WEGNER CPAS LLP 419 N LEE ST ALEXANDRIA, VA 22314-2301

> LEGAL PRIORITIES, INC. 6 LIBERTY SQUARE, 6079 BOSTON, MA 02109

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Form	990
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** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information. 2022 Open to Public Inspection

Depa Inter	artment of nal Reven	Item t of the Treasury al Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.			Inspection	
AI	A For the 2022 calendar year, or tax year beginning and ending					
Β	Check if applicable	C Name of organization D Employer identification number			ation number	
	Addres		L PRIORITIES, INC.			
F	Change Doing business as 85-102419					8
F	Initial return		and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	<u> </u>
	Final	6 Т.Т	BERTY SQUARE	6079	321-508-5	837
L	return/ termin- ated	_	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,458,617.
	Amend		ON, MA 02109		H(a) Is this a group ret	
	Applica		nd address of principal officer: DR • ALFREDO PARRA		for subordinates?	
L	pendin		AS C ABOVE		H(b) Are all subordinates inc	
1	Tax-exe	empt status:) or 527	1 ''	ist. See instructions
	Websit		LPRIORITIES.ORG	/ 0 02.	H(c) Group exemption	
			X Corporation Trust Association Other	L Year		State of legal domicile: MA
	art I	Summary		1		
	1	Briefly describ	be the organization's mission or most significant activities: OUR	MISSIO	N IS TO COND	UCT LEGAL
Governance	1	RESEARC	H THAT TACKLES THE WORLD'S MOST P	RESSING	F PROBLEMS. 1	HIS
nar	2	Check this bo				
Vel	3 1	Number of vot	ting members of the governing body (Part VI, line 1a)		3	5
		Number of inc	lependent voting members of the governing body (Part VI, line 1b)			3
ې د						5
Activities	6		of volunteers (estimate if necessary)			11
Ç	7a ⁻		d business revenue from Part VIII, column (C), line 12			0.
_ <	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11		7b	0.
					Prior Year	Current Year
đ	8	Contributions	and grants (Part VIII, line 1h)		750,428.	1,458,617.
Revenue	9 1	Program servi	ce revenue (Part VIII, line 2g)		0.	0.
eve	10 1	Investment ind	come (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
£	11 (Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		750,428.	1,458,617.
	13 (Grants and sir	milar amounts paid (Part IX, column (A), lines 1-3)		110,454.	91,435.
	14	Benefits paid	to or for members (Part IX, column (A), line 4)		0.	0.
Se	15 \$	Salaries, othe	r compensation, employee benefits (Part IX, column (A), lines 5-10)		154,378.	495,512.
use.	16a I	Professional f	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) <u>10, 2</u>		0.	0.
Expense	. b ⁻	Total fundrais	ing expenses (Part IX, column (D), line 25) 10 , 2	255.		
ш	17 (Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)		174,217.	557,696.
			es. Add lines 13-17 (must equal Part IX, column (A), line 25)		439,049.	1,144,643.
	19	Revenue less	expenses. Subtract line 18 from line 12		311,379.	313,974.
Net Assets or				Be	ginning of Current Year	End of Year
sets	20		Part X, line 16)		480,998.	792,627.
tAs	21		; (Part X, line 26)		67,174.	64,829.
ER .	22		fund balances. Subtract line 21 from line 20		413,824.	727,798.
Pa	art II	Signature	e RIOCK			

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

Sign	Signature of officer		Date			
Here	DR. ALFREDO PARRA, CHIEF	OF STAFF				
	Type or print name and title					
	Print/Type preparer's name	Preparer's signature	Date Check	PTIN		
Paid	GLENN MILLER, CPA	GLENN MILLER, CPA	10/05/23 self-employed	P00086726		
Preparer	Firm's name WEGNER CPAS LLP		Firm's EIN 39-	0974031		
Use Only	Firm's address 419 N LEE ST					
	ALEXANDRIA, VA 22	314-2301	Phone no. (703) 519-0990		
May the IF	May the IRS discuss this return with the preparer shown above? See instructions					
232001 12-13	232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)					

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2022) LEGAL PRIORITIES, INC.	85-1024198	Page 2
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	X
1	Briefly describe the organization's mission: OUR MISSION IS TO CONDUCT LEGAL RESEARCH THAT TACKLES	THE WORLD'S MO	ናጥ
	PRESSING PROBLEMS. THIS CURRENTLY LEADS US TO FOCUS ON		
	OF FUTURE GENERATIONS. OUR VISION IS A WORLD WITH EFFE		
	PROTECT THE INTEREST OF FUTURE GENERATIONS.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	XYes	No No
•	If "Yes," describe these new services on Schedule O.		v .
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service If "Yes," describe these changes on Schedule O.	s? Yes	X No
4	Describe the organization's program service accomplishments for each of its three largest program services,	as measured by expenses.	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to o		ıd
	revenue, if any, for each program service reported.	· · ·	
4a		evenue \$	0.)
	RESEARCH:		
	- WE PUBLISHED 7 PEER-REVIEWED ACADEMIC PAPERS (PLUS 3		, 7
	WORKING PAPERS, A NEW CHAPTER OF OUR RESEARCH AGENDA, A BLOG PIECES.	AND 6 SHORTER	
	- WE HAVE ONE BOOK UNDER CONTRACT WITH A PRESTIGIOUS AG	ADEMIC DDECC	
	- WE WROTE MULTIPLE REPORTS ON TOPICS SUCH AS LEGAL STI		
	ADDRESS BIORISK OR THE RELEVANCE OF INTERNATIONAL LAW		
	EXISTENTIAL RISKS.		
	00.072		0
4b	(Code:) (Expenses \$234,642. including grants of \$89,973.) (R OUTREACH:	evenue \$	0.)
	- WE RAN THE FIRST EDITION OF OUR LEGAL PRIORITIES SUM	MER INSTITUTE	Δ
	1-WEEK SUMMER PROGRAM (WORKSHOPS, TALKS, PANELS) FOR LA		
	RECENT GRADUATES WHO WANT TO LEARN MORE ABOUT OUR PRIOR		
	HTTPS://WWW.LEGALPRIORITIES.ORG/INSTITUTE22.		
	- WE RAN A WRITING COMPETITION ON "IMPROVING COST-BENE]	FIT ANALYSIS TO	0
	ACCOUNT FOR EXISTENTIAL AND CATASTROPHIC RISKS".		
	- WE ORGANIZED THE FIRST-EVER ACADEMIC CONFERENCE ON LO	ONGTERMISM AND	
	THE LAW: HTTPS://WWW.LONGTERMISMANDTHELAW.COM/.		
4c	(Code:) (Expenses \$ including grants of \$) (R	evenue \$)
4d	Other program services (Describe on Schedule O.)	N	
4e	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 938,895.)	
-10		Form 9	90 (2022)
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	3		

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 Form 990 (2022)
 LEGAL PRIORITIES, INC.

