PUBLIC DISCLOSURE COPY **Return of Organization Exempt From Income Tax** 

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

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

OMB No. 1545-0047

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2023 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number Address change CATHOLIC LEGAL IMMIGRATION NETWORK, INC. Name change 52-1584951 CLINIC Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 8455 COLESVILLE ROAD 960 (301)565-480032,732,177. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return Applica-tion pending 20910 SILVER SPRING, MD H(a) Is this a group return F Name and address of principal officer: ANNA MARIE GALLAGHER Yes X No for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) ( (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions WWW.CLINICLEGAL.ORG J Website: H(c) Group exemption number **K** Form of organization: X Corporation L Year of formation: 1988 M State of legal domicile: DC Trust Association Other Part I Summary Briefly describe the organization's mission or most significant activities: SEE  $\overline{PART}$ III, LINE 1. Activities & Governance 2 if the organization discontinued its operations or disposed of more than 25% of its net assets. 20 3 Number of voting members of the governing body (Part VI, line 1a) 3 20 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Prior Year Current Year** 2,920,654. 11,988,250. Contributions and grants (Part VIII, line 1h) 8 3,057,135. 3,534,316. Program service revenue (Part VIII, line 2g) 146,626. 501,433. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 19,414. 17,240. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 6,143,829. 16,041,239. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 1,431,066. 7,100,101 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 6,296,690. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 7,618,058. 15 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 1,828,591. 1,942,870. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 9,556,347. 16,661,029. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -3,412,518. -619,790. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 14,287,900. 18,644,665 Total assets (Part X, line 16)  $1,306,\overline{147}$ 5,430,541 21 Total liabilities (Part X, line 26) 三年 12,981,753. 13,214,124 Net assets or fund balances. Subtract line 21 from line 20 ..... 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. Signature of officer Date Sign ANNA MARIE GALLAGHER, EXECUTIVE DIRECTOR Here Type or print name and title Date PTIN Check Preparer's signature Print/Type preparer's name 11/05/2024 P00288314 RICHARD J. LOCASTRO, CPA Paid self-employed Firm's name GELMAN, ROSENBERG & FREEDMAN Firm's EIN 52-1392008 Preparer Firm's address 4550 MONTGOMERY AVE SUITE 800N Use Only Phone no. 301-951-9090

No

Yes

May the IRS discuss this return with the preparer shown above? See instructions

BETHESDA, MD 20814-2930

332002 12-21-23

including grants of \$

14,181,662.

Total program service expenses

Other program services (Describe on Schedule O.)

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) (Revenue \$

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		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? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		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? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	X	

Form	n 990 (2023) CATHOLIC LEGAL IMMIGRATION NETWORK, INC. 52-1584 rt IV Checklist of Required Schedules (continued)	1951	Р	age 4
rai	Checklist of hequired Schedules (continued)		V	LNa
22	Did the ergenization report more than \$5,000 of grants or other equiptones to or far demostic individuals on		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22	Х	
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	22	22	
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete			
		23	х	
24 2	Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	- 22	<u> </u>
244	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	2.10		
·	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	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)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O  To V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			$\Box$
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 23	_		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	)		

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

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(gambling) winnings to prize winners?

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Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		_	Yes	No
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	,		
_		1	37	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X	- V
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b_	+	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	100		x
_	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	. 4a		Α.
D	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	-		
5a	and the contract of the contra	5a		х
b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	· -		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<del> </del>
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	- 50		
ou	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- 50		
~	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	0.0		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	? <b>7</b> a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	. 7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	. 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	. 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year? N/A	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?  N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  N/A	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a	+		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders  N/A   11a			
a	Gross income from members or shareholders N/A 11a Gross income from other sources. (Do not net amounts due or paid to other sources against			
b				
19a	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	· Ea		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  N/A	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	. 16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?  N/A	17		
	If "Yes," complete Form 6069.			

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

	Check if Schedule O contains a response or note to any line in this Part VI			X				
Sec	tion A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 20							
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.							
b	Enter the number of voting members included on line 1a, above, who are independent 1b 20							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other							
_	officer, director, trustee, or key employee?	2		Х				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision							
•		3		х				
4	of officers, directors, trustees, or key employees to a management company or other person?  Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X				
6								
	Did the organization have members or stockholders?  Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	6		X				
7a		7.		Х				
	more members of the governing body?  Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a						
b		<b>-</b> 1.		х				
•	persons other than the governing body?	7b		Λ				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		Х					
a	The governing body?	8a_	X					
a	Each committee with authority to act on behalf of the governing body?	8b						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			х				
500	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Λ				
360	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		<b>V</b>	N				
40-	Did the constitution have been been been been as of Clare O	40-	Yes	No X				
	Did the organization have local chapters, branches, or affiliates?	10a		Λ				
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	401-						
44.	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х					
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Λ					
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	12a	Х					
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?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe	12b						
С		40-	Х					
40	on Schedule O how this was done	12c	X					
13	Did the organization have a written whistleblower policy?	13	X					
14	Did the organization have a written document retention and destruction policy?	14						
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?	4=	v					
а	The organization's CEO, Executive Director, or top management official	15a	_X_	v				
b	Other officers or key employees of the organization	15b		X				
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			37				
	taxable entity during the year?	16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's							
800	exempt status with respect to such arrangements? tion C. Disclosure	16b						
17	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O	د باهم	01/01/0					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	avallat	ле				
	for public inspection. Indicate how you made these available. Check all that apply.							
	X Own website Another's website X Upon request Other (explain on Schedule O)	c						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	tinand	ciai					
	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							
	ANNA MARIE GALLAGHER - (301)565-4800							
	8757 GEORGIA AVE., 850, SILVER SPRING, MD 20910							

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

   List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

Name and title	(A)	(B)	l	IIIZA		<u> </u>	ірсп	Jac	(D)	(E)	(F)
Note   Process		1	(do		Pos	ition					
Tom from granizations or related organizations below line)   Fig.		hours per	box	, unle	ss per	rson i	s both	an	compensation	compensation	amount of
ANNA MARIE GALLAGHER   38.20				cer an	na a a	irecto	r/trus	tee)			
ANNA MARIE GALLAGHER   38.20		1 '	irecto							•	•
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ANNA MARIE GALLAGHER   38.20   X		line)	Indiv	Instit	Office	Key e	Highe empl	Form			_
CHARLES H. WHEELER   34.47	(1) ANNA MARIE GALLAGHER	38.20									
TRAINING & TECH. ASSIST. SR. ATT.   39.16	EXECUTIVE DIRECTOR & SECRETARY				Х				165,476.	0.	20,464.
39.16	(2) CHARLES H. WHEELER	34.47									
DEPUTY DIRECTOR	TRAINING & TECH. ASSIST. SR. ATT.						X		117,133.	0.	28,564.
ANALOG   A	(3) MICHELLE SARDONE	39.16									
MANAGING DIRECTOR	DEPUTY DIRECTOR						X		128,640.	0.	12,940.
Second Decision   Second Dec	(4) KRISTINA A. KARPINSKI	38.21									
REL. IMM. SVCS DIR.  (6) JERRMY WEITZ  DIRECTOR OF COMMUNICATIONS  (7) GREGORY MCCAIN  DIRECTOR OF FINANCE (FROM 6/2023)  (8) MOST REVEREND JAIME SOTO  (9) MS. PEG HARMON  VICE PRESIDENT  (10) SISTER SALLY DUFFY  TREASURER  (11) ANNA GALLAGHER  SECRETARY  (12) MOST REV. EUSEBIO ELIZONDO  BOARD MEMBER  (13) MOST REV. GEORGE THOMAS  BOARD MEMBER  (14) MOST REV. GREGORY HARTMAYER  BOARD MEMBER  (15) MOST REV. JACQUES FABRE-JEUNE  BOARD MEMBER  (16) MOST REV. MARK SEITZ  BOARD MEMBER  (17) MOST REV. MARK SEITZ  BOARD MEMBER  (17) MOST REV. JACQUES FABRE-JEUNE  BOARD MEMBER  (17) MOST REV. MARK SEITZ  DO. 0. 0. 0.  0. 0. 0.  0. 0. 0.  0. 0. 0.  0. 0.	MANAGING DIRECTOR						X		108,066.	0.	28,886.
CALL	(5) MIGUEL A. NARANJO	44.25									
DIRECTOR OF COMMUNICATIONS   X	REL. IMM. SVCS DIR.						X		111,680.	0.	12,941.
Columb   C	(6) JEREMY WEITZ	37.47									
Director of Finance (From 6/2023)	DIRECTOR OF COMMUNICATIONS						X		107,677.	0.	10,131.
(8) MOST REVEREND JAIME SOTO	(7) GREGORY MCCAIN	37.82									
CHAIRMAN	DIRECTOR OF FINANCE (FROM 6/2023)				X				63,136.	0.	1,196.
S	(8) MOST REVEREND JAIME SOTO	0.38									
VICE PRESIDENT			Х		X				0.	0.	0.
TREASURER	(9) MS. PEG HARMON	0.41									
X			Х		X				0.	0.	0.
Column	(10) SISTER SALLY DUFFY	0.53									
X			Х		X				0.	0.	0.
Column   C	(11) ANNA GALLAGHER	0.64									
BOARD MEMBER	SECRETARY		Х		X				0.	0.	0.
MOST REV. GEORGE THOMAS   O.22	(12) MOST REV. EUSEBIO ELIZONDO	0.14							_	_	_
BOARD MEMBER			Х						0.	0.	0.
MOST REV. GERALD KICANAS   O.21   X   O. O. O.	(13) MOST REV. GEORGE THOMAS	0.22							_	_	_
BOARD MEMBER   X	BOARD MEMBER		Х						0.	0.	0.
Column   C	(14) MOST REV. GERALD KICANAS	0.21							_	_	_
BOARD MEMBER         X         0.         0.         0.           (16) MOST REV. JACQUES FABRE-JEUNE         0.14         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.           (17) MOST REV. MARK SEITZ         0.20         0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.	BOARD MEMBER		Х						0.	0.	0.
(16) MOST REV. JACQUES FABRE-JEUNE       0.14       X       0.0.0.0.         BOARD MEMBER       X       0.20       0.0.0.0.         BOARD MEMBER       X       0.0.0.0.0.       0.0.0.0.0.		0.20	4_							_	_
BOARD MEMBER         X         0.         0.         0.           (17) MOST REV. MARK SEITZ         0.20         X         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.			Х						0.	0.	0.
(17) MOST REV. MARK SEITZ 0.20 X 0. 0. 0.		0.14									_
BOARD MEMBER X 0. 0. 0.			X	_					0.	0.	0.
		0.20	l								_
	-		Х						0.	0.	

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Part VII Section A. Officers, Directors, Trus								ompensated Employee	s (continued)	JJI Tage C
(A)	(B)			(0	<b>C</b> )			(D)	(E)	(F)
Name and title	Average hours per week	box	not c , unles cer an	ss per	more son i	than o	an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) MOST REV. NICHOLAS DIMARZIO	0.24								•	
BOARD MEMBER		Х						0.	0.	0.
(19) MOST REV. ROY CAMPBELL BOARD MEMBER	0.30	х						0.	0.	0.
(20) MOST REV. THOMAS WENSKI	0.25	22						0.	<u> </u>	<u></u>
BOARD MEMBER		х						0.	0.	0.
(21) REV. MICHAEL J.K. FULLER	0.00							-	-	
BOARD MEMBER		Х						0.	0.	0.
(22) MR. D. TAYLOR BOARD MEMBER	0.06	Х						0.	0.	0.
(23) MR. FRANCIS MULCAHY, J.D. BOARD MEMBER	0.43	х						0.	0.	0.
(24) MR. MARK PALMER BOARD MEMBER	0.36	х						0.	0.	0.
(25) MR. VINCENT PITTA BOARD MEMBER	0.13	х						0.	0.	0.
(26) MR. WILLIAM CANNY	0.13									_
BOARD MEMBER		X						0.	0.	0.
1b Subtotal								801,808.	0.	115,122.
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)								0. 801,808.	0.	0. 115,122.

