 (315) RELATES TO THE NUMBER OF EMPLOYEES FOR WHOM IJM SUBMITTED W-2 FORMS TO THE IRS AND THEREFORE INCLUDES U.S. STAFF WHO EARNED ANY INCOME FROM IJM THROUGHOUT THE YEAR, NOT JUST THE NUMBER OF STAFF AT YEAR END.