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
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		<u> </u>
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		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
	Schedule D, Part III	8		<u> </u>
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?			v
10	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			x
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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,	11a	x	
h	Part VI		- 23	
D		11b		x
~	assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
ŭ	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	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
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	Х	
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		<u> </u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
	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			37
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	000	
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 LEGAL PRIORITIES, INC.
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 Part IV
 Checklist of Required Schedules (continued)
 Page 4

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? 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			v
~~	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%			x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
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? <i>If</i> "Yes." <i>complete Schedule L. Part III</i>	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	21		
20	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		X
	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 non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
a	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 eaction 512(b)(12)2. (Figure 1 are 1 to 0, to 1 to 0, both to 0,	35b		
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	350		
50	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			
0.	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?			
	· · · ·	38	х	
Par	Note: All Form 990 filers are required to complete Schedule O t 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			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 12			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	000	(2022)
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Form	990 (2022) LEGAL PRIORITIES, INC. 85-1024	198	P	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		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?	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
 Page

 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

		1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	5		
	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	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship v	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 c				
	of officers, directors, trustees, or key employees to a management company or other person?		3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990				х
5	Did the organization become aware during the year of a significant diversion of the organization's asset				X
6					X
	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appr				
/a			7a		x
b	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stor		10		- 23
b			71		x
•	persons other than the governing body?		7b		~
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year I	-		37	
	The governing body?		<u>8a</u>	X	
b	Each committee with authority to act on behalf of the governing body?		. <mark>8b</mark>	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach	ed at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		. 9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reve	enue Code.)			
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such char	oters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body b		11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	Ū			
	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to			X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye				
C		,	100	x	
40	on Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?			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 b	by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		. <u>15a</u>	Х	
b	Other officers or key employees of the organization		15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	ent with a			
	taxable entity during the year?		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organiz	ation's			
	exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filedMA , CA				
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)	availat	hle
	for public inspection. Indicate how you made these available. Check all that apply.		c,c only)	avanal	
		a Oshadula Oʻ			
10		,	nd finan	ial	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conf	nici of interest policy, a	una finano	Jai	
~	statements available to the public during the tax year.	t			
20	State the name, address, and telephone number of the person who possesses the organization's books	s and records			
	JENNIFER DEL CAMPO - 321-508-5837				
	2262 W NEW HAVEN AVE #220 NET DOWNER OF 20004				
	2263 W NEW HAVEN AVE #339, MELBOURNE, FL 32904			990	

Form 990 (2022)	LEGAL PRIORITIES, INC.	85-1024198 Page 7						
Part VII Compe	nsation of Officers, Directors, Trustees, Key Employees, H	lighest Compensated						
Employees, and Independent Contractors								
Check if S	Schedule O contains a response or note to any line in this Part VII							
Section A. Officers,	Directors, Trustees, Key Employees, and Highest Compensated Employ	yees						
•	e for all persons required to be listed. Report compensation for the calendar ganization's current officers, directors, trustees (whether individuals or orgar	, , ,						

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	Position (do not check more than one					Reportable	Reportable	Estimated	
	hours per	box	box, unless person is both a officer and a director/trustee		n an	compensation	compensation	amount of		
	week		cer ar I	nd a d I	irecto	r/trus T	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee e			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		96	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	lual tr	tional		nploy	st con	_	1099-1420)		organizations
	line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) ALFREDO PARRA	40.00				-					
CHIEF OF STAFF		1		x				84,989.	0.	16,306.
(2) CHRISTOPH WINTER	50.00									
PRESIDENT		х		x				73,574.	Ο.	0.
(3) ERIC MARTINEZ	25.00									
TREASURER		Х		Х				34,533.	0.	0.
(4) JONAS SCHUETT	5.00									
SECRETARY		Х		Х				0.	0.	0.
(5) CULLEN O'KEEFE	5.00									
DIRECTOR		Х						0.	0.	0.
(6) JADE LEUNG	3.00									
DIRECTOR (FROM MARCH)		Х						0.	0.	0.
					<u> </u>					
						-				
		<u> </u>								
		1								
		1								
		1					1			
		1								
232007 12-13-22										Form 990 (2022)

8

											age 8			
Fai	(A) Name and title (do not box, un week (list any hours for (ist any (ist any)(ist any (ist any)(ist any)(is					(C) Position do not check more than one tox, unless person is both an fificer and a director/trustee) director/trustee) age (0) age			ompensated Employee (D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(continued) (E) Reportable compensation from related organizations (W-2/1099-MISC 1099-NEC)		am com fr orga and	(F) timate nount other pensa om the anizati d relate	of tion e ion ed
		line)	Individ	Institu	Officer	Key employee	Highes employ	Former						
с	Subtotal Total from continuation sheets to Part VI	I, Section A							193,096. 0. 193,096.		0. 0. 0.	16,306. 0. 16,306.		
_ <u>d</u> 2	Total (add lines 1b and 1c) Total number of individuals (including but n compensation from the organization	ot limited to th									••			0
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for si	-			•	•		Ŭ	• •		[3	Yes	No X
4 5	For any individual listed on line 1a, is the su and related organizations greater than \$150 Did any person listed on line 1a receive or a),000? If "Yes,	" со	mple	ete S	Sche	dule	J f	or such individual	-		4		X
Sec	rendered to the organization? If "Yes." com tion B. Independent Contractors	plete Schedule	e J fo	or su	ich p	berso	on .		-			5		X
1	Complete this table for your five highest con the organization. Report compensation for t (A)	-	-							· · · ·		(C	;)	
Name and business address NONE Description of services										С	omper	nsatio	n	
2	Total number of independent contractors (ir \$100,000 of compensation from the organiz	•	ot lin	nitec	d to t	hos 0		ted	above) who received mo	ore than		F	990 (2000)

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			2022) LEGAL PRIOR	ITI	IES, INC	•		85-1024	198 Page 9
Par	rt V	/	Statement of Revenue						
			Check if Schedule O contains a respor	nse o	r note to any lin	e in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<u>ເ</u>	1	а	Federated campaigns 1a						
ran'			Membership dues 1b						
۵. ۵			Fundraising events 1c						
ar A			Related organizations 1d						
is, (е	Government grants (contributions) 1e						
Contributions, Gifts, Grants and Other Similar Amounts		f	All other contributions, gifts, grants, and similar amounts not included above 1f	1,4	458,617.				
dt		g	Noncash contributions included in lines 1a-1f						
о е		h	Total. Add lines 1a-1f			1,458,617.			
				-	Business Code				
e	2	а							
ervi Je		b							
Program Service Revenue		С							
Jrar Bev		d							
loc		е							
<u>a</u>			All other program service revenue						
		g	Total. Add lines 2a-2f						
	3		Investment income (including dividends, in other similar amounts)						
	4		Income from investment of tax-exempt bor						
	5		Royalties						
	5		(i) Real		(ii) Personal				
	6	a			(
			Less: rental expenses			-			
			Rental income or (loss) 6c						
			Net rental income or (loco)						
			Gross amount from sales of (i) Securiti		(ii) Other				
	-		assets other than inventory 7a						
		b	Less: cost or other basis						
e			and sales expenses 7b						
venue		с	Gain or (loss) 7c						
0		d	Net gain or (loss)	. <u></u>					
Other Re	8	а	Gross income from fundraising events (not						
₿			including \$ of						
			contributions reported on line 1c). See						
			<i>, , , , , , , , , , , , , , , , , , ,</i>	8a					
		b	Less: direct expenses	8b					
			Net income or (loss) from fundraising even						
	9	а	Gross income from gaming activities. See						
			Part IV, line 19	9a					
			• • • • • • • • • • • • • • • • • • • •	9b					
			Net income or (loss) from gaming activities	°					
	10	а	Gross sales of inventory, less returns						
			and allowances						
			•	10b					
		С	Net income or (loss) from sales of inventor	у Г	Business Code				
sn		_		ŀ	Business Code				
Jeol	11			—					
ilar ven		b		—					
Miscellaneous Revenue		с С		-					
ž			All other revenue						
	12		Total revenue. See instructions			1,458,617.	0.	0.	0.
	9 12-			<u></u>		,, • •			Form 990 (2022