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

Yes Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on 3 line 1a? If "Yes," complete Schedule J for such individual 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? If "Yes," complete Schedule J for such individual Х 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services X rendered to the organization? If "Yes." complete Schedule J for such person

#### **Section B. Independent Contractors**

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
BOYER, 3525 PLYMOUTH BLVD, SUITE 107,		
PLYMOUTH, MN 55447	IT SERVICES	213,322.
XPERTECHS, 5090 DORESY HALL DRIVE, ELLICOT		
CITY, MD 21042	IT SERVICES	118,610.
DEISCOVERY PARTNERS, INC.	STRATEGIC MANAGEMENT	
6625 HARLAN PLACE, NW, WASHINGTON, DC 20012	SERVICES	101,250.
¬		

SEE PART VII, SECTION A CONTINUATION SHEETS

Total number of independent contractors (including but not limited to those listed above) who received more than

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\$100,000 of compensation from the organization

Form 990 CATHOLIC	LEGAL I	MM	ΙΙG	RA	TI	ON	N	ETWORK, INC.	52-158	4951
Part VII Section A. Officers, Directors, Tru	stees, Key En	nplo	yee	s, aı	nd H	lighe	est (	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours	(cl		Pos	ition	app	ly)	(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) MS. GERALDINE P. CAROLAN BOARD MEMBER	0.31	Х						0.	0.	0.
BOARD MEMBER		Λ						0.	0.	0.
_										
Total to Part VII, Section A, line 1c										

			Check if Schedule O contains	a response	or note to any lin	e in this Part VIII			
					,	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenuè excluded from tax under
							Tunction revenue	business revenue	sections 512 - 514
SΩ	1	а	Federated campaigns	1a	34,947.				
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues						
ନ୍ଦ୍ର ପ୍ର			Fundraising events						
ifts			Related organizations						
nila			Government grants (contributions		7,404,198.				
Sir			All other contributions, gifts, grants, a						
uti her			similar amounts not included above		4,549,105.				
g ţ		а	Noncash contributions included in lines 1a-1f		8,137.				
Sol		•	Total. Add lines 1a-1f	· <b>9</b>  Ψ	•	11,988,250.			
<u> </u>			Totally idd in loo Ta Ti		Business Code	, ,			
o l	2	а	RELIGIOUS CONTRACTS		900099	1,388,350.	1,388,350.		
ķ	_	b	TRAINING AND SEMINARS		900099	1,071,155.	1,071,155.		
Ser		-	MEMBERSHIP DUES		900099	553,940.	553,940.		
an Ve		d	PROF. SERVICE FEES		900099	520,871.	520,871.		
Program Service Revenue		e				,	,		
Pro			All other program service revenue						
			Total. Add lines 2a-2f			3,534,316.			
	3		Investment income (including divident			, ,			
						500,989.			500,989.
	4		Income from investment of tax-exc			,			
	5		Royalties			17,240.			17,240.
			,	(i) Real	(ii) Personal				
	6	а	Gross rents 6a						
			Less: rental expenses 6b						
			Rental income or (loss) 6c						
			Net rental income or (loss)						
			` '	Securities	(ii) Other				
				,691,382.					
		b	Less: cost or other basis						
ē			and sales expenses <b>7b</b> 16	,690,938.					
Ju		С	Gain or (loss) 7c	444.					
Rev			Net gain or (loss)			444.			444.
her Revenue			Gross income from fundraising events						
₹			including \$	of					
			contributions reported on line 1c).	See					
			Part IV, line 18	8a					
		b	Less: direct expenses						
		С	Net income or (loss) from fundrais	ing event <u>s</u>					
	9	а	Gross income from gaming activit	ies. See					
			Part IV, line 19	9a					
		b	Less: direct expenses						
		С	Net income or (loss) from gaming	activities					
	10	а	Gross sales of inventory, less retu	rns					
			and allowances	10a					
		b	Less: cost of goods sold	10b					
		С	Net income or (loss) from sales of	inventory					
S					Business Code				
Miscellaneous Revenue	11	а							
lan		b							
Sev.		С							
Mis			All other revenue						
			Total. Add lines 11a-11d			16 044 000	2 524 245		F10 5=0
	12		<b>Total revenue.</b> See instructions			16,041,239.	3,534,316.	0.	518,673.

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Section 501(c)(3) and 501(c)(4)	organizations must com	nolete all columns. A	II other organizations r	nust complete column (A)
30000001 301 (C)(3) and 301 (C)(4)	organizations must com	ipiete ali coluititis. A	ii oti i <del>c</del> i organizations i	nust complete column (A).

Do i	Check if Schedule O contains a responder include amounts reported on lines 6b,	(A)	(B)	(C)	( <b>D</b> ) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	U 006 101	7 076 101		
	and domestic governments. See Part IV, line 21	7,076,101.	7,076,101.		
2	Grants and other assistance to domestic	04 000	04 000		
	individuals. See Part IV, line 22	24,000.	24,000.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	250 272	27 100	157 202	FF 700
	trustees, and key employees	250,272.	37,188.	157,302.	55,782
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	E 020 200	4 455 503	1 116 720	257 077
7	Other salaries and wages	5,830,309.	4,455,593.	1,116,739.	257,977
8	Pension plan accruals and contributions (include	124 444	110 250	10 000	4 200
_	section 401(k) and 403(b) employer contributions)	134,444. 943,352.	110,352.	19,802. 139,173.	4,290 31,085
9	Other employee benefits				22,809
0	Payroll taxes	459,681.	342,970.	93,902.	22,809
1	Fees for services (nonemployees):				
a	Management				
b	Legal	12 176		12 176	
_	Accounting	42,476.		42,476.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	150.		150.	
f	Investment management fees	130.		150.	
g	Other. (If line 11g amount exceeds 10% of line 25,	206 120	122 012	151 770	11 520
	column (A), amount, list line 11g expenses on Sch O.)	286,120. 22,972.	122,812. 22,243.	151,778.	11,530 229
12	Advertising and promotion	130,652.	97,603.	24,955.	8,094
13	Office expenses	331,104.	213,603.	104,161.	13,340
14	Information technology	331,104.	213,003.	104,101.	13,340
15 16	Royalties	305,405.	207,142.	73,492.	24,771
	Occupancy	119,666.	94,997.	16,147.	8,522
7  8	Travel  Payments of travel or entertainment expenses	115,000.	J = , J J 1 •	10,147.	0,322
0	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	312,317.	301,460.	7,244.	3,613
9	Interest	J_2/J_7 •	551,155	. , 2 - 1 •	3,013
:0 ?1	Payments to affiliates				
22	Depreciation, depletion, and amortization	41,657.	29,096.	10,620.	1,941
3	Insurance	46,612.	35,712.	8,519.	2,381
4	Other expenses. Itemize expenses not covered		20,,220	5,3231	2,552
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	STAFF DEVELOPMENT	134,792.	86,682.	45,564.	2,546
b	SUBS/BOOKS/REF. MAT.	82,011.	79,947.	140.	1,924
c	TRAINING & PROG. MAT.	42,542.	42,542.		_,
d	LICENSES & FEES	27,642.	25,917.	1,419.	306
	All other expenses	16,752.	2,608.	6,094.	8,050
5	Total functional expenses. Add lines 1 through 24e	16,661,029.	14,181,662.	2,020,177.	459,190
:6	Joint costs. Complete this line only if the organization	.,,	, , ,	, , =	, ,
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

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Part X | Balance Sheet

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			216,709.	1	432,431
	2	Savings and temporary cash investments			13,422,750.	2	4,405,076
	3	Pledges and grants receivable, net	305,752.	3	822,293		
	4	Accounts receivable, net		179,689.	4	564,639	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst	ontributor, or 35%				
		controlled entity or family member of any of thes		5			
	6	Loans and other receivables from other disqualif	sons (as defined				
		under section 4958(f)(1)), and persons described		Г		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			100 000	8	
⋖	9	Prepaid expenses and deferred charges			122,073.	9	155,157
	10a	Land, buildings, and equipment: cost or other		1 000 555			
		basis. Complete Part VI of Schedule D	10a	1,032,567.	22 252		224 225
	b	Less: accumulated depreciation			39,873.		334,896
	11	Investments - publicly traded securities			1,054.	11	11,410,801
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14	F10 270		
	15	Other assets. See Part IV, line 11			0.	15	519,372
	16	Total assets. Add lines 1 through 15 (must equa	14,287,900.	16	18,644,665		
	17	Accounts payable and accrued expenses	968,443.	17	1,307,707		
	18	Grants payable	315,509.	18	152,156		
	19	Deferred revenue			313,309.	19	132,130
	20 21	Tax-exempt bond liabilities				20 21	
	22	Escrow or custodial account liability. Complete F Loans and other payables to any current or form				21	
ies	22	trustee, key employee, creator or founder, subst					
Liabilities		controlled entity or family member of any of thes				22	
E	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, par					
		parties, and other liabilities not included on lines	•				
		of Schedule D	,	•	22,195.	25	3,970,678
	26	Total liabilities. Add lines 17 through 25			1,306,147.	26	5,430,541
ヿ		Organizations that follow FASB ASC 958, che			, ,		, ,
Ses		and complete lines 27, 28, 32, and 33.					
and	27	Net assets without donor restrictions			12,375,522.	27	11,452,147
Ba	28	Net assets with donor restrictions			606,231.	28	1,761,977
nd Ind		Organizations that do not follow FASB ASC 9	ck here				
린		and complete lines 29 through 33.					
S	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or eq				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in				31	
Š	32	Total net assets or fund balances		12,981,753.	32	13,214,124	
	33	Total liabilities and net assets/fund balances			14,287,900.	33	18,644,665 Form <b>990</b> (202

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

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

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#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization

Employer identification number

OMB No. 1545-0047

CATHOLIC LEGAL IMMIGRATION NETWORK 52-1584951 INC. Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	4940298.	6190461.	6439708.	2920654.	11988250.	32479371.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	4940298.	6190461.	6439708.	2920654.	11988250.	32479371.
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)						826,873.
6	Public support. Subtract line 5 from line 4.						31652498.
	ction B. Total Support						<u> </u>
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	4940298.	6190461.	6439708.	2920654.	11988250.	32479371.
	Gross income from interest,						
_	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	199,640.	179,869.	106.434.	167.370.	518.229.	1171542.
9	Net income from unrelated business		- <b>,</b>	,	,	- , -	
_	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.)	3,394.	2,058.				5,452.
11	Total support. Add lines 7 through 10	3,3321	2,000				33656365.
	Gross receipts from related activities,	etc (see instruction	ine)			12 17	,204,479.
	First 5 years. If the Form 990 is for the	•	,	fourth or fifth tax v			720272731
10	organization, check this box and stor	-		•			
Sec	ction C. Computation of Publi						
	Public support percentage for 2023 (I			column (f))		14	94.05 %
	Public support percentage from 2022					15	95.67 %
	33 1/3% support test - 2023. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2022. If the o						
_	and <b>stop here.</b> The organization qual	•		•		•	
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances te			-	•	viriow the organi	
h	10% -facts-and-circumstances test	-	•	* ''	-		
	more, and if the organization meets the	· ·				•	10/0 01
	organization meets the facts-and-circu				-		
12	Private foundation. If the organization				•		
-10	Thate loandation. If the organization	and not oneon a l	557 OIT III 16 10, 10	<u>, 100, 178, 01 170</u>	, or look trills box a		(Form 990) 2023

### 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.)

Sed	etion A. Public Support	siow, picase comp	note i art ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or 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						
	<b>Total.</b> Add lines 1 through 5						
	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 Sec	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	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						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ie organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizatio	on,
	check this box and stop here		-				<u></u>
	ction C. Computation of Publi		<u>-</u>			<del> </del>	
	Public support percentage for 2023 (I			column (f))		15	<u>%</u>
	Public support percentage from 2022		•			16	<u>%</u>
	ction D. Computation of Inves			ina 10. as l		147	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from 3			on line 14 and line		18	7 is not
ıya	33 1/3% support tests - 2023. If the						
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2022. If the	organization did r	not check a box or	line 14 or line 19	a, and line 16 is m	ore than 33 1/3%, a	and
00	line 18 is not more than 33 1/3%, che						
/()	<b>Private foundation.</b> If the organization	n did not check a	DOX ON line 14 19	a or igo check th	us dox and see in:	SITUCHORS	1 1

## Part IV | Supporting Organizations

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

### Section A. All Supporting Organizations

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

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

	Yes	No
1		
-		
2		
За		
3b		
O.S		
Зс		
4a		
<del>4</del> 8		
4b		
4c		
<b>5</b> -		
5a		
5b		
5c		
6		
0		
7		
8		
9a		
9b		
9c		
10-		
10a		
10b		
ıle A (Forn	n 990)	2023

ı u	Continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and	44-		
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	44-		
Sec	<u>detail in</u> Part VI. tion B. Type I Supporting Organizations	11c		
	tion of type i capporang organizations		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		163	140
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	1		
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  Did the organization operate for the benefit of any supported organization other than the supported	•		
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
	<i>y</i> . 11 <b>0 0</b>		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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? 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.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
_	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

332025 12-21-23

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Schedule A (Form 990) 2023

5

Income tax imposed in prior year

instructions).

