

		PUB	BLIC DIS										
	Ω		Retur	n of Or	ganiza	atior	ו Exe	empt	: Fro	m lı	ncome	Tax	OMB No. 1545-0047
For	-		nder section 5	01(c), 527, o	r 4947(a)(1	l) of the	Interna	l Reven	ue Coo	de (exc	ept private fo	oundations)	2019
•		uary 2020)	► Do	not enter so	cial secur	ity num	bers on	this for	m as it	may b	e made publ	ic.	Open to Public
		of the Treasury enue Service									information.		Inspection
Α	For th	e 2019 calendar y	/ear, or tax ye	ar beginning	JUN	1,	2019	ar	nd endi	ing M	IAY 31,	2020	
Β	Check if applicab	le: C Name of org	ganization								D Employe	er identifica	tion number
	Addre chang		AL CRIM	E VICT	IM LAW	I INS	STITU	JTE					
	chang	ge Doing busin										087909)
	returr Final returr	Number and	d street (or P.0 SW MORRI			d to stre	et addres:	S)	Roor 20(m/suite)	E Telephor	ne number 3) 768 ·	-6819
	termi ated	n- City or towr	n, state or prov	/ince, country	, and ZIP (or foreig	n postal	code			G Gross recei	ots \$	4,458,830.
	Amer returr	PORTLA	ND, OR	97205		-					H(a) Is this	a group retu	rn
	Appli tion	^{ca-} F Name and a	address of prir	ncipal officer:	MARGA	RET	GARV	IN			for sub	ordinates?	Yes X No
	pend		C ABOV								H(b) Are all su	bordinates inclu	ded? Yes No
1	Tax-ex	empt status: 🚺	501(c)(3)	501(c) () 🖌 (insert no	o.)	4947(a)(1) or 🗌	527] If "No,'	' attach a lis	t. (see instructions)
		ite: 🕨 WWW . NC		;							H(c) Group	exemption i	number 🕨
κ	orm o	f organization: 🚺	Corporation	Trust	Associa	tion [Othe	r 🕨		L Year	of formation:	2003 м :	State of legal domicile: OR
Pa	art I	Summary											
	1	Briefly describe th	ne organizatior	1's mission or	r most sign	ificant a	activities:	то	PRON	1 OTE	BALANC	E AND	FAIRNESS
ы Б		IN THE JU			-								
Governance	2	Check this box	▶ if the	organization	discontinu	ed its o	peration	s or disp	osed o	of more	than 25% of	its net asset	S.
ver	3												11
පී	4	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)							11				
<u>م</u>	5	Total number of in											0
Activities &	6	Total number of v											36
Ĕ	79	Total unrelated bu		in from Part \	/III columr	(C) line	 ≏ 12						0.
¥	'a	Net unrelated bus											0.
	<u>ہ</u>	Net unrelated bus			10111 330-	1, III e o	5			<u></u>	Prior Yea		Current Year
	8	Contributions and	d grapts (Part)	(III line 1b)							1,609		3,980,423.
ne	9	Program service r										,427.	475,306.
Revenue	10	Investment incom									175	146.	222.
Be	10										-6	,092.	2,879.
	11	Other revenue (Pa									1,782		4,458,830.
	12	Total revenue - ad									1,702	0.	<u>4,450,050</u> .
	13	Grants and simila										0.	0.
	14	Benefits paid to o	r for members	(Part IX, colu	imn (A), lin	e4)				··	1 1 0 0		
es	15	Salaries, other co									1,100	500	1,138,455.
Expenses	16a	Professional fund									Δ,	,500.	0.
ã	b	Total fundraising	• •						073.	_	0.0.0	267	
ш	17	Other expenses (F										,267.	3,185,925.
	18	Total expenses. A									1,911,		4,324,380.
	19	Revenue less exp	enses. Subtra	ct line 18 fror	n line 12			<u></u>			-128		134,450.
Net Assets or										Be	ginning of Curi		End of Year
set	20	Total assets (Part	X, line 16)									,635.	1,197,918.
it As	21	Total liabilities (Pa										,874.	1,099,707.
		Net assets or fund		ubtract line 21	from line	20					-36	,239.	98,211.
	art II	•											
	-					-		-				-	nowledge and belief, it is
true	, corre	ct, and complete. Dec	claration of prep	arer (other tha	n officer) is	based or	n all inforr	nation of	which p	reparer	has any knowle	edge.	