LEGAL PRIORITIES, INC. Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons			(C)	<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	17,500.	17,500.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	73,935.	73,935.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	04 500	~~ ~ ~ ~ ~		6.7.0
	trustees, and key employees	34,533.	33,273.	582.	678
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	200 506	205 006	C 17.1	
7	Other salaries and wages	399,586.	385,006.	6,731.	7,849
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	20.024	20 005	F 0 1	<u> </u>
9	Other employee benefits	30,934. 30,459.	29,805. 29,348.	<u>521.</u> 513.	608
0	Payroll taxes	30,439.	29,348.	513.	598
1	Fees for services (nonemployees):				
а	Management	12,660.		12,660.	
b		35,129.		35,129.	
	Accounting	55,129.		55,129.	
d	Lobbying				
-	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	208,057.	202,056.	5,834.	167
~	column (A), amount, list line 11g expenses on Sch 0.)	5,905.	4,757.	793.	<u> 167</u> 355
2	Advertising and promotion	48,961.	12,424.	36,537.	
3	Office expenses	10,012.	2,150.	7,862.	
4 5	Information technology	10,012.	2,150.	7,002.	
5 6	Royalties	75,001.	8,655.	66,346.	
7		144,131.	130,144.	13,987.	
' 8	Payments of travel or entertainment expenses	111,101.	100,111	13,507.	
0	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	6,168.	3,876.	2,292.	
0	Interest	0,2001			
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	2,803.		2,803.	
3	Insurance	1,964.		1,964.	
4	Other expenses. Itemize expenses not covered			,	
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)	2 046	2 016		
a	PROGRAM RESEARCH	3,846. 2,751.	3,846. 1,907.	844.	
b	DUES & SUBSCRIPTIONS	4,/51.		044.	
c					
d		308.	213.	0.5	
	All other expenses	<u> </u>	938,895.	<u>95.</u> 195,493.	10 255
5	Total functional expenses. Add lines 1 through 24e	⊥, ⊥44,043.	.250,022	195,495.	10,255
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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2022.04030 LEGAL PRIORITIES, INC.

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Form 990 (2022)

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	Check if Schedule O contains a response or note	e to any	/ line in this Part X			
				(A) Beginning of year		
1	Cash - non-interest-bearing			477,244.	1	
2	Savings and temporary cash investments				2	
3	Pledges and grants receivable, net				3	
4	Accounts receivable, net		[4	
5	Loans and other receivables from any current or					
	trustee, key employee, creator or founder, substa	antial c	ontributor, or 35%			
	controlled entity or family member of any of these	e perso	ons		5	
6	Loans and other receivables from other disqualifi	ied per	sons (as defined			
	under section 4958(f)(1)), and persons described	in sect	tion 4958(c)(3)(B)		6	
7	Notes and loans receivable, net				7	
8	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges			0.	9	
10a	Land, buildings, and equipment: cost or other					
	basis. Complete Part VI of Schedule D	10a	13,797.			
b	Less: accumulated depreciation	10b	3,084.	3,754.	10c	
11	Investments - publicly traded securities				11	
12	Investments - other securities. See Part IV, line 1	1			12	
13	Investments - program-related. See Part IV, line 1	1			13	

LEGAL PRIORITIES, INC.

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(B) End of year

743,811.

8,760.

0.

Form 990 (2022)

Part X Balance Sheet

10,713. 14 Intangible assets 14 0. 29,343. Other assets. See Part IV, line 11 15 15 480,998. 792,627. Total assets. Add lines 1 through 15 (must equal line 33) 16 16 6,250. 35,486. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 60,924. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 0. 25 29,343. of Schedule D 67,174. 64,829. 26 26 Total liabilities. Add lines 17 through 25 X Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 386,286. 342,659. 27 27 Net assets without donor restrictions Net assets with donor restrictions 27,538. 385,139. 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31 727,798. Total net assets or fund balances 413,824. 32 32 480,998. 792,627. 33 33 Total liabilities and net assets/fund balances

Form 990 (2022)

Assets

Form	1990 (2022) LEGAL PRIORITIES, INC.	85-	1024198	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,458		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,144		
3	Revenue less expenses. Subtract line 2 from line 1	3			74.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	413	8,82	24.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
_	column (B))	10	727	7 ,79	98.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?			X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		<u>3a</u>		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				L

Form **990** (2022)

232012 12-13-22

SCHEDULE A	١
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Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2022
Open to Public Inspection

Т

Name of the organization

Name	Name of the organization Employer identification nu									
Dev		LEGA	L PRIORITI	ES, INC.					5-1024198	
Par	τι	Reason for Public (Sharity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	S.		
The o	rgan	ization is not a private found			•					
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)								
3 [A hospital or a cooperative					-			
4 [A medical research organize	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,	
_ r		city, and state:						- 14	al fa	
5 [An organization operated for		lege or university owned	or operate	ed by a go	overnmental u	nit describe	a in	
o [section 170(b)(1)(A)(iv). (C		and a low the state of the state of the		70/L-\/_4\/_A\	4.5			
6 [X	A federal, state, or local gov	-						u de lie, ele e suite e el in	
7 [Δ	An organization that norma	•	ntial part of its support fr	rom a gove	ernmental	unit or from tr	ie general j	Dudiic described in	
o [section 170(b)(1)(A)(vi). (C		(1)(A)(ui) (Complete Der	+ 11 \					
8 [9 [A community trust describe An agricultural research org				nd in coniu	unction with a	land grant	collogo	
5		or university or a non-land-g				-		-	-	
		university:	fram concyc or agrici			name, eny	, and state of	the conege		
10		An organization that norma	Ilv receives (1) more	than 33 1/3% of its supr	ort from c	ontributior	ns membersh	in fees and	d gross receipts from	
		activities related to its exem		••				•	•	
		income and unrelated busir							-	
		See section 509(a)(2). (Cor								
11 [An organization organized a		vely to test for public sa	fety. See	section 50)9(a)(4).			
12 [An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	he functio	ns of, or to ca	rry out the	purposes of one or	
		more publicly supported or	ganizations describe	d in section 509(a)(1) d	r section	509(a)(2).	See section &	509(a)(3).	Check the box on	
		lines 12a through 12d that	describes the type of	f supporting organizatior	n and com	plete lines	12e, 12f, and	12g.		
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving	
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	of the direc	tors or trustee	es of the su	ipporting	
		organization. You must o	complete Part IV, Se	ections A and B.						
b		Type II. A supporting org	anization supervised	or controlled in connect	tion with its	s supporte	ed organization	n(s), by hav	ing	
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	ge the supp	ported	
		organization(s). You mus	-							
С		Type III functionally inte						ly integrate	d with,	
		its supported organization	. , . ,	•						
d		J Type III non-functionally	• •				••	Ũ		
		that is not functionally int			•		-	an attentiv	reness	
-		requirement (see instructi		-						
е		Check this box if the orga functionally integrated, or					турет, туре	п, туре п		
f	Ente	er the number of supported of		, , , , , , , , , , , , , , , , , , , ,	ng organiz	ation.				
		vide the following information	•	d organization(s)						
9_		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of	monetary	(vi) Amount of other	
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	structions)	support (see instructions)	
Total										