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

emergency temporary reduction (see instructions).

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

5

6

Pa	rt V Type III Non-Functionally Integrated 509(a)(3)	Supporting Orga	nizations <sub>(continued)</sub>	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	urposes	1	
2	Amounts paid to perform activity that directly furthers exempt purp	oses of supported		
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purposes of se	upported organizations	3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required - provide of	details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which the organizations	anization is responsive		
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2023 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
		(*)	/···\	(m)

Section E - Distribution	on Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable am	ount for 2023 from Section C, line 6			
2 Underdistribution	ns, if any, for years prior to 2023 (reason-			
able cause requi	red - explain in <b>Part VI</b> ). See instructions.			
3 Excess distribution	ons carryover, if any, to 2023			
<b>a</b> From 2018				
<b>b</b> From 2019				
<b>c</b> From 2020				
<b>d</b> From 2021				
e From 2022				
f Total of lines 3a	through 3e			
<b>g</b> Applied to under	distributions of prior years			
h Applied to 2023	distributable amount			
i Carryover from 2	018 not applied (see instructions)			
j Remainder. Subt	ract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for	2023 from Section D,			
line 7:	\$			
a Applied to under	distributions of prior years			
<b>b</b> Applied to 2023	distributable amount			
c Remainder. Subt	ract lines 4a and 4b from line 4.			
5 Remaining under	distributions for years prior to 2023, if			
any. Subtract line	es 3g and 4a from line 2. For result greater			
than zero, explain	n in <b>Part VI.</b> See instructions.			
6 Remaining under	rdistributions for 2023. Subtract lines 3h			
and 4b from line	1. For result greater than zero, explain in			
Part VI. See inst	ructions.			
7 Excess distribut	tions carryover to 2024. Add lines 3j			
and 4c.				
8 Breakdown of lin	e 7:			
a Excess from 201	9			
<b>b</b> Excess from 202	0			
c Excess from 202	1			
d Excess from 202	2			
e Excess from 202	3			

Schedule A (Form 990) 2023

# Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

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

OMB No. 1545-0047

**2023** 

Name of the organization

CATHOLIC LEGAL IMMIGRATION NETWORK, INC.

52-1584951

Employer identification number

Organiz	ation type (check or	iej:
Filers of	f:	Section:
Form 99	0 or 990-EZ	X 501(c)( 3 ) (enter number) organization
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
		527 political organization
Form 99	0-PF	501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
		covered by the <b>General Rule</b> or a <b>Special Rule</b> . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General	Rule	
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special	Rules	
X	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under nd 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one 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; line 1. Complete Parts I and II.
	contributor, during literary, or education	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.
	year, contributions is checked, enter h purpose. Don't con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year
answer	"No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it <b>must</b> 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 requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023) Pag

Name of organization Employer identification number

# CATHOLIC LEGAL IMMIGRATION NETWORK, INC.

52-1584951

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		\$ 6,690,127.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>1,145,349</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$	Person X Payroll
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	Total contributions  \$ 738,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 600,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$573,000.	Person X Payroll

Schedule B (Form 990) (2023)

Name of organization Employer identification number

# CATHOLIC LEGAL IMMIGRATION NETWORK, INC.

52-1584951

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Traine, dadi eee, did Eir 1 1	\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

# CATHOLIC LEGAL IMMIGRATION NETWORK, INC.

52-1584951

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
000450 40 00			Calcadula D (Farms 000) (0000)

Page 4 Name of organization **Employer identification number** CATHOLIC LEGAL IMMIGRATION NETWORK, INC. 52-1584951 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

323454 12-26-23

Schedule B (Form 990) (2023)

## SCHEDULE C (Form 990)

# Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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	or (o) organizar	lions. Complete Part III.		1	Employer identification number
· ·	CATHOLI	C LEGAL IMMIGRAT	ION NETWORK		52-1584951
Part I-A Comple	te if the org	janization is exempt und	ler section 501(c)	or is a section 527	organization.
<ul><li>2 Political campaign a</li><li>3 Volunteer hours for p</li></ul>	ctivity expendit	gn activities			. \$
		anization is exempt und		-	
1 Enter the amount of	any excise tax	incurred by the organization und	der section 4955		\$
2 Enter the amount of	any excise tax	incurred by organization manag	ers under section 4955		\$
		n 4955 tax, did it file Form 4720	•		
					Yes No
b If "Yes," describe in Part I-C Comple	te if the oro	janization is exempt und	ler section 501(c)	except section 50	)1(c)(3)
		by the filing organization for se			
		ization's funds contributed to of			Ψ
					. \$
		. Add lines 1 and 2. Enter here a			. •
·	•				\$
		1120-POL for this year?			
5 Enter the names, ad	dresses, and er	mployer identification number (E tion listed, enter the amount pai	EIN) of all section 527 po	olitical organizations to	which the filing organization
• •	•	omptly and directly delivered to			•
political action comr	nittee (PAC). If	additional space is needed, prov	vide information in Part	IV.	
(a) Name		( <b>b)</b> Address	(c) EIN	(d) Amount paid fr filing organization funds. If none, enter	's contributions received and

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2023

Schedule C (Form 990) 2023

10,205.

245,761.

10,205.

4,296,141.

18,607.

716,023.

18,607.

1,074,035.

14.

14.

154,030.

159,278.

**b** Lobbying ceiling amount

(150% of line 2a, column(e))

c Total lobbying expenditures

d Grassroots nontaxable amounte Grassroots ceiling amount

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

8,388.

8,388.

156,954.

# Schedule C (Form 990) 2023 CATHOLIC LEGAL IMMIGRATION NETWORK, INC 52-1584951 Page 3 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)).

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?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  e Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  j Total. Add lines 1c through 1i  2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?  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 501(c)(6).	, section 501(c)(5), or ses from the prior year?	1 2 ar? 3	or section  Yes  1 2 3	mount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  e Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  j Total. Add lines 1c through 1i  2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?  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 501(c)(6).	ses from the prior year?  section 501(c)(5), or section 501(c)(5),	1 2 3 )(5), or se	Yes 1 2 3	
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Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	es from the prior year? , section 501(c)(5), or s	1 2 3 )(5), or se	Yes 1 2 3	N
501(c)(6).  1 Were substantially all (90% or more) dues received nondeductible by members?  2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	es from the prior year? , section 501(c)(5), or s	1 2 3 )(5), or se	Yes 1 2 3	N
<ul> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?</li> </ul>	es from the prior year? , section 501(c)(5), or s	ar? 3 (5), or se	1 2 3	N
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?</li> </ul>	es from the prior year? , section 501(c)(5), or s	ar? 3 (5), or se	1 2 3	
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B Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	es from the prior year? , section 501(c)(5), or s	ar? 3 (5), or se	3	- 1
bid the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	, section 501(c)(5), or :	)(5), or se		+-
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or			or section	
answered "Yes."  1 Dues, assessments and similar amounts from members			<u> </u>	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	of political			
expenses for which the section 527(f) tax was paid).	• • • • • • • • • • • • • • • • • • • •			
· · · · · · · · · · · · · · · · · · ·				
b Carryover from last year	· 2		2a	
		2b		
c Total		2b	2b 2c	
c Total	dues	2b 2c 3	2b 2c	
c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	dues of the excess	2b 2c 3	2b 2c	
c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  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	dues of the excess ing and political	2b 2c 3	2b 2c 3	
c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  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 expenditures next year?	dues of the excess ing and political	2b 2c 3	2b 2c 3	
c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  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 expenditures next year?  5 Taxable amount of lobbying and political expenditures. See instructions	dues of the excess ing and political	2b 2c 3	2b 2c 3	
c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  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 expenditures next year?	dues of the excess ing and political	2b 2c 3 4 5	2b 2c 3 4 5	

### **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 Inspection

Name of the organization

CATHOLIC LEGAL IMMIGRATION NETWORK,

**Employer identification number** 52-1584951

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		ds or Acc	counts. Complete if the
	organization answered 165 or 1 or 1000, 1 are 10, inte	(a) Donor advised funds	(b	) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor a	dvised funds	;
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ac			
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpo	ose conferrin	g
	impermissible private benefit?			Yes No
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 9	90, Part IV, li	ne 7.
1	Purpose(s) of conservation easements held by the organizatio	n (check all that apply).		
	Preservation of land for public use (for example, recreat	ion or education) Preservation	n of a histori	ically important land area
	Protection of natural habitat	Preservation	n of a certifie	ed historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the fo	orm of a cons	servation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic stru	cture included on line 2a		2c
d	Number of conservation easements included on line 2c acquire			
	on a historic structure listed in the National Register		L	2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by	the organiza	ation during the tax
	year			
4	Number of states where property subject to conservation ease	•		
5	Does the organization have a written policy regarding the period		of	
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing of	conservation	easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing cons	envation ease	ements during the year
•	, under the expenses industrial in monitoring, indpositing, martar	ing or violations, and officioning const	or valion dade	monto daming the year
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 1	70(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?	•	. , . , . , . ,	Yes No
9	In Part XIII, describe how the organization reports conservatio			
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's financial sta	tements that	describes the
	organization's accounting for conservation easements.			
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or	Other Sir	milar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	s, not to report in its revenue stateme	ent and balan	ce sheet works
	of art, historical treasures, or other similar assets held for publ	ic exhibition, education, or research	in furtheranc	e of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes these	items.	
b	If the organization elected, as permitted under FASB ASC 958	B, to report in its revenue statement a	ind balance s	sheet works of
	art, historical treasures, or other similar assets held for public $% \left( 1\right) =\left( 1\right) \left( 1\right) $	exhibition, education, or research in	furtherance c	of public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			
2	If the organization received or held works of art, historical trea	sures, or other similar assets for final	ncial gain, pr	rovide
	the following amounts required to be reported under FASB AS			
	Revenue included on Form 990, Part VIII, line 1			
	Assets included in Form 990, Part X			\$
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2023

332051 09-28-23

		C LEGAL IMM					84951	Page 2
Par	organizations maintaining s						<b>&gt;</b> (continue	<u>ed)</u>
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that make	significant	use of its		
	collection items (check all that apply).							
а	Public exhibition	d		hange program				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co					ose in Part	XIII.	
5	During the year, did the organization solicit or						_	
<b>D</b> :	to be sold to raise funds rather than to be ma						_ Yes	No
Par	t IV Escrow and Custodial Arrang		e if the organization	answered "Yes" or	n Form 990	), Part IV, li	ne 9, or	
	reported an amount on Form 990, Par							
1a	Is the organization an agent, trustee, custodia						٦.,	<u> </u>
	on Form 990, Part X?					L	_ Yes	No
b	If "Yes," explain the arrangement in Part XIII a	and complete the foll	owing table:			1	A	
							Amount	
	Beginning balance				I			
d	Additions during the year							
е	Distributions during the year							
Ť	Ending balance				1f		7,,	
	Did the organization include an amount on Fo		·				_ Yes	∐ No
Par	If "Yes," explain the arrangement in Part XIII. <b>t V</b> Endowment Funds Complete if	the experientian and	planation has been j	provided in Part XIII	10		<u></u>	
ı uı	Endownient i dias Complete ii	(a) Current year	(b) Prior year	(c) Two years back		years back	(e) Four ye	ears hack
4	Danimaina of way balance	1,882,699.	1,882,699.	1,544,396,	+` ′	121,628.	· , ,	02,881.
1a	Beginning of year balance	1,002,000.	1,002,000.	1,344,350.	· · · · ·	121,020.		02,001.
b	Contributions	409,104.	37,953.	362,449.		451,651.	1	51,400.
C	Net investment earnings, gains, and losses	405,104.	37,555.	302,443.	·	<del>1</del> 31,031.		31,400.
a	Grants or scholarships							
е	Other expenditures for facilities	125,050.	37,953.	24,146.		28,883.		32,653.
	and programs	125,050.	37,555.	24,140.	·	20,005.	<u> </u>	32,033.
	Administrative expenses	2,166,753.	1,882,699.	1,882,699.	1	544,396.	1 1	21,628.
g	End of year balance	•			-,	344,330.		21,020.
2	Provide the estimated percentage of the curr Board designated or quasi-endowment	ent year end balance 100	(line rg, column (a) %	) neid as.				
a h	Permanent endowment • 0000	%						
b	Term endowment • 0000							
C	The percentages on lines 2a, 2b, and 2c show							
20	Are there endowment funds not in the posses		tion that are hold an	d administered for	tho			
Ja	organization by:	ssion of the organiza	tion that are ned an	d administered for	u ie		Y	es No
	(i) Unrelated organizations?						3a(i)	X
							3a(ii)	X
h	If "Yes" on line 3a(ii), are the related organiza							<del></del>
4	Describe in Part XIII the intended uses of the						OD	
	t VI Land, Buildings, and Equipm		vinorit idrido.					
	Complete if the organization answered		, Part IV, line 11a. S	ee Form 990, Part >	(, line 10.			
	Description of property	(a) Cost or ot basis (investm	ther <b>(b)</b> Cost	or other (c)	Accumulat lepreciation		(d) Book v	/alue
1a	Land							
	Buildings							
	Leasehold improvements		36	0,442.	352,3	01.	8.	,141.
d	Equipment			1,728.	63,6			,078.
	Other			0,397.	281,7			,677.
	. Add lines 1a through 1e. (Column (d) must e		•					,896.