Sign Here	Signature of officer MARGARET GARVIN, EXECU- Type or print name and title	TIVE DIRECTOR	Date		
Paid	Print/Type preparer's name SANG AHN	Preparer's signature D	Date Check PTIN if self-employed P005403		
Preparer	Firm's name MCDONALD JACOBS ,	P.C.	Firm's EIN ▶ 93-09005'	79	
Use Only					
May the II	RS discuss this return with the preparer shown abo	ve? (see instructions)	X Yes	No	
			- 00		

932001 01-20-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2019)

. ui	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III X
4	
1	Briefly describe the organization's mission: TO PROMOTE BALANCE AND FAIRNESS IN THE JUSTICE SYSTEM THROUGH
	CRIME-VICTIM-CENTERED LEGAL ADVOCACY, EDUCATION, AND RESOURCE SHARING.
	CRIME-VICTIM-CENTERED LEGAL ADVOCACY, EDUCATION, AND RESOURCE SHARING.
2	Did the organization undertake any significant program services during the year which were not listed on the
2	
	prior Form 990 or 990-EZ?
^	
3	
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
4.0	revenue, if any, for each program service reported. (Code:) (Expenses \$3,707,742. including grants of \$) (Revenue \$153,771.
4a	(Code:) (Expenses \$3,707,742. including grants of \$) (Revenue \$153,771. VICTIM LEGAL ASSISTANCE. SINCE 2003, NCVLI HAS BEEN LEADING THE
	NATIONAL EFFORT TO ENFORCE VICTIMS' RIGHTS THROUGH ITS CRIME VICTIMS'
	RIGHTS ENFORCEMENT PROJECTS. THESE PROJECTS ENSURE THAT VICTIMS HAVE
	ACCESS TO TRAINED NO COST, PRO BONO, AND LOW BONO ATTORNEYS AND
	ADVOCATES TO SECURE FOR THEM MEANINGFUL RIGHTS THROUGH THE EXERCISE OF
	THOSE RIGHTS IN STATE, FEDERAL, MILITARY AND TRIBAL TRIAL AND APPELLATE
	COURTS NATIONWIDE. THIS PAST YEAR, ACCOMPLISHMENTS OF NOTE WERE MANY -
	SOME WERE ONGOING EFFORTS AND OTHERS AS NEW INITIATIVES. THE WORK OF
	THREE ONGOING PROJECTS ARE NOTED HERE.
	ETDOM MO ENCLIDE NAMTONAL CADACIMY NOVIT HAD MUDEE NAMTONAL
	FIRST, TO ENSURE NATIONAL CAPACITY NCVLI HAD THREE NATIONAL
	INITIATIVES. WE CONTINUED A NATIONAL PROJECT TO PROVIDE TRAINING AND
4b	(Code:) (Expenses \$ 277,145. including grants of \$) (Revenue \$ 305,536.
	EDUCATION ON VICTIMS' RIGHTS: NCVLI'S DEDICATION TO EDUCATING ON THE
	CURRENT STATUS AND FUTURE HORIZON OF VICTIMS' RIGHTS IS DEMONSTRATED
	THROUGH TRAININGS, PUBLICATIONS AND COLLABORATIONS WITH OTHER JUSTICE
	ENTITIES. OVER THE YEAR, NCVLI MORE THAN 2,000 JUSTICE PROFESSIONALS ON THE MEANING AND ENFORCEABILITY OF VICTIMS' RIGHTS. THESE TRAININGS
	INCLUDED INTENSIVE IN-PERSON TRAININGS AND LECTURES,
	TECHNOLOGY-ASSISTED TRAININGS, AND VICTIMS' RIGHTS EDUCATIONAL
	MATERIALS. CENTRAL TO NCVLI'S TRAINING EFFORT WERE (1) THE ANNUAL CRIME
	VICTIM LAW CONFERENCE, HELD IN PORTLAND, OREGON, WHICH OFFERED A WIDE
	RANGE OF TRAINING FOR NOVICE AND EXPERIENCED ATTORNEYS AND ADVOCATES ON
	CRIME VICTIM LAW PRACTICE AND POLICY; (2) THE STATE VICTIM ASSISTANCE
	ACADEMY OF OREGON, AT WHICH NCVLI PROVIDES FOUNDATIONAL AND ADVANCED
4 -	
4C	(Code:) (Expenses \$10,752. including grants of \$) (Revenue \$16,000. NCVLI'S WORK WITH STUDENTS CONTINUED. SPECIFICALLY NCVLI CONTINUED ITS
	INTERNSHIP/EXTERNSHIP PROGRAM WHICH IS OPEN TO UNDERGRADUATE, GRADUATE
	AND LAW STUDENTS, AND TAUGHT THE CRIME VICTIM LITIGATION CLINIC OF THE
	LEWIS & CLARK LAW SCHOOL, WHICH PROVIDED SECOND- AND THIRD-YEAR LAW
	STUDENTS THE OPPORTUNITY TO SUPPORT ONGOING NATIONAL VICTIM LITIGATION
	AND RESEARCH THROUGH THIS PROGRAM. NCVLI'S DIRECTOR ALSO TEACHES A
	SUBSTANTIVE CRIME VICTIM COURSE AT LEWIS & CLARK LAW SCHOOL.
1 B T O 2 D P ff 3 If D S re 4 S re 4 S re 4 Aa 4a Aa 4b Ab 4c Aa	SUBSTRATIVE CRIME VICTIM COURSE AT DEWIS & CHARK DAW SCHOOL.
4d	Other program services (Describe on Schedule O.)
ти	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 3,995,639.
	Form 990 (2019
	CEE COMEDINE O FOR COMMINIANTON (C)
32002	