	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						1474318.
6	Public support. Subtract line 5 from line 4.						891,226.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4			156,499.	750,428.	1458617.	2365544.
	Gross income from interest,			-	-		
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						2365544.
	Gross receipts from related activities,	etc. (see instruction	ıs)			12	
13	First 5 years. If the Form 990 is for th	e organization's firs				01(c)(3)	
	organization, check this box and stop						X
Sec	ction C. Computation of Publi						
14	Public support percentage for 2022 (I	ine 6, column (f), div	vided by line 11,	column (f))		14	%
	Public support percentage for 2022 (I Public support percentage from 2021					14 15	<u>%</u> %
15	Public support percentage for 2022 (I Public support percentage from 2021 33 1/3% support test - 2022. If the o	Schedule A, Part II,	, line 14			15	%
15	Public support percentage from 2021 33 1/3% support test - 2022. If the o	Schedule A, Part II, organization did not	, line 14 check the box o	n line 13, and line 1	4 is 33 1/3% or m	15 ore, check this box	%
15 16a	Public support percentage from 2021	Schedule A, Part II, organization did not as a publicly suppor	, line 14 check the box o rted organizatior	n line 13, and line 1	4 is 33 1/3% or m	15 ore, check this box	% < and
15 16a	Public support percentage from 2021 33 1/3% support test - 2022. If the of stop here. The organization qualifies 33 1/3% support test - 2021. If the of	Schedule A, Part II, organization did not as a publicly suppor organization did not	, line 14 check the box o rted organizatior check a box on	n line 13, and line 1 ine 13 or 16a, and	4 is 33 1/3% or m line 15 is 33 1/3%	15 ore, check this box or more, check thi	% (and
15 16a b	Public support percentage from 2021 33 1/3% support test - 2022. If the o stop here. The organization qualifies	Schedule A, Part II, organization did not as a publicly suppor organization did not ifies as a publicly su	, line 14 check the box o rted organizatior check a box on upported organiz	n line 13, and line 1 ine 13 or 16a, and ation	4 is 33 1/3% or m line 15 is 33 1/3%	15 ore, check this box or more, check thi	% and
15 16a b	Public support percentage from 2021 33 1/3% support test - 2022. If the of stop here. The organization qualifies 33 1/3% support test - 2021. If the of and stop here. The organization qual	Schedule A, Part II, organization did not as a publicly suppor organization did not ifies as a publicly su - 2022. If the orga	, line 14 check the box o rted organizatior check a box on upported organiz nization did not	n line 13, and line 1 ine 13 or 16a, and ation check a box on line	4 is 33 1/3% or m line 15 is 33 1/3% 13, 16a, or 16b, a	15 ore, check this box or more, check thi and line 14 is 10% c	% and s box or more,
15 16a b	Public support percentage from 2021 33 1/3% support test - 2022. If the of stop here. The organization qualifies 33 1/3% support test - 2021. If the of and stop here. The organization qual 10% -facts-and-circumstances test	Schedule A, Part II, organization did not as a publicly suppor organization did not ifies as a publicly su - 2022. If the orga s-and-circumstances	, line 14 check the box o rted organization check a box on upported organiz nization did not s test, check this	n line 13, and line 1 ine 13 or 16a, and ation check a box on line box and stop her	4 is 33 1/3% or m line 15 is 33 1/3% 13, 16a, or 16b, a re. Explain in Part	15 ore, check this box or more, check thi and line 14 is 10% of VI how the organiz	% and
15 16a b 17a	Public support percentage from 2021 33 1/3% support test - 2022. If the of stop here. The organization qualifies 33 1/3% support test - 2021. If the of and stop here. The organization qual 10% -facts-and-circumstances test and if the organization meets the fact	Schedule A, Part II, organization did not as a publicly suppor organization did not ifies as a publicly su - 2022. If the orga s-and-circumstances st. The organization	, line 14	n line 13, and line 1 ine 13 or 16a, and ation check a box on line box and stop her blicly supported or	4 is 33 1/3% or m line 15 is 33 1/3% 13, 16a, or 16b, a e. Explain in Part ganization	15 ore, check this box or more, check thi and line 14 is 10% of VI how the organiz	% and
15 16a b 17a	Public support percentage from 2021 33 1/3% support test - 2022. If the of stop here. The organization qualifies 33 1/3% support test - 2021. If the of and stop here. The organization qual 10% -facts-and-circumstances test and if the organization meets the facts meets the facts-and-circumstances test	Schedule A, Part II, organization did not as a publicly suppor organization did not ifies as a publicly su - 2022. If the orga s-and-circumstances st. The organization - 2021. If the orga	, line 14	n line 13, and line 1 ine 13 or 16a, and ation check a box on line box and stop her blicly supported or check a box on line	4 is 33 1/3% or m line 15 is 33 1/3% 13, 16a, or 16b, a re. Explain in Part ganization 13, 16a, 16b, or 1	15 ore, check this box or more, check this and line 14 is 10% of VI how the organiz 7a, and line 15 is 1	% and
15 16a b 17a	Public support percentage from 2021 33 1/3% support test - 2022. If the of stop here. The organization qualifies 33 1/3% support test - 2021. If the of and stop here. The organization qual 10% -facts-and-circumstances test and if the organization meets the fact meets the facts-and-circumstances test 10% -facts-and-circumstances test	Schedule A, Part II, organization did not as a publicly suppor organization did not ifies as a publicly su - 2022. If the orga s-and-circumstances st. The organization - 2021. If the orga ne facts-and-circums	, line 14	n line 13, and line 1 ine 13 or 16a, and ation check a box on line box and stop her blicly supported or check a box on line ck this box and st	4 is 33 1/3% or m line 15 is 33 1/3% 13, 16a, or 16b, a re. Explain in Part ganization 13, 16a, 16b, or 1 op here. Explain in	15 ore, check this box or more, check this and line 14 is 10% of VI how the organization 7a, and line 15 is 1 n Part VI how the	% and
15 16a b 17a b	Public support percentage from 2021 33 1/3% support test - 2022. If the of stop here. The organization qualifies 33 1/3% support test - 2021. If the of and stop here. The organization qual 10% -facts-and-circumstances test and if the organization meets the facts meets the facts-and-circumstances test 10% -facts-and-circumstances test more, and if the organization meets the	Schedule A, Part II, organization did not as a publicly suppor organization did not ifies as a publicly su - 2022. If the orga s-and-circumstances st. The organization - 2021. If the orga ne facts-and-circums umstances test. The	, line 14	n line 13, and line 1 ine 13 or 16a, and ation check a box on line box and stop her blicly supported or check a box on line ck this box and st alifies as a publicly	4 is 33 1/3% or m line 15 is 33 1/3% 13, 16a, or 16b, a re. Explain in Part ganization 13, 16a, 16b, or 1 op here. Explain in supported organiz	15 ore, check this box or more, check this and line 14 is 10% of VI how the organization 7a, and line 15 is 1 n Part VI how the cation	% and