Schedule D (Form 990) 2023

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

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990.

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

2023

Open to Public Inspection

Name of the organization  CATHOLIC	LEGAL IMM	IGRATION NE	TWORK, INC	2.			Employer identification number 52-1584951
Part I General Information on Grants a			, , , , , , , , , , , , , , , , , , , ,				
Does the organization maintain records t	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	stance, and the selecti	on
criteria used to award the grants or assis							
2 Describe in Part IV the organization's pro	cedures for monit	toring the use of grant	funds in the United	States.			
Part II Grants and Other Assistance to I	Domestic Organi	zations and Domesti	c Governments. C	complete if the orga	anization answered "	es" on Form 990, Part	IV, line 21, for any
· · · · · · · · · · · · · · · · · · ·		· ·	<del></del>		(f) Method of	(a) Description of	(h) Dumana of sweet
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
							INCREASE THE NUMBER OF
CATHOLIC CHARITIES OF LOS ANGELES							PEOPLE WHO APPLY FOR AND
1531 JAMES M. WOOD BLVD.							OBTAIN UNITED STATES
LOS ANGELES, CA 90015	95-1690973	501(C)(3)	651,538.	0.			CITIZENSHIP THROUGH
							INCREASE THE LEGAL
COMMUNITY LEARNING PARTNERSHIP							CAPACITY OF IMMIGRATION
710 CANYON OAKS DRIVE, UNIT G							LEGAL SERVICES PROGRAMS
OAKLAND, CA 94605	83-2188601	501(C)(3)	630,540.	0.			THROUGH THE PLACEMENT,
COUNCIL ON AMERICAN ISLAMIC							INCREASE IMMIGRATION
RELATIONS - CALIFORNIA - 2180 W.							LEGAL SERVICES BY
CRESCENT AVE. STE ANAHEIM, CA							EXPANDING TRAINING FOR
92801	77-0411194	501(C)(3)	196,207.	0.			NONPROFITS TO HELP STAFF
							INCREASE THE NUMBER OF
CATHOLIC CHARITIES COMMUNITY							PEOPLE WHO APPLY FOR AND
SERVICES OF PHOENIX - 5151 N. 19TH							OBTAIN UNITED STATES
AVENUE - PHOENIX, AZ 85015	86-0223999	501(C)(3)	170,000.	0.			CITIZENSHIP THROUGH
							INCREASE THE LEGAL
UFW FOUNDATION							CAPACITY OF IMMIGRATION
917 H STREET							LEGAL SERVICES PROGRAMS
BAKERSFIELD, CA 93304	95-2703575	501(C)(3)	162,752.	0.			THROUGH THE PLACEMENT,
							INCREASE IMMIGRATION
ASIAN AMERICAN ADVANCING JUSTICE -							LEGAL SERVICES BY
LA - 1145 WILSHIRE BLVD - LOS							EXPANDING TRAINING FOR
ANGELES, CA 90017	95-3854152	501(C)(3)	156,333.	0.			NONPROFITS TO HELP STAFF

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

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

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Schedule I (Form 990) 2023

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							INCREASE IMMIGRATION
COALITION FOR HUMANE IMMIGRANT							LEGAL SERVICES BY
RIGHTS - 2533 W 3RD STREET #101 -							EXPANDING TRAINING FOR
LOS ANGELES, CA 90057	95-4421521	501(C)(3)	138,229.	0.			NONPROFITS TO HELP STAF
							BUILDING CAPACITY THROU
POMONA ECONOMIC OPPORTUNITY CENTER							CITIZENSHIP AND
1682 W. MISSION BLVD							INTEGRATION PROJECT.
POMONA, CA 91766	95-4657497	501(C)(3)	124,794.	0.			INCREASE IMMIGRATION
							INCREASE THE LEGAL
EDUCATION AND LEADERSHIP							CAPACITY OF IMMIGRATION
FOUNDATION - 4290 E. ASHLAN AVE -							LEGAL SERVICES PROGRAMS
FRENSO, CA 93726	26-0417563	501(C)(3)	123,298.	0.			THROUGH THE PLACEMENT,
JNIVERSITY OF CALIFORNIA IMMIGRANT							INCREASE IMMIGRATION
LEGAL SERVICES - 1850 RESEARCH							LEGAL SERVICES BY
PARK DRIVE, STE 300 - DAVIS, CA							EXPANDING TRAINING FOR
95618	94-6036494	501(C)(3)	121,297.	0.			NONPROFITS TO HELP STAF
WORLD RELIEF CORP OF NAT'L			,				INCREASE IMMIGRATION
ASSOCIATION OF EVANGELICALS -							LEGAL SERVICES BY
13121 BROOKHURST STREET,, STE H -							EXPANDING TRAINING FOR
GARDEN GROVE, CA 92843	23-6393344	501(C)(3)	119,785.	0.			NONPROFITS TO HELP STAF
,			,				INCREASE THE LEGAL
CENTRO LA FAMILIA ADVOCACY							CAPACITY OF IMMIGRATION
SERVICES - 302 FRESNO ST., SUITE							LEGAL SERVICES PROGRAMS
102 - FRESNO, CA 93706	77-0310310	501(C)(3)	109,491.	0.			THROUGH THE PLACEMENT,
CATHOLIC CHARITIES LEGAL SERVICES			1				INCREASE THE NUMBER OF
- ARCHDIOCESE OF MIAMI - 28 W.							PEOPLE WHO APPLY FOR AN
FLAGLER ST., STE, 1000 - MIAMI, FL							OBTAIN UNITED STATES
33131	65-0804650	501(C)(3)	105,001.	0.			CITIZENSHIP THROUGH
	00 0001000		100,002.				INCREASE IMMIGRATION
INTERNATIONAL RESCUE COMMITTEE IN							LEGAL SERVICES BY
NORTHERN CA - 440 GRAND AVE. SUITE							EXPANDING TRAINING FOR
500 - OAKLAND, CA 94610	13-5660870	501(C)(3)	101,577.	0.			NONPROFITS TO HELP STAF
OO OARDAND, CA 94010	13 3000070	P01(C)(3)	101,377.	0.			INCREASE IMMIGRATION
JEWISH FAMILY SERVICE OF SAN DIEGO							
							LEGAL SERVICES BY
8804 BALBOA AVE	05 1644004	E01/Q\/2\	05 753	•			EXPANDING TRAINING FOR
SAN DIEGO, CA 92123	95-1644024	DOT(C)(2)	95,753.	0.	1		NONPROFITS TO HELP STA

Schedule I (Form 990)

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							INCREASE THE NUMBER OF
CATHOLIC CHARITIES OF DALLAS, INC.							PEOPLE WHO APPLY FOR AND
1421 W MOCKINGBIRD LN							OBTAIN UNITED STATES
DALLAS, TX 75247	75-2745221	501(C)(3)	90,000.	0.			CITIZENSHIP THROUGH
CATHOLIC CHARITIES HAWAII							BUILDING CAPACITY THROUGH
1822 KEEAUMOKU STREET							CITIZENSHIP AND
	99-0073547	501/C)/3)	87,500.	0.			INTEGRATION PROJECT
HONOLULU, HI 96822	99-00/354/	301(C)(3)	87,300.	0.			INTEGRATION PROJECT
LIGHT OF HOPE IMMIGRATION LAW							BUILDING CAPACITY THROUGH
CENTER - 1339 19TH STREET - PLANO,							CITIZENSHIP AND
TX 75074	47-2079630	501(C)(3)	87,500.	0.			INTEGRATION PROJECT
IACO IMMIGRATION & AMERICAN			, ,				
CITIZENSHIP ORGANIZATION - 647							BUILDING CAPACITY THROUGH
MAIN AVE, SUITE 205 - PASSAIC, NJ							CITIZENSHIP AND
07055	22-3687930	501(C)(3)	87,500.	0.			INTEGRATION PROJECT
CATHOLIC CHARITIES ARCH OF			, ,	-			INCREASE THE NUMBER OF
GALVESTON-HOUSTON - 5599 SAN							PEOPLE WHO APPLY FOR AND
FELIPE SUITE 300 - HOUSTON, TX							OBTAIN UNITED STATES
77056	74-1109733	501(C)(3)	85,500.	0.			CITIZENSHIP THROUGH
		( . , ( . ,					INCREASE THE LEGAL
CARECEN							CAPACITY OF IMMIGRATION
2845 W. 7TH ST							LEGAL SERVICES PROGRAMS
LOS ANGELES, CA 90005	95-3867724	501(C)(3)	84,033.	0.			THROUGH THE PLACEMENT,
,			,				INCREASE IMMIGRATION
LIBRERIA DEL PUEBLO							LEGAL SERVICES BY
998 NORTH D STREET							EXPANDING TRAINING FOR
SAN BERNARDINO, CA 92410	95-4095509	501(C)(3)	83,842.	0.			NONPROFITS TO HELP STAFF
			·				INCREASE IMMIGRATION
SAN FRANCISCO LABOR COUNCIL							LEGAL SERVICES BY
1188 FRANKLIN STREET, SUITE 203							EXPANDING TRAINING FOR
SAN FRANCISCO, CA 94109	94-0835595	501(C)(3)	83,842.	0.			NONPROFITS TO HELP STAFF
·			, , , , , , , , , , , , , , , , , , ,				INCREASE IMMIGRATION
CALIFORNIA RURAL LEGAL ASSISTANCE							LEGAL SERVICES BY
FOUNDATION - 2210 K ST., STE 201 -							EXPANDING TRAINING FOR
SACRAMENTO, CA 95816	94-2800442	501(C)(3)	83,838.	0.			NONPROFITS TO HELP STAFF

Part II Continuation of Grants and Othe	r Assistance to Dor	mestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa	rt II.)	·
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							INCREASE IMMIGRATION
HUMAN AGENDA							LEGAL SERVICES BY
1590 OAKLAND ROAD SUITE B 211							EXPANDING TRAINING FOR
SAN JOSE, CA 95131	04-3700971	501(C)(3)	83,754.	0.			NONPROFITS TO HELP STAFF
							INCREASE THE LEGAL
THE FRESNO CENTER							CAPACITY OF IMMIGRATION
1725 N. FINE AVE							LEGAL SERVICES PROGRAMS
FRESNO, CA 93727	77-0280265	501(C)(3)	83,476.	0.			THROUGH THE PLACEMENT,
							INCREASE IMMIGRATION
PARS EQUALITY CENTER							LEGAL SERVICES BY
1635 THE ALAMEDA							EXPANDING TRAINING FOR
SAN JOSE, CA 95126	27-2969900	501(C)(3)	83,402.	0.			NONPROFITS TO HELP STAFF
•			, ·				INCREASE IMMIGRATION
ALIANCE FOR AFRICAN ASSISTANCE							LEGAL SERVICES BY
5982 EL CAJON BLVD.							EXPANDING TRAINING FOR
SAN DIEGO, CA 92115	93-1008369	501(C)(3)	81,708.	0.			NONPROFITS TO HELP STAFF
			12,				INCREASE IMMIGRATION
ACCESS CALIFORNIA SERVICES							LEGAL SERVICES BY
300 W. CARL KARCHER WAY							EXPANDING TRAINING FOR
ANAHEIM, CA 92801	33-0826205	501(C)(3)	79,613.	0.			NONPROFITS TO HELP STAFF
mindin, on 32001	33 0020203	501(0)(3)	73,013.	0.			INCREASE IMMIGRATION
OASIS LEGAL SERVICES							LEGAL SERVICES BY
1900 ADDISON SUITE 100							EXPANDING TRAINING FOR
	82-0696739	E01/G\/3\	70 200	0.			NONPROFITS TO HELP STAFF
BERKELEY, CA 94704	82-0090739	501(C)(3)	78,380.	0.			INCREASE THE LEGAL
AL OUDO LADO							
AL OTRO LADO							CAPACITY OF IMMIGRATION
511 E. SAN YSIDRO BLVD. # 333	45 0010050	E01/6\/2\					LEGAL SERVICES PROGRAMS
SAN DIEGO, CA 92173	47-2910078	501(C)(3)	77,777.	0.			THROUGH THE PLACEMENT,
							INCREASE IMMIGRATION
EL RESCATE							LEGAL SERVICES BY
1605 W. OLYMPIC BLVD. SUITE 516							EXPANDING TRAINING FOR
LOS ANGELES, CA 90015	95-4307587	501(C)(3)	77,161.	0.			NONPROFITS TO HELP STAFF
							INCREASE IMMIGRATION
SOLIDARITY CAMINO IMMIGRATION							LEGAL SERVICES BY
SERVICES - PO BOX 1198 -							EXPANDING TRAINING FOR
PLACENTIA, CA 92871	51-0490821	501(C)(3)	74,910.	0.			NONPROFITS TO HELP STAFF