15 16a b 17a	Public support percentage from 2021 33 1/3% support test - 2022. If the of stop here. The organization qualifies 33 1/3% support test - 2021. If the of and stop here. The organization qual 10% -facts-and-circumstances test and if the organization meets the facts meets the facts-and-circumstances test more, and if the organization meets the organization meets the facts-and-circumstances test	Schedule A, Part II, organization did not as a publicly suppor organization did not ifies as a publicly su - 2022. If the orga s-and-circumstances st. The organization - 2021. If the orga ne facts-and-circums umstances test. The	, line 14	n line 13, and line 1 ine 13 or 16a, and ation check a box on line box and stop her blicly supported or check a box on line ck this box and st alifies as a publicly	4 is 33 1/3% or m line 15 is 33 1/3% 13, 16a, or 16b, a re. Explain in Part ganization 13, 16a, 16b, or 1 op here. Explain in supported organiz	15 ore, check this box or more, check this und line 14 is 10% of VI how the organization 7a, and line 15 is 1 n Part VI how the ration and see instructions	% and
15 16a b 17a	Public support percentage from 2021 33 1/3% support test - 2022. If the of stop here. The organization qualifies 33 1/3% support test - 2021. If the of and stop here. The organization qual 10% -facts-and-circumstances test and if the organization meets the facts meets the facts-and-circumstances test more, and if the organization meets the organization meets the facts-and-circumstances test	Schedule A, Part II, organization did not as a publicly suppor organization did not ifies as a publicly su - 2022. If the orga s-and-circumstances st. The organization - 2021. If the orga ne facts-and-circums umstances test. The	, line 14	n line 13, and line 1 ine 13 or 16a, and ation check a box on line box and stop her blicly supported or check a box on line ck this box and st alifies as a publicly	4 is 33 1/3% or m line 15 is 33 1/3% 13, 16a, or 16b, a re. Explain in Part ganization 13, 16a, 16b, or 1 op here. Explain in supported organiz	15 ore, check this box or more, check this und line 14 is 10% of VI how the organization 7a, and line 15 is 1 n Part VI how the ration and see instructions	% and
15 16a b 17a	Public support percentage from 2021 33 1/3% support test - 2022. If the of stop here. The organization qualifies 33 1/3% support test - 2021. If the of and stop here. The organization qual 10% -facts-and-circumstances test and if the organization meets the facts meets the facts-and-circumstances test more, and if the organization meets the organization meets the facts-and-circumstances test	Schedule A, Part II, organization did not as a publicly suppor organization did not ifies as a publicly su - 2022. If the orga s-and-circumstances st. The organization - 2021. If the orga ne facts-and-circums umstances test. The	, line 14	n line 13, and line 1 ine 13 or 16a, and ation check a box on line box and stop her blicly supported or check a box on line ck this box and st alifies as a publicly	4 is 33 1/3% or m line 15 is 33 1/3% 13, 16a, or 16b, a re. Explain in Part ganization 13, 16a, 16b, or 1 op here. Explain in supported organiz	15 ore, check this box or more, check this und line 14 is 10% of VI how the organization 7a, and line 15 is 1 n Part VI how the ration and see instructions	% and
15 16a b 17a b	Public support percentage from 2021 33 1/3% support test - 2022. If the of stop here. The organization qualifies 33 1/3% support test - 2021. If the of and stop here. The organization qual 10% -facts-and-circumstances test and if the organization meets the facts meets the facts-and-circumstances test more, and if the organization meets the organization meets the facts-and-circumstances test	Schedule A, Part II, organization did not as a publicly suppor organization did not ifies as a publicly su - 2022. If the orga s-and-circumstances st. The organization - 2021. If the orga ne facts-and-circums umstances test. The	, line 14	n line 13, and line 1 ine 13 or 16a, and ation check a box on line box and stop her blicly supported or check a box on line ck this box and st alifies as a publicly	4 is 33 1/3% or m line 15 is 33 1/3% 13, 16a, or 16b, a re. Explain in Part ganization 13, 16a, 16b, or 1 op here. Explain in supported organiz	15 ore, check this box or more, check this und line 14 is 10% of VI how the organization 7a, and line 15 is 1 n Part VI how the ration and see instructions	% and
15 16a b 17a b <u>18</u>	Public support percentage from 2021 33 1/3% support test - 2022. If the of stop here. The organization qualifies 33 1/3% support test - 2021. If the of and stop here. The organization qual 10% -facts-and-circumstances test and if the organization meets the facts meets the facts-and-circumstances test more, and if the organization meets the organization meets the facts-and-circumstances test	Schedule A, Part II, organization did not as a publicly suppor organization did not ifies as a publicly su - 2022. If the orga s-and-circumstances st. The organization - 2021. If the orga ne facts-and-circums umstances test. The	, line 14	n line 13, and line 1 ine 13 or 16a, and ation check a box on line box and stop her blicly supported or check a box on line ck this box and st alifies as a publicly	4 is 33 1/3% or m line 15 is 33 1/3% 13, 16a, or 16b, a re. Explain in Part ganization 13, 16a, 16b, or 1 op here. Explain in supported organiz	15 ore, check this box or more, check this und line 14 is 10% of VI how the organization 7a, and line 15 is 1 n Part VI how the ration and see instructions	% and
15 16a b 17a <u>b</u>	Public support percentage from 2021 33 1/3% support test - 2022. If the of stop here. The organization qualifies 33 1/3% support test - 2021. If the of and stop here. The organization qual 10% -facts-and-circumstances test and if the organization meets the fact meets the facts-and-circumstances test 10% -facts-and-circumstances test more, and if the organization meets th organization meets the facts-and-circu Private foundation. If the organization	Schedule A, Part II, organization did not as a publicly suppor organization did not ifies as a publicly su - 2022. If the orga s-and-circumstances st. The organization - 2021. If the orga ne facts-and-circums umstances test. The	, line 14	n line 13, and line 1 ine 13 or 16a, and ation check a box on line box and stop her blicly supported or check a box on line ck this box and st alifies as a publicly a, 16b, 17a, or 17b	4 is 33 1/3% or m line 15 is 33 1/3% 13, 16a, or 16b, a re. Explain in Part ganization 13, 16a, 16b, or 1 op here. Explain in supported organiz	15 ore, check this box or more, check this und line 14 is 10% of VI how the organization 7a, and line 15 is 1 n Part VI how the ration and see instructions	% and
15 16a b 17a b <u>18</u>	Public support percentage from 2021 33 1/3% support test - 2022. If the of stop here. The organization qualifies 33 1/3% support test - 2021. If the of and stop here. The organization qual 10% -facts-and-circumstances test and if the organization meets the fact meets the facts-and-circumstances test 10% -facts-and-circumstances test more, and if the organization meets th organization meets the facts-and-circu Private foundation. If the organization	Schedule A, Part II, organization did not as a publicly suppor organization did not ifies as a publicly su - 2022. If the orga s-and-circumstances st. The organization - 2021. If the orga ne facts-and-circums umstances test. The n did not check a be	, line 14 check the box or rted organization check a box on upported organiz nization did not s test, check this qualifies as a pu- nization did not stances test, che organization qu ox on line 13, 16	n line 13, and line 1 ine 13 or 16a, and ation check a box on line box and stop her blicly supported or check a box on line ck this box and st alifies as a publicly a, 16b, 17a, or 17b	4 is 33 1/3% or m line 15 is 33 1/3% 13, 16a, or 16b, a re. Explain in Part ganization 13, 16a, 16b, or 1 op here. Explain i supported organiz , check this box a	15 ore, check this box or more, check this and line 14 is 10% of VI how the organization 7a, and line 15 is 1 and Part VI how the ration Schedule A (% and