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	_
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							INCREASE IMMIGRATION
SB COUNTY IMMIGRANT LEGAL DEFENSE							LEGAL SERVICES BY
CENTER - 1136 E. MONTECITO STREET							EXPANDING TRAINING FOR
- SANTA BARBARA, CA 93103	32-0549576	501(C)(3)	74,910.	0.			NONPROFITS TO HELP STAFF
							INCREASE IMMIGRATION
IMMIGRATION INSTITUTE OF THE BAY							LEGAL SERVICES BY
AREA - 58 2ND STREET, 3RD FLOOR -							EXPANDING TRAINING FOR
SAN FRANCISCO, CA 94105	94-1156554	501(C)(3)	74,910.	0.			NONPROFITS TO HELP STAFF
							INCREASE IMMIGRATION
COMMUNITY ACTION BOARD OF SANTA							LEGAL SERVICES BY
CRUZ COUNTY - 406 MAIN STREET,							EXPANDING TRAINING FOR
SUITE 207 - WATSONVILLE, CA 95076	94-2523780	501(C)(3)	74,910.	0.			NONPROFITS TO HELP STAFF
			·				INCREASE IMMIGRATION
CANAL ALLIANCE							LEGAL SERVICES BY
91 LARKSPUR ST							EXPANDING TRAINING FOR
SAN RAFAEL, CA 94901	94-2832648	501(C)(3)	74,910.	0.			NONPROFITS TO HELP STAFF
,			,				INCREASE IMMIGRATION
EAST BAY SANCTUARY COVENANT							LEGAL SERVICES BY
PO BOX 4670							EXPANDING TRAINING FOR
BERKELEY, CA 94704	94-3249753	501(C)(3)	74,910.	0.			NONPROFITS TO HELP STAFF
,			,				INCREASE THE NUMBER OF
FLORIDA IMMIGRANT COALITION							PEOPLE WHO APPLY FOR AND
2800 BISCAYNE BLVD., SUITE 300							OBTAIN UNITED STATES
MIAMI, FL 33137	20-2123833	501(C)(3)	73,263.	0.			CITIZENSHIP THROUGH
,			, , , , , , ,				INCREASE IMMIGRATION
ASIAN PACIFIC ISLANDER LEGAL							LEGAL SERVICES BY
OUTREACH - 310 8TH ST. SUITE 305 -							EXPANDING TRAINING FOR
OAKLAND, CA 94607	94-2583284	501(C)(3)	72,765.	0.			NONPROFITS TO HELP STAFF
	71 2000201		72,700.				INCREASE IMMIGRATION
SAN BERNARDINO COMMUNITY SERVICE							LEGAL SERVICES BY
CENTER, INC 788 N ARROWHEAD AVE							EXPANDING TRAINING FOR
- SAN BERNARDINO, CA 92401	33-0968298	501 (C) (3)	72,519.	0.			NONPROFITS TO HELP STAFF
DEMINISTRO, CA 72401	33 0300230	551(5)(5)	12,313.	0.			INCREASE IMMIGRATION
LOYOLA IMMIGRANT JUSTICE CLINIC							LEGAL SERVICES BY
919 ALBANY STREET							EXPANDING TRAINING FOR
	05_1642224	501/C\/3\	71 562	0.			
LOS ANGELES, CA 90015	95-1643334	DOT(C)(3)	71,563.	U.			NONPROFITS TO HELP STAFF

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
							INCREASE IMMIGRATION				
OPENING DOORS, INC.							LEGAL SERVICES BY				
1111 HOWE AVENUE, SUITE 125							EXPANDING TRAINING FOR				
SACRAMENTO, CA 95825	37-1417129	501(C)(3)	68,781.	0.			NONPROFITS TO HELP STAFF				
							INCREASE IMMIGRATION				
LA MAESTRA FAMILY CLINIC INC.							LEGAL SERVICES BY				
4060 FAIRMOUNT AVENUE							EXPANDING TRAINING FOR				
SAN DIEGO, CA 92105	33-0473171	501(C)(3)	67,885.	0.			NONPROFITS TO HELP STAFF				
							INCREASE IMMIGRATION				
IMMIGRATION CENTER FOR WOMEN AND							LEGAL SERVICES BY				
CHILDREN - 634 SOUTH SPRING STREET							EXPANDING TRAINING FOR				
SUITE 727 - LOS ANGELES, CA 90014	32-0102178	501(C)(3)	67,672.	0.			NONPROFITS TO HELP STAFF				
							INCREASE IMMIGRATION				
JEWISH FAMILY & COMMUNITY SERVICE							LEGAL SERVICES BY				
EAST BAY - 2484 SHATTUCK ST. SUITE							EXPANDING TRAINING FOR				
210 - BERKELEY, CA 94704	94-3250304	501(C)(3)	67,313.	0.			NONPROFITS TO HELP STAFF				
							INCREASE IMMIGRATION				
HUMAN RIGHTS FIRST							LEGAL SERVICES BY				
75 BROAD STREET 31ST FL							EXPANDING TRAINING FOR				
NEW YORK, NY 10004	13-3116646	501(C)(3)	64,893.	0.			NONPROFITS TO HELP STAFF				
•			,				INCREASE IMMIGRATION				
CALIFORNIA HUMAN DEVELOPMENT							LEGAL SERVICES BY				
3315 AIRWAY DR							EXPANDING TRAINING FOR				
SANTA ROSA, CA 95403	94-1653023	501(C)(3)	63,657.	0.			NONPROFITS TO HELP STAFF				
•			,				INCREASE THE NUMBER OF				
CITIZENSHIP PROJECT							PEOPLE WHO APPLY FOR AND				
710 W LAKE MEAD BLVD							OBTAIN UNITED STATES				
NORTH LAS VEGAS, NV 89030	88-0488780	501(C)(3)	62,500.	0.			CITIZENSHIP THROUGH				
,			, , , , , ,				INCREASE IMMIGRATION				
EL CONCILIO FAMILY SERVICES							LEGAL SERVICES BY				
301 SOUTH C. STREE							EXPANDING TRAINING FOR				
OXNARD, CA 93030	95-3792795	501(C)(3)	62,456.	0.			NONPROFITS TO HELP STAFF				
,,			1, 200.	-			INCREASE THE LEGAL				
YMCA OF LOS ANGELES							CAPACITY OF IMMIGRATION				
4301 W 3RD ST							LEGAL SERVICES PROGRAMS				
LOS ANGELES, CA 90020	95-1644052	501(C)(3)	47,455.	0.			THROUGH THE PLACEMENT,				
	_ 33 101133 <u>Z</u>	002(0)(0)	1,,255.	· ·	l	1					

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							INCREASE IMMIGRATION
ASIAN LAW ALLIANCE							LEGAL SERVICES BY
991 W. HEDDING ST. SUITE 202							EXPANDING TRAINING FOR
SAN JOSE, CA 95126	94-2439581	501(C)(3)	46,388.	0.			NONPROFITS TO HELP STAFF
							INCREASE IMMIGRATION
LEGAL AID FOUNDATION OF LOS							LEGAL SERVICES BY
ANGELES - 1550 W. 8TH ST LOS							EXPANDING TRAINING FOR
ANGELES, CA 90017	95-1684067	501(C)(3)	46,387.	0.			NONPROFITS TO HELP STAFF
							INCREASE IMMIGRATION
LEGAL AID SOCIETY OF SAN DIEGO							LEGAL SERVICES BY
110 SOUTH EUCLID AVENUE							EXPANDING TRAINING FOR
SAN DIEGO, CA 92114	95-1869806	501(C)(3)	46,387.	0.			NONPROFITS TO HELP STAFF
							INCREASE IMMIGRATION
MIXTECO INDIGENA COMMUNITY							LEGAL SERVICES BY
ORGANIZING PROJECT - PO BOX 20543							EXPANDING TRAINING FOR
- OXNARD, CA 93034	30-0045901	501(C)(3)	46,387.	0.			NONPROFITS TO HELP STAFF
INTERNATIONAL RESCUE COMMITTEE							INCREASE THE LEGAL
INC. IN LOS ANGELES - 625 N							CAPACITY OF IMMIGRATION
MARYLAND AVENUE - GLENDALE, CA							LEGAL SERVICES PROGRAMS
91206	13-5660870	501(C)(3)	45,378.	0.			THROUGH THE PLACEMENT,
							INCREASE IMMIGRATION
IMPORTA SANTA BARBARA							LEGAL SERVICES BY
129 E. CARRILLO ST.							EXPANDING TRAINING FOR
SANTA BARBARA, CA 93101	45-2620272	501(C)(3)	45,236.	0.			NONPROFITS TO HELP STAFF
			·				INCREASE IMMIGRATION
INLAND COUNTIES LEGAL SERVICES							LEGAL SERVICES BY
1040 IOWA AVE. SUITE 106							EXPANDING TRAINING FOR
RIVERSIDE, CA 92507	95-6124556	501(C)(3)	45,184.	0.			NONPROFITS TO HELP STAFF
,			,				INCREASE IMMIGRATION
CASA CORNELIA LAW CENTER							LEGAL SERVICES BY
2760 FIFTH AVE. SUITE 200							EXPANDING TRAINING FOR
SAN DIEGO, CA 92103	33-0719221	501(C)(3)	44,011.	0.			NONPROFITS TO HELP STAFF
,			, -,				INCREASE IMMIGRATION
IMMIGRATION RESOURCE CENTER OF SAN							LEGAL SERVICES BY
GABRIEL VALLEY - 303 W. COLORADO							EXPANDING TRAINING FOR
BLVD - MONROVIA, CA 91016	32-0267512	501(C)(3)	39,406.	0.			NONPROFITS TO HELP STAFF
			1 35,200.	••	1	1	

Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	у
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							INCREASE IMMIGRATION
ALLIANCE SAN DIEGO							LEGAL SERVICES BY
1616 NEWTON AVE.							EXPANDING TRAINING FOR
SAN DIEGO, CA 92113	26-1712580	501(C)(3)	37,456.	0.			NONPROFITS TO HELP STAFF
							INCREASE IMMIGRATION
AFRICAN COMMUNITIES PUBLIC HEALTH							LEGAL SERVICES BY
COALITION - 5757 W. CENTURY BLVD.							EXPANDING TRAINING FOR
#600 - LOS ANGELES, CA 90045	38-3834255	501(C)(3)	37,456.	0.			NONPROFITS TO HELP STAFF
							INCREASE IMMIGRATION
BET TZEDEK							LEGAL SERVICES BY
3250 WILSHIRE BLVD. 13TH FLOOR							EXPANDING TRAINING FOR
LOS ANGELES, CA 90010	23-7304205	501(C)(3)	37,455.	0.			NONPROFITS TO HELP STAFF
·			,				INCREASE IMMIGRATION
CENTRAL AMERICAN RESOURCE CENTER							LEGAL SERVICES BY
NORTHER CA - 3101 MISSION ST. STE.							EXPANDING TRAINING FOR
101 - SAN FRANCISO, CA 94122	94-3036508	501(C)(3)	37,455.	0.			NONPROFITS TO HELP STAFF
			,				INCREASE IMMIGRATION
COMMUNITY LEGAL AID SOUTHERN							LEGAL SERVICES BY
CALIFORNIA - 2101 N. TUSTIN AVE -							EXPANDING TRAINING FOR
SANTA ANA, CA 92705	95-1994337	501(C)(3)	37,455.	0.			NONPROFITS TO HELP STAFF
CONSEJO DE FEDERACIONES MEXICANAS			,				INCREASE IMMIGRATION
EN NORTH AMERICA - 125 PASEO DE LA							LEGAL SERVICES BY
PLAZA 5TH FLOOR - LOS ANGELES, CA							EXPANDING TRAINING FOR
90012	32-0154043	501(C)(3)	37,455.	0.			NONPROFITS TO HELP STAFF
		( . , ( . ,	, , , , , , , ,				INCREASE IMMIGRATION
INTERNATIONAL INSTITUTE OF LOS							LEGAL SERVICES BY
ANGELES - 3845 SELIG PLACE - LOS							EXPANDING TRAINING FOR
ANGELES CA 90031	95-1641446	501(C)(3)	37,455.	0.			NONPROFITS TO HELP STAFF
SERVICES, IMMIGRANT RIGHTS &	70 2012110		07,100.	•			INCREASE IMMIGRATION
EDUCATION NETWORK - 1415 KOLL							LEGAL SERVICES BY
CIRCLE SUITE 108 - SAN JOSE, CA							EXPANDING TRAINING FOR
95112	77-0487468	501(C)(3)	37,455.	0.			NONPROFITS TO HELP STAFF
	,, 040,400	331(0)(3)	37,433.	0.			INCREASE IMMIGRATION
SOCIAL JUSTICE COLLABORATIVE							LEGAL SERVICES BY
1832 SECOND STREET							EXPANDING TRAINING FOR
	45_5556421	501/C)/3)	37 /55	0.			
BERKELEY, CA 94710	45-5556421	DOT(C)(2)	37,455.	<u> </u>			NONPROFITS TO HELP STAFF