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

(c) 2020

156,499.

156,499.

(d) 2021

750,428.

Part II

Schedule A (Form 990) 2022

Section A. Public Support Calendar year (or fiscal year beginning in)

1 Gifts, grants, contributions, and membership fees received. (Do not

2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge ...

4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a

include any "unusual grants.")

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

(b) 2019

(a) 2018

101910

85-1024198 Page 2

(f) Total

2365544.

2365544.

(e) 2022

1458617.

750,428. 1458617.

LEGAL PRIORITIES, INC.

	Schedule A	Form	990) 2022
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LEGAL PRIORITIES, INC.

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 202	2 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge \dots						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	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						
	Public support. (Subtract line 7c from line 6.) ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 202	2 (f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included 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	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) orga	nization,
	check this box and stop here	<u></u>					
See	ction C. Computation of Public	ic Support Per	rcentage				
15	Public support percentage for 2022 (ine 8, column (f), d	livided by line 13,	column (f))		15	%
	Public support percentage from 2021					16	%
See	ction D. Computation of Inves	stment Income	e Percentage				
17	Investment income percentage for 20)22 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from	2021 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2022. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than 3	33 1/3%, and	line 17 is not
	more than 33 1/3%, check this box a	nd stop here. The	organization qual	ifies as a publicly	supported organiza	ation	
k	33 1/3% support tests - 2021. If the	organization did r	not check a box or	n line 14 or line 19	a, and line 16 is mo	ore than 33 1	'3%, and
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	anization qualifies	as a publicly suppo	orted organiza	ation
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see ins		<u></u>
2320	23 12-09-22		16			Sche	dule A (Form 990) 2022

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LEGAL PRIORITIES, INC.

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Yes No

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.)

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	1 /	anizations (continued)
Schedule A	(Form 990) 2022	LEGAL PRIORITIES,

1

2

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated supervised or controlled the organization's activities. If the organization had more than one supported			

INC.

	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
2	Did the organization operate for the benefit of any supported organization other than the supported
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated

rait vi now providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization

			ig olganization.
Section C.	Type II Sup	porting Org	janizations

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed
 Image: Control organization control or management of the supporting organization (s).
 Image: Control organization control or managed
 Image: Control organization control organization control or managed
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Section D.	All Typ	e III Suj	oporting	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.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to sat	sfy the Integral Par	t Test during the year	(see instructions).
	Check the DOX hext to the method that the organization used to sat	אין נוופ ווונפעומו רמו	l rest during the year	

- a 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.*

c		The organization supported a governmental entity.	Describe in Part VI how	you supported a governmental er	ntity (see instruction <u>s).</u>
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- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? 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.
- 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.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**

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

2a 2b 2b 3a 3a 3b Schedule A (Form 990) 2022

Yes No

232025 12-09-22

18

1	I Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.				
	All other Type III non-functionally integrated supporting organizations mu	st complete S	Sections A through E.	1	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
с	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Year	
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-function	ally integrate	d Type III supporting orga	nization (see	

instructions).

Schedule A (Form 990) 2022

232026 12-09-22

Schedule A (Form 990) 2022

LEGAL PRIORITIES, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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c Excess from 2020 d Excess from 2021 e Excess from 2022

Schedule A (Form 990) 2022 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions

	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	3			
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (<i>describe in Part VI</i>). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.	C I		8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	s	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2018				
b	Excess from 2019				

1

Current Year

Schedule A (Form 990) 2022

1 Amounts paid to supported organizations to accomplish exempt purposes

2 Amounts paid to perform activity that directly furthers exempt purposes of supported

Schedule A	(Form 990) 2022 LEGAL	PRIORITIES,	INC.	85-1024198 Page 8
Part VI	Supplemental Information. F Part IV, Section A, lines 1, 2, 3b, 3c, 4 line 1; Part IV, Section D, lines 2 and 3 Section D, lines 5, 6, and 8; and Part (See instructions.)	Provide the explanations b, 4c, 5a, 6, 9a, 9b, 9c, 3; Part IV, Section E, line	required by Part II, line 10; Part II, line 11a, 11b, and 11c; Part IV, Section B, s 1c, 2a, 2b, 3a, and 3b; Part V, line 1	; Part V, Section B, line 1e; Part V,
232028 12-09-2	2		21	Schedule A (Form 990) 2022
			4 T	

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

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

2022

Employer identification number

(F	orm	99U)	

Schedule B

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

LEGAL	PRIORITIES,	INC.	

В	5-	1	0	2	4	1	9	8	

Filers of:	Section:
Form 990 or 990-EZ	\fbox 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

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

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

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

Schedule B (Form 990) (2022)

Part I

(a)

No.

1

Employer identification number

85-1024198

LEGAL PRIORITIES, INC.

	\$115,000.	Noncash
		(Complete Part II for
		noncash contributions.)
(-)	(-)	(-1)
(a) (b) No. Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		Person X
	040.004	Payroll
	\$ 842,334.	Noncash
		(Complete Part II for noncash contributions.)
		,
(a) (b)	(c)	(d)
No. Name, address, and ZIP + 4	Total contributions	Type of contribution
3		
		Person X Payroll
	\$ 478,917.	Noncash
		(Complete Part II for
		noncash contributions.)
(a) (b)	(a)	(d)
(a) (b) No. Name, address, and ZIP + 4	(c) Total contributions	Type of contribution
		Person
	•	Payroll Noncash
	\$	(Complete Part II for
		noncash contributions.)
(a) (b)	(c)	(d)
No. Name, address, and ZIP + 4	Total contributions	Type of contribution
		Person
		Payroll
	\$	Noncash
		(Complete Part II for noncash contributions.)
		noncash contributions.)
(a) (b)	(c)	(d)
No. Name, address, and ZIP + 4	Total contributions	Type of contribution
		Person Payroll
	•	Noncash
	\$	(Complete Part II for
	•	

Page 2

2022.04030 LEGAL PRIORITIES, INC. 15045.31

Schedule B (Form 9	990) (2022	2
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Name of organization

Page 3

Employer identification number

85-1024198

LEGAL PRIORITIES, INC.

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

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

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2022.04030 LEGAL PRIORITIES, INC. 15045.31

ame of or	rganization		Employer identification number			
.EGAT.	PRIORITIES, INC.		85-1024198			
Part III	Exclusively religious, charitable, etc., contributio	through (e) and the following line entry. naritable, etc., contributions of \$1,000 or les	ion 501(c)(7), (8), or (10) that total more than \$1,000 for the yea			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-		(e) Transfer of gift				
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
3454 11-15	-22	26	Schedule B (Form 990) (20			

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2022.04030 LEGAL PRIORITIES, INC. 15045.31