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIETNAMESE AMERICAN COMMUNITY							INCREASE IMMIGRATION
CENTER (EAST BAY) - 655							LEGAL SERVICES BY
INTERNATIONAL BLVD OAKLAND, CA							EXPANDING TRAINING FOR
94606	20-5358946	501(C)(3)	37,455.	0.			NONPROFITS TO HELP STAFF
							INCREASE IMMIGRATION
MEXICAN AMERICAN OPPORTUNITY							LEGAL SERVICES BY
FOUNDATION - 401 N. GARFIELD							EXPANDING TRAINING FOR
AVENUE - MONTEBELLO, CA 90640	95-2594166	501(C)(3)	37,373.	0.			NONPROFITS TO HELP STAFF
							INCREASE IMMIGRATION
COMMUNITY JUSTICE ALLIANCE							LEGAL SERVICES BY
1809 S. STREET SUITE 101 BOX 291							EXPANDING TRAINING FOR
SACRAMENTO, CA 95811	83-2059750	501(C)(3)	37,187.	0.			NONPROFITS TO HELP STAFF
							INCREASE IMMIGRATION
CENTRO LEGAL DE LA RAZA							LEGAL SERVICES BY
3400 E 12TH STREET							EXPANDING TRAINING FOR
OAKLAND, CA 94601	23-7181456	501(C)(3)	36,369.	0.			NONPROFITS TO HELP STAFF
							INCREASE IMMIGRATION
UP VALLEY FAMILY CENTERS							LEGAL SERVICES BY
1440 SPRINGS STREET							EXPANDING TRAINING FOR
ST. HELENA, CA 94574	80-0023012	501(C)(3)	36,149.	0.			NONPROFITS TO HELP STAFF
							INCREASE IMMIGRATION
COMMUNITY LEGAL SERVICES - EAST							LEGAL SERVICES BY
PALO ALTO - 1861 BAY ROAD - EAST							EXPANDING TRAINING FOR
PALO ALTO, CA 94303	22-3866910	501(C)(3)	34,708.	0.			NONPROFITS TO HELP STAFF
			·				TO INCREASE THE NUMBER OF
NEW AMERICAN PATHWAYS							PEOPLE WHO APPLY FOR AND
2300 HENDERSON MILL ROAD NE, SUITE							OBTAIN UNITED STATES
ATLANTA, GA 30345	30-0130066	501(C)(3)	33,500.	0.			CITIZENSHIP THROUGH
•			,				INCREASE IMMIGRATION
THE WATSONVILLE LAW CENTER							LEGAL SERVICES BY
315 MAIN ST. STE. 207							EXPANDING TRAINING FOR
WATSONVILLE, CA 95076	20-8157214	501(C)(3)	32,674.	0.			NONPROFITS TO HELP STAFF
,			,				INCREASE IMMIGRATION
KOREAN RESOURCE CENTER							LEGAL SERVICES BY
900 CRENSHAW BLVD., STE B							EXPANDING TRAINING FOR
LOS ANGELES, CA 90019	95-3879699	501(C)(3)	31,482.	0.			NONPROFITS TO HELP STAFF
		1	,102.	<u> </u>	1	1	

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	rage
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							INCREASE IMMIGRATION
SAN JOAQUIN COLLEGE OF LAW							LEGAL SERVICES BY
901 5TH STREET							EXPANDING TRAINING FOR
CLOVIS, CA 93612	23-7067667	501(C)(3)	30,936.	0.			NONPROFITS TO HELP STAFF
							INCREASE THE NUMBER OF
HIAS PENNSYLVANIA							PEOPLE WHO APPLY FOR AND
600 CHESTNUT STREET SUITE 500B							OBTAIN UNITED STATES
PHILADELPHIA, PA 19106	23-1405597	501(C)(3)	30,000.	0.			CITIZENSHIP THROUGH
							INCREASE THE NUMBER OF
CATHOLIC CHARITIES OF SOUTHERN							PEOPLE WHO APPLY FOR AND
COLORADO - 429 W. 10TH STREET -							OBTAIN UNITED STATES
PUEBLO, CO 81003	86-0223999	501(C)(3)	25,125.	0.			CITIZENSHIP THROUGH
•			,				INCREASE THE NUMBER OF
CATHOLIC CHARITIES OF ORANGE							PEOPLE WHO APPLY FOR AND
COUNTY - 1800 EAST 17TH STREET -							OBTAIN UNITED STATES
SANTA ANA, CA 92705	95-3031389	501(C)(3)	25,000.	0.			CITIZENSHIP THROUGH
•			, ,				INCREASE THE NUMBER OF
ARKANSAS IMMIGRANT DEFENSE							PEOPLE WHO APPLY FOR AND
1200 W WALNUT STREET, SUITE 3409							OBTAIN UNITED STATES
ROGERS, AR 72758	81-3148063	501(C)(3)	17,550.	0.			CITIZENSHIP THROUGH
CATHOLIC CHARITIES DIOCESE OF							INCREASE THE NUMBER OF
ARLINGTON - 6301 LITTLE RIVER							PEOPLE WHO APPLY FOR AND
TURNPIKE SUITE 300 - ALEXANDRIA,							OBTAIN UNITED STATES
VA 22312	54-0515706	501(C)(3)	17,000.	0.			CITIZENSHIP THROUGH
							INCREASE THE NUMBER OF
CATHOLIC CHARITIES ARCHDIOCESE OF							PEOPLE WHO APPLY FOR AND
DENVER - 6240 SMITH RD - DENVER,							OBTAIN UNITED STATES
CO 80216	84-0686679	501(C)(3)	16,800.	0.			CITIZENSHIP THROUGH
	01 0000073	301(0)(3)	10,000.	•			INCREASE THE NUMBER OF
CATHOLIC CHARITIES OF ST.							PEOPLE WHO APPLY FOR AND
PETERSBURG - 6363 NINTH AVE, NORTH							OBTAIN UNITED STATES
- ST. PETERSBURG, FL 33710	59-0875805	501(C)(3)	16,250.	0.			CITIZENSHIP THROUGH
CATHOLIC SOCIAL SERVICES	35 0073003	501(0)(3)	10,230.	0.			INCREASE THE NUMBER OF
ARCHDIOCESE OF PHILADELPHIA - 222							PEOPLE WHO APPLY FOR AND
							OBTAIN UNITED STATES
N. 17TH STREET - PHILADELPHIA, PA 19103	23_1252062	501(0)(3)	15 001	0.			
13103	23-1352063	DOT(C)(3)	15,001.	l 0.			CITIZENSHIP THROUGH

Part II Continuation of Grants and Other A				,	, , , , , , , , , , , , , , , , , , , ,	<u> </u>	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							INCREASE THE NUMBER OF
AFRICAN CULTURAL ALLIANCE OF NORTH							PEOPLE WHO APPLY FOR AND
AMERICA - 5530 CHESTER AVENUE -							OBTAIN UNITED STATES
PHILADELPHIA, PA 19143	23-3062024	501(C)(3)	15,000.	0.			CITIZENSHIP THROUGH
							INCREASE THE NUMBER OF
CATHOLIC CHARITIES OF ST.							PEOPLE WHO APPLY FOR AND
PETERSBURG - 6363 9TH AVENUE NORTH							OBTAIN UNITED STATES
- ST. PETERSBURG, FL 33710	59-0875805	501(C)(3)	15,000.	0.			CITIZENSHIP THROUGH
							TO INCREASE THE NUMBER OF
PROMISE ARIZONA							PEOPLE WHO APPLY FOR AND
701 SOUTH 1ST STREET							OBTAIN UNITED STATES
PHOENIX, AZ 85004	45-2081460	501(C)(3)	10,000.	0.			CITIZENSHIP THROUGH
							INCREASE THE NUMBER OF
CATHOLIC CHARITIES OF THE DIOCESE							PEOPLE WHO APPLY FOR AND
OF STOCKTON - 1106 N EL DORADO ST							OBTAIN UNITED STATES
- STOCKTON, CA 95202	94-1629114	501(C)(3)	8,303.	0.			CITIZENSHIP THROUGH
			,				COVER THE COSTS OF
HISPANIC AFFAIRS PROJECT							ATTENDING CLINIC
504 N 1ST STREET							CONVENING. INCREASE THE
MONTROSE, CO 81402	27-1276653	501(C)(3)	8,000.	0.			NUMBER OF PEOPLE WHO
,			, ,				INCREASE THE NUMBER OF
ECUMENICAL MINISTIRES OF OREGON							PEOPLE WHO APPLY FOR AND
7931 NE HALSEY ST. STE. 302							OBTAIN UNITED STATES
PORTLAND, OR 97213	93-0625359	501(C)(3)	7,801.	0.			CITIZENSHIP THROUGH
,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				INCREASE THE LEGAL
CENTRAL CALIFORNIA LEGAL SERVICES							CAPACITY OF IMMIGRATION
2115 KERN STREET, SUITE 200							LEGAL SERVICES PROGRAMS
FRESNO, CA 93721	94-1631809	501(C)(3)	6,000.	0.			THROUGH THE PLACEMENT,
TREBRO, CR 33721	J4 1031003	301(0)(3)	0,000.	•			TO INCREASE THE NUMBER OF
LUTHERAN FAMILY SERVICES ROCKY							PEOPLE WHO APPLY FOR AND
MOUNTAINS - 1035 OSAGE STREET, STE							OBTAIN UNITED STATES
	84-0775550	501 (C) (3)	6 000	0.			CITIZENSHIP THROUGH
700 - DENVER, CO 80204	04-0//5550	OOT(C)(3)	6,000.	0.			CITIZENSHIP THROUGH

NAVEL SUBSIDY AWARDS	16	24,000.	0.		
AVEL SUBSIDY AWARDS	16	24,000.	0.		
Part IV Supplemental Information. Provide the information	n required in Part I, lin	e 2; Part III, column	(b); and any other ac	l Iditional information.	
ART I, LINE 2:					
RANTS ARE MONITORED BY PERIODIC	NARRATIVE	REPORTS, S	SITE VISITS	, AND	
TATISTICAL REPORTS FOR THE PROJ	ECT. STIPEN	IDS ARE AWA	ARDED TO A	SMALL NUMBER	
F CLINIC AFFILIATES TO GO TO TH	E BORDER OR	TO DILEY.	TEXAS. TO	SUPPORT THE	
OLUNTEERS' EFFORTS. MINIMAL MON					
SHOWING BITOKID: MIKIMID HOW	1101(11(0 15	THE CITTLE !			
ART II, LINE 1, COLUMN (H):					
	NIM - CAMUOI T	C CHARTET		NOET EG	
AME OF ORGANIZATION OR GOVERNME	NT: CATHOLI	C CHARITIE	LOS A CLUS A	NGELES	

APPLY FOR AND OBTAIN UNITED STATES CITIZENSHIP THROUGH NATURALIZATION AND ESTABLISH A CITIZENSHIP COLLABORATIVE IN NAC FUNDED COMMUNITIES. INCREASE IMMIGRATION LEGAL SERVICES BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF LEGAL ACCESS PROGRAMS.

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY LEARNING PARTNERSHIP (H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE LEGAL CAPACITY OF IMMIGRATION LEGAL SERVICES PROGRAMS THROUGH THE PLACEMENT, TRAINING AND SUPPORT OF COMMUNITY COLLEGE STUDENT FELLOWS THAT GAIN HANDS-ON EXPERIENCE ON BEING ABLE TO RECEIVE DEPARTMENT OF JUSTICE ACCREDITATION.

### NAME OF ORGANIZATION OR GOVERNMENT:

COUNCIL ON AMERICAN ISLAMIC RELATIONS - CALIFORNIA

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF LEGAL ACCESS PROGRAMS

# NAME OF ORGANIZATION OR GOVERNMENT:

CATHOLIC CHARITIES COMMUNITY SERVICES OF PHOENIX

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE NUMBER OF PEOPLE WHO APPLY FOR AND OBTAIN UNITED STATES CITIZENSHIP THROUGH NATURALIZATION AND ESTABLISH A CITIZENSHIP COLLABORATIVE IN NAC FUNDED COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: UFW FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE LEGAL CAPACITY OF IMMIGRATION LEGAL SERVICES PROGRAMS THROUGH THE PLACEMENT, TRAINING AND SUPPORT OF COMMUNITY COLLEGE STUDENT FELLOWS THAT GAIN HANDS-ON

EXPERIENCE ON BEING ABLE TO RECEIVE DEPARTMENT OF JUSTICE ACCREDITATION.

INCREASE IMMIGRATION LEGAL SERVICES BY EXPANDING TRAINING FOR NONPROFITS

TO HELP STAFF MEMBERS BECOME ACCREDITED REPRESENTATIVES UNDER THE U.S.

DEPARTMENT OF JUSTICE OFFICE OF LEGAL ACCESS PROGRAMS.

NAME OF ORGANIZATION OR GOVERNMENT: ASIAN AMERICAN ADVANCING JUSTICE - LA

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: COALITION FOR HUMANE IMMIGRANT RIGHTS

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS. INCREASE THE LEGAL CAPACITY OF IMMIGRATION LEGAL

SERVICES PROGRAMS THROUGH THE PLACEMENT, TRAINING AND SUPPORT OF

COMMUNITY COLLEGE STUDENT FELLOWS THAT GAIN HANDS-ON EXPERIENCE ON BEING

ABLE TO RECEIVE DEPARTMENT OF JUSTICE ACCREDITATION.

NAME OF ORGANIZATION OR GOVERNMENT: POMONA ECONOMIC OPPORTUNITY CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: BUILDING CAPACITY THROUGH

CITIZENSHIP AND INTEGRATION PROJECT. INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS. INCREASE THE LEGAL CAPACITY OF IMMIGRATION LEGAL

SERVICES PROGRAMS THROUGH THE PLACEMENT, TRAINING AND SUPPORT OF

COMMUNITY COLLEGE STUDENT FELLOWS THAT GAIN HANDS-ON EXPERIENCE ON BEING ABLE TO RECEIVE DEPARTMENT OF JUSTICE ACCREDITATION.

NAME OF ORGANIZATION OR GOVERNMENT: EDUCATION AND LEADERSHIP FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE LEGAL CAPACITY OF

IMMIGRATION LEGAL SERVICES PROGRAMS THROUGH THE PLACEMENT, TRAINING AND

SUPPORT OF COMMUNITY COLLEGE STUDENT FELLOWS THAT GAIN HANDS-ON

EXPERIENCE ON BEING ABLE TO RECEIVE DEPARTMENT OF JUSTICE ACCREDITATION.

INCREASE IMMIGRATION LEGAL SERVICES BY EXPANDING TRAINING FOR NONPROFITS

TO HELP STAFF MEMBERS BECOME ACCREDITED REPRESENTATIVES UNDER THE U.S.

DEPARTMENT OF JUSTICE OFFICE OF LEGAL ACCESS PROGRAMS.

### NAME OF ORGANIZATION OR GOVERNMENT:

UNIVERSITY OF CALIFORNIA IMMIGRANT LEGAL SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

# NAME OF ORGANIZATION OR GOVERNMENT:

WORLD RELIEF CORP OF NAT'L ASSOCIATION OF EVANGELICALS

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: CENTRO LA FAMILIA ADVOCACY SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE LEGAL CAPACITY OF

IMMIGRATION LEGAL SERVICES PROGRAMS THROUGH THE PLACEMENT, TRAINING AND

SUPPORT OF COMMUNITY COLLEGE STUDENT FELLOWS THAT GAIN HANDS-ON

EXPERIENCE ON BEING ABLE TO RECEIVE DEPARTMENT OF JUSTICE ACCREDITATION.

INCREASE IMMIGRATION LEGAL SERVICES BY EXPANDING TRAINING FOR NONPROFITS

TO HELP STAFF MEMBERS BECOME ACCREDITED REPRESENTATIVES UNDER THE U.S.

DEPARTMENT OF JUSTICE OFFICE OF LEGAL ACCESS PROGRAMS.

NAME OF ORGANIZATION OR GOVERNMENT:

CATHOLIC CHARITIES LEGAL SERVICES - ARCHDIOCESE OF MIAMI

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE NUMBER OF PEOPLE WHO

APPLY FOR AND OBTAIN UNITED STATES CITIZENSHIP THROUGH NATURALIZATION AND

ESTABLISH A CITIZENSHIP COLLABORATIVE IN NAC FUNDED COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT:

INTERNATIONAL RESCUE COMMITTEE IN NORTHERN CA

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: JEWISH FAMILY SERVICE OF SAN DIEGO

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: CATHOLIC CHARITIES OF DALLAS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE NUMBER OF PEOPLE WHO

APPLY FOR AND OBTAIN UNITED STATES CITIZENSHIP THROUGH NATURALIZATION AND ESTABLISH A CITIZENSHIP COLLABORATIVE IN NAC FUNDED COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT:

CATHOLIC CHARITIES ARCH OF GALVESTON-HOUSTON

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE NUMBER OF PEOPLE WHO

APPLY FOR AND OBTAIN UNITED STATES CITIZENSHIP THROUGH NATURALIZATION AND

ESTABLISH A CITIZENSHIP COLLABORATIVE IN NAC FUNDED COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: CARECEN

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE LEGAL CAPACITY OF

IMMIGRATION LEGAL SERVICES PROGRAMS THROUGH THE PLACEMENT, TRAINING AND

SUPPORT OF COMMUNITY COLLEGE STUDENT FELLOWS THAT GAIN HANDS-ON

EXPERIENCE ON BEING ABLE TO RECEIVE DEPARTMENT OF JUSTICE ACCREDITATION.

INCREASE IMMIGRATION LEGAL SERVICES BY EXPANDING TRAINING FOR NONPROFITS

TO HELP STAFF MEMBERS BECOME ACCREDITED REPRESENTATIVES UNDER THE U.S.

DEPARTMENT OF JUSTICE OFFICE OF LEGAL ACCESS PROGRAMS.

NAME OF ORGANIZATION OR GOVERNMENT: LIBRERIA DEL PUEBLO

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: SAN FRANCISCO LABOR COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

CALIFORNIA RURAL LEGAL ASSISTANCE FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: HUMAN AGENDA

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: THE FRESNO CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE LEGAL CAPACITY OF

IMMIGRATION LEGAL SERVICES PROGRAMS THROUGH THE PLACEMENT, TRAINING AND

SUPPORT OF COMMUNITY COLLEGE STUDENT FELLOWS THAT GAIN HANDS-ON

EXPERIENCE ON BEING ABLE TO RECEIVE DEPARTMENT OF JUSTICE ACCREDITATION.

INCREASE IMMIGRATION LEGAL SERVICES BY EXPANDING TRAINING FOR NONPROFITS

TO HELP STAFF MEMBERS BECOME ACCREDITED REPRESENTATIVES UNDER THE U.S.

DEPARTMENT OF JUSTICE OFFICE OF LEGAL ACCESS PROGRAMS.

NAME OF ORGANIZATION OR GOVERNMENT: PARS EQUALITY CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: ALIANCE FOR AFRICAN ASSISTANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

NAME OF ORGANIZATION OR GOVERNMENT: ACCESS CALIFORNIA SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: OASIS LEGAL SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: AL OTRO LADO

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE LEGAL CAPACITY OF

IMMIGRATION LEGAL SERVICES PROGRAMS THROUGH THE PLACEMENT, TRAINING AND

SUPPORT OF COMMUNITY COLLEGE STUDENT FELLOWS THAT GAIN HANDS-ON

EXPERIENCE ON BEING ABLE TO RECEIVE DEPARTMENT OF JUSTICE ACCREDITATION.

INCREASE IMMIGRATION LEGAL SERVICES BY EXPANDING TRAINING FOR NONPROFITS

TO HELP STAFF MEMBERS BECOME ACCREDITED REPRESENTATIVES UNDER THE U.S.

DEPARTMENT OF JUSTICE OFFICE OF LEGAL ACCESS PROGRAMS.

NAME OF ORGANIZATION OR GOVERNMENT: EL RESCATE

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

SOLIDARITY CAMINO IMMIGRATION SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

SB COUNTY IMMIGRANT LEGAL DEFENSE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: IMMIGRATION INSTITUTE OF THE BAY AREA

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

COMMUNITY ACTION BOARD OF SANTA CRUZ COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: CANAL ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: EAST BAY SANCTUARY COVENANT

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: FLORIDA IMMIGRANT COALITION

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE NUMBER OF PEOPLE WHO

APPLY FOR AND OBTAIN UNITED STATES CITIZENSHIP THROUGH NATURALIZATION AND

ESTABLISH A CITIZENSHIP COLLABORATIVE IN NAC FUNDED COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: ASIAN PACIFIC ISLANDER LEGAL OUTREACH

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

SAN BERNARDINO COMMUNITY SERVICE CENTER, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS. INCREASE THE LEGAL CAPACITY OF IMMIGRATION LEGAL

SERVICES PROGRAMS THROUGH THE PLACEMENT, TRAINING AND SUPPORT OF

COMMUNITY COLLEGE STUDENT FELLOWS THAT GAIN HANDS-ON EXPERIENCE ON BEING

ABLE TO RECEIVE DEPARTMENT OF JUSTICE ACCREDITATION.

NAME OF ORGANIZATION OR GOVERNMENT: LOYOLA IMMIGRANT JUSTICE CLINIC

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: OPENING DOORS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: LA MAESTRA FAMILY CLINIC INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

IMMIGRATION CENTER FOR WOMEN AND CHILDREN

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

JEWISH FAMILY & COMMUNITY SERVICE EAST BAY

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: HUMAN RIGHTS FIRST

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: CALIFORNIA HUMAN DEVELOPMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: CITIZENSHIP PROJECT

NAME OF ORGANIZATION OR GOVERNMENT: EL CONCILIO FAMILY SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE LEGAL CAPACITY OF

IMMIGRATION LEGAL SERVICES PROGRAMS THROUGH THE PLACEMENT, TRAINING AND

SUPPORT OF COMMUNITY COLLEGE STUDENT FELLOWS THAT GAIN HANDS-ON

EXPERIENCE ON BEING ABLE TO RECEIVE DEPARTMENT OF JUSTICE ACCREDITATION.

INCREASE IMMIGRATION LEGAL SERVICES BY EXPANDING TRAINING FOR NONPROFITS

TO HELP STAFF MEMBERS BECOME ACCREDITED REPRESENTATIVES UNDER THE U.S.

NAME OF ORGANIZATION OR GOVERNMENT: ASIAN LAW ALLIANCE

DEPARTMENT OF JUSTICE OFFICE OF LEGAL ACCESS PROGRAMS.

NAME OF ORGANIZATION OR GOVERNMENT: YMCA OF LOS ANGELES

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: LEGAL AID FOUNDATION OF LOS ANGELES

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: LEGAL AID SOCIETY OF SAN DIEGO

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

MIXTECO INDIGENA COMMUNITY ORGANIZING PROJECT

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

INTERNATIONAL RESCUE COMMITTEE INC. IN LOS ANGELES

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE LEGAL CAPACITY OF

IMMIGRATION LEGAL SERVICES PROGRAMS THROUGH THE PLACEMENT, TRAINING AND

SUPPORT OF COMMUNITY COLLEGE STUDENT FELLOWS THAT GAIN HANDS-ON

EXPERIENCE ON BEING ABLE TO RECEIVE DEPARTMENT OF JUSTICE ACCREDITATION.

INCREASE IMMIGRATION LEGAL SERVICES BY EXPANDING TRAINING FOR NONPROFITS

TO HELP STAFF MEMBERS BECOME ACCREDITED REPRESENTATIVES UNDER THE U.S.

DEPARTMENT OF JUSTICE OFFICE OF LEGAL ACCESS PROGRAMS.