		Supplement	al Einanoial Statomonto		OMB No. 1545-0047		
	SCHEDULE D (Form 990) Complete if the organization answered "Yes" on Form 990,						
(Forn	n 990)	Part IV, line 6, 7, 8, 9, 10	, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		ZUZZ		
	ment of the Treasury I Revenue Service		Attach to Form 990. 0 for instructions and the latest information.		Open to Public Inspection		
	e of the organizati			Emplo	yer identification number		
		LEGAL PRIORITIES,		<u> </u>	85-1024198		
Par		ations Maintaining Donor Advise n answered "Yes" on Form 990, Part IV, lir	d Funds or Other Similar Funds or A	ccounts	Complete if the		
	organizatio	nanswered tes offform 990, Faitty, in	(a) Donor advised funds	(h) Funds	and other accounts		
1	Total number at er	nd of year					
2		f contributions to (during year)					
3		f grants from (during year)					
4	4 Aggregate value at end of year						
5	Did the organization	on inform all donors and donor advisors in	writing that the assets held in donor advised fun	ds			
	are the organization	on's property, subject to the organization's	exclusive legal control?		Yes No		
6	•	C	dvisors in writing that grant funds can be used o				
			r donor advisor, or for any other purpose confer	-			
Par	impermissible priv		ganization answered "Yes" on Form 990, Part IV		Yes No		
		servation easements held by the organizati		, line 7.			
1		of land for public use (for example, recrea		orically im	nortant land area		
		f natural habitat	Preservation of a cert	•	•		
	=	of open space					
2			fied conservation contribution in the form of a co	onservatio	n easement on the last		
	day of the tax year			H	eld at the End of the Tax Year		
а	Total number of co	onservation easements		2a			
b	Total acreage rest	ricted by conservation easements		2b			
С	Number of conser	vation easements on a certified historic str	ucture included in (a)	2c			
d	Number of conser	vation easements included in (c) acquired a					
				2d			
3		vation easements modified, transferred, re	eased, extinguished, or terminated by the organ	ization du	ring the tax		
4	year	 where property subject to conservation eas	soment is located				
5		tion have a written policy regarding the pe					
•	-	orcement of the conservation easements in			Yes No		
6	,		handling of violations, and enforcing conservati				
7	Amount of expens	es incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation ea	asements o	during the year		
8			e satisfy the requirements of section 170(h)(4)(B				
٥			on easements in its revenue and expense stater		Yes No		
9		•	note to the organization's financial statements the		os tho		
		ounting for conservation easements.		lat describ			
Par	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.						
	Complete if	the organization answered "Yes" on Form	990, Part IV, line 8.				
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its revenue statement and ba	ance shee	et works		
	of art, historical tre	easures, or other similar assets held for pul	olic exhibition, education, or research in furthera	nce of put	blic		
	service, provide in	Part XIII the text of the footnote to its final	ncial statements that describes these items.				
b	-		8, to report in its revenue statement and balanc				
		· ·	exhibition, education, or research in furtheranc	e of public	service,		
	-	ng amounts relating to these items:		•			
2			asures, or other similar assets for financial gain,				
2		unts required to be reported under FASB A		PLOVIDE			
а			SO 350 relating to these items.	\$			
		eduction Act Notice, see the Instruction			hedule D (Form 990) 2022		
232051	09-01-22						

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²⁷ 2022.04030 LEGAL PRIORITIES, INC. 15045.31

Sche		RIORITIES,					8	35-10	24198	З Ра	age 2
Par	t III Organizations Maintaining Co	ollections of Art	, Hist	orical Tre	easures, or	Other S	Similar	Assets	(contin	ued)	
3	Using the organization's acquisition, accession	on, and other records	, check	any of the t	following that	make sigr	nificant u	se of its			
	collection items (check all that apply):										
а	Public exhibition	d		Loan or exc	hange progra	ım					
b	Scholarly research	е		Other							
с	Preservation for future generations										
4	Provide a description of the organization's co	llections and explain	how th	ney further th	ne organizatio	n's exemp	ot purpos	e in Part	XIII.		
5	During the year, did the organization solicit or	receive donations o	f art, hi	storical treas	sures, or othe	r similar a	ssets		_		_
_	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arrang reported an amount on Form 990, Parl		te if the	e organizatio	on answered "	Yes" on F	orm 990,	, Part IV, I	ine 9, or		
1a	Is the organization an agent, trustee, custodia	an or other intermedi	ary for o	contribution	s or other ass	ets not ind	cluded				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII a										
									Amount		
с	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
	Ending balance						lf		_		
	Did the organization include an amount on Fo						?	L	Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Par	t V Endowment Funds. Complete if							aava baali	(-) [heels
		(a) Current year	(ɑ) ⊦	Prior year	(c) Two year	s back (c	a) Three y	ears dack	(e) Four	years	раск
	Beginning of year balance										
	Contributions										
	Net investment earnings, gains, and losses										
	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
	Administrative expenses										
-	End of year balance		(line 1								
2	Provide the estimated percentage of the curre			g, column (a)) neid as:						
a h	Board designated or quasi-endowment	%	_%								
u o	Permanent endowment	% %									
C	,	-									
20	The percentages on lines 2a, 2b, and 2c shou Are there endowment funds not in the posses		tion tha	t are hold ar	ad administor	od for tho					
Ja	organization by:	ssion of the organizat	lion ina	it are neiu ai					Г	Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizat								3b		
4	Describe in Part XIII the intended uses of the										
Par	t VI Land, Buildings, and Equipme										
	Complete if the organization answered	"Yes" on Form 990,	Part IV	/, line 11a. S	See Form 990	, Part X, Iir	ne 10.				
	Description of property	(a) Cost or ot basis (investm			t or other (other)	• •	umulate eciation	d	(d) Bool	k valu	e
10	Land		5110	02313		depr	00141011				
-	Land										
b	Buildings										
	Leasehold improvements			1	3,797.		3,08	84	1 () 7	13.
	Equipment			±	• • • • • •		5,00	/ = •	<u> </u>	,,,.	<u> </u>
	Other		(and	nn (B) <i>li==</i> 1					1 (),7	13.
1010		<u>μαι Γυπη 990, ΡάΠ Σ</u>	<u>, coiún</u>	<u>uu (D). IIIIte I</u>				Schedule			

232052 09-01-22

	(Form 990) 2022		PRIORITIES,	INC
Part VII	Investments -	Other Secu	rities.	

Complete if the organization answered "Yes"	on Form 990, Part IV, line		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990 Part IV line	11c See Form 990 Part X line 13	
(a) Description of investment	(b) Book value		of voor markat valua
	(b) BOOK value	(c) Method of valuation: Cost or end-c	n-year market value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.		1	
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11d. See Form 990. Part X. line 15.	
	Description		(b) Book value
(1)			()
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1.(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) OPERATING LEASE LIABILITY			29,343.
(3)			- , •
(4)			
(5)			
<u>(6)</u>			
(7)			
(8)			
(9) Total. (Column (b) must equal Form 990. Part X. col. (B) line			29,343.

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

Schedule D (Form 990) 2022

232053 09-01-22

Sche	dule D (Form 990) 2022 LEGAL PRIORITIES, INC.		85-1	024198 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stater	ments With Reven		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	12a.		
1	Total revenue, gains, and other support per audited financial statements		1	1,458,617.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			1,458,617.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b			0.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			1,458,617.
Ра	t XII Reconciliation of Expenses per Audited Financial State		nses per Return	l.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1			
1	Total expenses and losses per audited financial statements		1	1,144,643.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
с	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2 e	0.
3	Subtract line 2e from line 1			1,144,643.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b		4c	0.
				•••
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) T XIII Supplemental Information.			1,144,643.

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

232054 09-01-22

SCHEDULE F	Stateme	nt of Act	ivities Outside the Ur	nited Sta	ites –	OMB No. 1545-0047
(Form 990)			nswered "Yes" on Form 990, Part IV,			2022
Department of the Treasury	_		Attach to Form 990.			Open to Public
Internal Revenue Service Name of the organization	Go to _W	ww.irs.gov/Form	990 for instructions and the latest i	nformation.		nspection entification number
Name of the organization					Employer la	enuncation number
LEGAL PRIORITIE	S, INC.				85-1024	
		ctivities Out	side the United States. Comple	ete if the orgar	ization answer	ed "Yes" on
Form 990, Part IN 1 For grantmakers. Does	•	maintain racar	ds to substantiate the amount of its gra	nto and other	accietance	
•	Ũ		he selection criteria used to award the		,	Yes X No
2 For grantmakers. Desc United States.	ribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and ot	her assistance	outside the
			n be duplicated if additional space is n			
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (d) gram service, e specific type (s) in the region	expenditures for and investments
EUROPE	0	0	RESEARCH STIPEND			30,978.
EAST ASIA	0	0	RESEARCH STIPEND			17,477.
NORTH AMERICA	0	0	RESEARCH STIPEND			17,992.
SOUTH ASIA	0	0	RESEARCH STIPEND			4,988.
SUB-SAHARAN AFRICA	0	0	RESEARCH STIPEND			2,500.
3 a Subtotal	0	0				73,935.
b Total from continuation						,
sheets to Part I	0	0				0.
c Totals (add lines 3a and 3b)	0	0				73,935.