NAME OF ORGANIZATION OR GOVERNMENT: IMPORTA SANTA BARBARA

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: INLAND COUNTIES LEGAL SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: CASA CORNELIA LAW CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

IMMIGRATION RESOURCE CENTER OF SAN GABRIEL VALLEY

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: ALLIANCE SAN DIEGO

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

AFRICAN COMMUNITIES PUBLIC HEALTH COALITION

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: BET TZEDEK

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

CENTRAL AMERICAN RESOURCE CENTER NORTHER CA

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

COMMUNITY LEGAL AID SOUTHERN CALIFORNIA

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

CONSEJO DE FEDERACIONES MEXICANAS EN NORTH AMERICA

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES
BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

INTERNATIONAL INSTITUTE OF LOS ANGELES

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES
BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

SERVICES, IMMIGRANT RIGHTS & EDUCATION NETWORK

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: SOCIAL JUSTICE COLLABORATIVE

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

VIETNAMESE AMERICAN COMMUNITY CENTER (EAST BAY)

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

MEXICAN AMERICAN OPPORTUNITY FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY JUSTICE ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: CENTRO LEGAL DE LA RAZA

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: UP VALLEY FAMILY CENTERS

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

04-01-23

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT:

COMMUNITY LEGAL SERVICES - EAST PALO ALTO

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: NEW AMERICAN PATHWAYS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO INCREASE THE NUMBER OF PEOPLE WHO

APPLY FOR AND OBTAIN UNITED STATES CITIZENSHIP THROUGH NATURALIZATION AND

ESTABLISH A CITIZENSHIP COLLABORATIVE IN NAC FUNDED COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: THE WATSONVILLE LAW CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: KOREAN RESOURCE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE IMMIGRATION LEGAL SERVICES

BY EXPANDING TRAINING FOR NONPROFITS TO HELP STAFF MEMBERS BECOME

ACCREDITED REPRESENTATIVES UNDER THE U.S. DEPARTMENT OF JUSTICE OFFICE OF

LEGAL ACCESS PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: SAN JOAQUIN COLLEGE OF LAW

NAME OF ORGANIZATION OR GOVERNMENT:

CATHOLIC CHARITIES DIOCESE OF ARLINGTON

NAME OF ORGANIZATION OR GOVERNMENT: CATHOLIC CHARITIES OF ST. PETERSBURG

NAME OF ORGANIZATION OR GOVERNMENT: PROMISE ARIZONA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO INCREASE THE NUMBER OF PEOPLE WHO

APPLY FOR AND OBTAIN UNITED STATES CITIZENSHIP THROUGH NATURALIZATION AND

ESTABLISH A CITIZENSHIP COLLABORATIVE IN NAC FUNDED COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT:

CATHOLIC CHARITIES OF THE DIOCESE OF STOCKTON

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE NUMBER OF PEOPLE WHO

APPLY FOR AND OBTAIN UNITED STATES CITIZENSHIP THROUGH NATURALIZATION AND

ESTABLISH A CITIZENSHIP COLLABORATIVE IN NAC FUNDED COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: HISPANIC AFFAIRS PROJECT

(H) PURPOSE OF GRANT OR ASSISTANCE: COVER THE COSTS OF ATTENDING CLINIC

CONVENING. INCREASE THE NUMBER OF PEOPLE WHO APPLY FOR AND OBTAIN UNITED

STATES CITIZENSHIP THROUGH NATURALIZATION AND ESTABLISH A CITIZENSHIP

COLLABORATIVE IN NAC FUNDED COMMUNITIES.

NAME OF ORGANIZATION OR GOVERNMENT: ECUMENICAL MINISTIRES OF OREGON

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE NUMBER OF PEOPLE WHO

APPLY FOR AND OBTAIN UNITED STATES CITIZENSHIP THROUGH NATURALIZATION AND

ESTABLISH A CITIZENSHIP COLLABORATIVE IN NAC FUNDED COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: CENTRAL CALIFORNIA LEGAL SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: INCREASE THE LEGAL CAPACITY OF

# SCHEDULE J (Form 990)

Department of the Treasury

**Compensation Information** 

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

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

Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

2023

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

CATHOLIC LEGAL IMMIGRATION NETWORK, INC.

 $Employer\ identification\ number \\ 52-1584951$ 

Pa	art I Questions Regarding Compensation								
			Yes	No					
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,								
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.								
	First-class or charter travel Housing allowance or residence for personal use								
	Travel for companions Payments for business use of personal residence								
	Tax indemnification and gross-up payments Health or social club dues or initiation fees								
	Discretionary spending account Personal services (such as maid, chauffeur, chef)								
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or								
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b							
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	2							
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?								
3	Indicate which, if any, of the following the 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.								
	Compensation committee								
	Independent compensation consultant  X Compensation survey or study								
	Form 990 of other organizations  X 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:								
а		4a		x					
h	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X					
c		4c		X					
Ŭ	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	-10							
	The totally of lines fate, list the persons and provide the applicable amounts for each from the art in.								
	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:								
а	The organization?	5a		X					
b	Any related organization?	5b		X					
	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:								
а	The organization?	6a		<u>X</u>					
	Any related organization?	6b		Х					
	If "Yes" on line 6a or 6b, describe in Part III.								
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments								
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X					
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	8		X					
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in								
	Regulations section 53.4958-6(c)?	9		1					

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

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

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

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

		(B) Breakdown of W	I-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) ANNA MARIE GALLAGHER	(i)	165,476.	0.	0.	3,000.	17,464.	185,940.	0.
EXECUTIVE DIRECTOR & SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
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Schedule J (Form 990) 2023	CATHOLIC LEGA	L IMMIGRATION NETWORK	C, INC.	52-1584951	Page 3
Part III Supplemental Informa	tion				
		r Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b,	6a, 6b, 7, and 8, and for Part II. Also complet	e this part for any additional informati	ion.

# SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

CATHOLIC LEGAL IMMIGRATION NETWORK, INC.

Employer identification number 52-1584951

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

THE FORM 990 IS PREPARED BY THE OUTSIDE ACCOUNTANTS AND THEN REVIEWED BY

THE MANAGEMENT TEAM AND FINANCE COMMITTEE. THE 990 IS FORWARDED TO THE FULL

BOARD OF DIRECTORS BEFORE IT IS SIGNED AND FILED WITH THE IRS.

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

BOARD MEMBERS ARE REQUIRED TO FILL OUT AND SIGN THAT THEY HAVE RECEIVED A

COPY OF THE POLICY, AND REPORT ANY CONFLICTS OR POTENTIAL CONFLICTS OF

INTEREST. THE EXECUTIVE DIRECTOR FOLLOWS UP TO ENSURE COMPLETION AND

ENFORCEMENT OF THE POLICY.

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

THE COMPENSATION OF THE EXECUTIVE DIRECTOR IS DETERMINED BY CLINIC'S BOARD OF DIRECTORS AFTER A REVIEW OF COMPARABLE NON-PROFIT ORGANIZATIONS. EVERY THREE TO FOUR YEARS, CLINIC HIRES A PROFESSIONAL EXTERNAL CONSULTING AGENCY TO CONDUCT A SALARY ANALYSIS OF STAFF COMPENSATION, INCLUDING THE EXECUTIVE DIRECTOR'S. THE BOARD REVIEWS THE INFORMATION, AND USES THE RESULTS TO DETERMINE THE EXECUTIVE DIRECTOR'S SALARY IN CONJUNCTION WITH HER PERFORMANCE EVALUATION, WHICH IS LED BY THE BOARD CHAIR. ANY INCREASES TO THE EXECUTIVE DIRECTOR'S SALARY IS VOTED ON BY THE FULL BOARD IN ONE OF TWO WAYS: 1) A VOTE TAKEN SPECIFICALLY ON A SALARY INCREASE FOR THE EXECUTIVE DIRECTOR DUE TO THE COMPENSATION REVIEW OR OTHER FACTORS; OR 2) A VOTE TAKEN BY THE FULL BOARD TO APPROVE THE BUDGET WITH INCLUDES STANDARD STAFF COMPENSATION ADJUSTMENTS.

CLINIC HIRED SPECTRUM HR SOLUTIONS IN MARCH 2021 TO CONDUCT A SALARY

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2023	Page 2
Name of the organization CATHOLIC LEGAL IMMIGRATION NETWORK, INC.	Employer identification number 52-1584951
ANALYSIS OF STAFF COMPENSATION INCLUDING THE EXECUTIVE DIR	ECTOR. THE LAST
COMPENSATION REVIEW TOOK PLACE IN MAY 2024.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
CA, FL, GA, HI, IL, KY, MD, MA, MI, MN, NH, NJ, NM, NY, NC, OR, PA, RI, SC, U	T,VA,WV,WI
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT O	F INTEREST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC U	PON REQUEST.

# **SCHEDULE R** (Form 990)

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection

Employer identification number

CATHOLIC LEGAL	IMMIGRATION NETWO	RK, INC.				52-15849	951	
Part I Identification of Disregarded Entities. Comple	te if the organization answered "Yes"	on Form 990, Part IV, line 33	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) or Total inco	me End-of-yea			controlling	9
	_							
	-							
	-							
Part II Identification of Related Tax-Exempt Organizations during the tax year.	itions. Complete if the organization	answered "Yes" on Form 990	J, Part IV, line 34, t	because it had one	or more	related tax-exe	mpt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section			cont	<b>g)</b> 512(b)(13) rolled tity?
				501(c)(3))	G3 MY707		Yes	No
CATHOLIC IMMIGRATION NETWORK, INC 26-2808223, 8757 GEORGIA AVE, SUITE 850,					CATHOLIC LEGA IMMIGRATION			
SILVER SPRING, MD 20910	IMMIGRATION	DISTRICT OF COLUMBIA	501(C)(3)	LINE 7	NETWOR	K, INC.	X	
	_							

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

		0 1 1 20 1 1	"\ "	10/11 0/1
	Identification of Related Organizations Taxable as a Partnership.	Complete if the organization answered	"Yes" on Form 990, Pai	irt IV, line 34, because it had one or more related
	organizations treated as a partnership during the tax year.			

			ı	1		1	_		•		
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disproportionate		Code V-UBI	General	Percentage ownership
or related organization		(state or foreign	entity	(related, unrelated, excluded from tax under sections 512-514)	income	end-of-year assets	alloca	itions?	amount in box 20 of Schedule K-1 (Form 1065)	partner	ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0
											<u> </u>
							<u> </u>				+

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(t contr ent	tion b)(13) rolled tity?
		country) Of trust)		233013		Yes	No		
	-							'	
								-	

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b	Gift, grant, or capital contribution to related organization(s)				1b	X				
С	Gift, grant, or capital contribution from related organization(s)				1c	Х				
	Loans or loan guarantees to or for related organization(s)				1d	X				
e Loans or loan guarantees by related organization(s)										
f	Dividends from related organization(s)				1f	X				
	g Sale of assets to related organization(s)				1g	X				
h	Purchase of assets from related organization(s)				1h	X				
i	i Exchange of assets with related organization(s)									
j Lease of facilities, equipment, or other assets to related organization(s)										
	Lease of facilities, equipment, or other assets from related organization(s)				1k	X				
I Performance of services or membership or fundraising solicitations for related organization(s)										
	n Performance of services or membership or fundraising solicitations by related organization				1m	X				
	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	X				
0	Sharing of paid employees with related organization(s)				10	X				
						77				
	Reimbursement paid to related organization(s) for expenses				1p	<u> X</u>				
q	Reimbursement paid by related organization(s) for expenses				1q	X				
r	Other transfer of cash or property to related organization(s)				1r	X				
	Other transfer of cash or property from related organization(s)				1s	X				
2	If the answer to any of the above is "Yes," see the instructions for information on who must	<u>ıst complete thi</u>	s line, including covered re	lationships and transaction thresholds.						
		(b) ransaction type (a-s)	(c) Amount involved	(d) Method of determining amount inv	rolved					
(1)										
(2)										
(3)										
<u>, , , , , , , , , , , , , , , , , , , </u>										
(4)										
,										
(5)										
,										
(6)										
33216	63 09-28-23			Schedule	R (Form 9	90) 2023				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- ate tions?	General manage partne	(k) Percentage ownership
			,	100 110		100	110		
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	-								000) 0000

Schedule R	(Form 990) 2023	CATHOLIC	LEGAL	IMMIGRATION	NETWORK,	INC. 52-1584951	Page 5
Part VII	(Form 990) 2023  Supplemental Infor	mation					
	Provide additional inform		to acception	a an Cabadula D. Caa in	atm rations		
	Provide additional inform	ation for responses	to question:	s on schedule R. See in	Structions.		