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Schedule F (Form 990) 2022

232071 10-17-22

232072 10-17-22

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

85-1024198

LEGAL PRIORITIES, INC.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			recognized as charities by the f			1	I	1
			or counsel has provided a sect	ion 501(c)(3) equ	uivalency letter	►		
3 Enter total number of	other organizations of	or entities				🕨		

Schedule F (Form 990) 2022

LEGAL PRIORITIES, INC.

85-1024198

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed. **(h)** Method of valuation (book, FMV, appraisal, other) (f) Amount of (c) Number of (d) Amount of (e) Manner of (g) Description of (b) Region (a) Type of grant or assistance cash disbursement recipients cash grant noncash noncash assistance assistance EUROPE (INCLUDING ICELAND & GREENLAND) -STIPEND ALBANIA, ANDORRA 11 30,978.EFT Ο. FMV EAST ASIA AND THE PACIFIC -AUSTRALIA, STIPEND BRUNEI, BURMA 7 17,477.EFT 0 FMV STIPEND NORTH AMERICA 9 17,992.EFT 0 FMV STIPEND SOUTH ASIA 4,988.EFT 0. FMV 2 SUB-SAHARAN AFRICA Ο. STIPEND 1 2,500.EFT FMV

Schedule F (Form 990) 2022

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

Schedule F (Form 990) 2022

232074 10-17-22

Part V Supplemental Information

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

PART I, LINE 2:

STIPEND OPPORTUNITIES ARE PUBLICLY ADVERTISED WITH CLEARLY-DELINEATED

SELECTION CRITERIA. THE ORGANIZATION APPOINTS A SELECTION COMMITTEE THAT

EVALUATES ALL APPLICANTS ALONG THESE CRITERIA AND DOCUMENTS ITS DECISIONS

THOROUGHLY AND IN A TIMELY MANNER. THE BOARD ALSO SIGNS OFF ON THE

DECISIONS TO AWARD STIPENDS. ALL STIPEND RECIPIENTS MUST SIGN AN

AGREEMENT DELINEATING THE PURPOSE AND USE OF THE FUNDS. ADDITIONALLY,

SELECTED SUMMER RESEARCH FELLOWS ARE ASSIGNED A MENTOR TO SUPPORT THEM

(WHICH IMPROVES MONITORING), AND FELLOWS HAVE TO GIVE A PRESENTATION

ABOUT THEIR FINDINGS AT THE END OF THE FELLOWSHIP.

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SCHEDULE I (Form 990)		G	rants and Oth	er Assistan	ce to Organ	izations,			o. 1545-0047
(Form 990)			vernments, an ete if the organization					2	J22
Department of the Treasury			-	Attach to Forn		····, ···· _· _· _·		Open	to Public
Internal Revenue Service			Go to www.irs	.gov/Form990 for	the latest inform	ation.			pection
Name of the organizat			INC					Employer identifica	tion number 024198
Part I General Ir	LEGAL PRI							05-1	024190
1 Does the organiz	zation maintain records t	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selecti	ion	
criteria used to a	award the grants or assis	tance?				-		X Yes	No No
2 Describe in Part	IV the organization's pro	cedures for monite	oring the use of grant	funds in the United	d States.				
	d Other Assistance to I hat received more than \$	-				anization answered "Y	es" on Form 990, Par	t IV, line 21, for any	
1 (a) Name and ac	ddress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose or assista	

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

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

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Schedule I (Form 990) 2022

Schedule I (Form 990) 2022

LEGAL PRIORITIES, INC.

85-1024198

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
7	17,500.	0.		
-	(b) Number of recipients 7	recipients cash grant	recipients cash grant cash assistance	

PART I, LINE 2:

STIPEND OPPORTUNITIES ARE PUBLICLY ADVERTISED WITH CLEARLY-DELINEATED

SELECTION CRITERIA. THE ORGANIZATION APPOINTS A SELECTION COMMITTEE THAT

EVALUATES ALL APPLICANTS ALONG THESE CRITERIA AND DOCUMENTS ITS DECISIONS

THOROUGHLY AND IN A TIMELY MANNER. THE BOARD ALSO SIGNS OFF ON THE

DECISIONS TO AWARD STIPENDS. ALL STIPEND RECIPIENTS MUST SIGN AN AGREEMENT

DELINEATING THE PURPOSE AND USE OF THE FUNDS. ALL SELECTED SUMMER INSTITUTE

PARTICIPANTS MET IN PERSON FOR THE EVENT, WHERE THEY PARTICIPATED IN TALKS,

SEMINARS, AND WORKSHOPS ALONGSIDE STAFF OF LEGAL PRIORITIES.

SCHEDULE O (Form 990) Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



85-1024198

LEGAL PRIORITIES, INC.

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

CURRENTLY LEADS US TO FOCUS ON THE PROTECTION OF FUTURE GENERATIONS.

OUR VISION IS A WORLD WITH EFFECTIVE LAWS THAT PROTECT THE INTEREST OF

FUTURE GENERATIONS.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

WE LAUNCHED THE LEGAL PRIORITIES SUMMER INSTITUTE, A 1-WEEK SUMMER

PROGRAM (WORKSHOPS, TALKS, PANELS) FOR LAW STUDENTS AND RECENT

GRADUATES WHO WANT TO LEARN MORE ABOUT OUR PRIORITIES. PARTICIPANTS

RECEIVED A STIPEND OF \$2,500 (PLUS REIMBURSEMENT FOR TRAVEL EXPENSES).

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

THE BOARD OF DIRECTORS REVIEWS AND DISCUSSES THE 990 AT A BOARD MEETING AND

VOTES TO APPROVE THE FORM BEFORE IT IS FILED.

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

BOARD MEMBERS MUST SIGN AN ANNUAL CONFLICT OF INTEREST STATEMENT. AT EVERY OFFICIAL BOARD MEETING, BOARD MEMBERS ARE REMINDED OF THEIR DUTY TO DECLARE

ANY CONFLICTS OF INTEREST THAT MAY EXIST. IF A CONFLICT EXISTS, BOARD

MEMBERS WITH A CONFLICT OF INTEREST REFRAIN FROM VOTING ON THE MATTER.

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

THE ORGANIZATION DRAFTED A COMPENSATION POLICY IN EARLY 2021 USING

EXTENSIVE COMPARABILITY DATA. THE POLICY WAS REVIEWED AND APPROVED BY

PERSONS WITHOUT A CONFLICT OF INTEREST, AND DELIBERATIONS WERE RECORDED IN

A TIMELY MANNER. ONE BOARD DIRECTORS RECEIVED COMPENSATION IN 2022.

LHAFor Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.Schedule O (Form 990) 202223221110-28-22

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Schedule O (Form 990) 2022 Name of the organization	Employer identification numb 85-1024198
LEGAL PRIORITIES, INC.	85-1024198
FORM 990, PART VI, SECTION C, LINE 19:	
OCUMENTS ARE MADE AVAILABLE TO THE PUBLIC ON THE ORGA	ANIZATION'S WEBSITE.
ORM 990, PART IX, LINE 11G, OTHER FEES:	
OTHER PROFESSIONAL FEES:	
PROGRAM SERVICE EXPENSES	202,056
ANAGEMENT AND GENERAL EXPENSES	5,834
FUNDRAISING EXPENSES	167
TOTAL EXPENSES	208,057
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	A 208,057
32212 10-28-22 39	Schedule O (Form 990) 2

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