Form	990	(2019)
FUIII	330	120131

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
•	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		x
44	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.			
d	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	11a	х	
h	Part VI		- 23	
D		11b		x
c	assets reported in Part X, line 16? <i>If "Yes," 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			
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ь	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			
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
e	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)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	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	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
32003	01-20-20	Form	990	(2019)

932003 01-20-20

Form	990	(2019)	
	330	(2013)	

			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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
•	any tax-exempt bonds?	24c		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2-14		
254	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	254		
U				
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	0.5%		x
06	Schedule L, Part I	25b		
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			v
00	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 Schedule L, Part IV			
-	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>	00-		v
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			- v
	"Yes," complete Schedule L, Part IV	28c		X X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		
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 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
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			<u></u>
	If "Yes," complete Schedule R, Part V, line 2	36		X X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u></u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
De	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par				
	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	•		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	000	 (a.c. : : :
932004	01-20-20	Form	990	(2019)
	4			

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Form 990 (2019)				INSTITUTE	
Part V Stater	ments Regarding Othe	er IRS Filings	s and Tax Cor	npliance (continued)	

a Initiation fees and capital contributions included on Part VIII, line 12 10a 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: 10a a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e_file</i> (see instructions) 3a D Did the organization have unrelated business gross income of \$1,000 rmce during the year? 3a b If "Yes," has it filed a Form 990-T for this year? <i>It "No" to line 3b, provide an explanation on Schedule O</i> 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account is a forgin countly such as a bank account, securities account, or other financial accounts (FBAR). 5a Se instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Ob dary taxable party notify the organization file Form 8866-17? 6a Ob ces 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? 5a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7a 0 Did the organization notify the donor of the value of the goods or services provided? 7a 16 Horganization receive a pymenium, directly or indirectly, on a presonal benefit contract? 7a 16 Horgan		
Note: If the sum of lines 1 a and 2a is greater than 250, you may be required to e-file (see instructions) 3a 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a b If "Yees," has it filed a Form 990-T for this year? If "Yoe" (in Ba 2b, provide an explanation on Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a tinancial accountly is there is the organization have an interest in, or a signature or other authority over, a tinancial account in a foreign country § 4a b If "Yees," enter the name of the foreign country § 5a 5b Did any taxable party notify the organization that if was or is a party to a prohibited tax shelter transaction? 5a 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that if was or is a party to a prohibited tax shelter transaction? 5a 6 Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible a contributions? 5a 7 Or organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? filed during the year 7a 7 d If "Yes," indicate the number of Forms 8282 filed during the year? 7a 7 d If the organization neceive a portibution of qualified intellectual property, for which it was required? 7c <tr< th=""><th></th><th></th></tr<>		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a b f1*Yes,* has it filed a Form 990.T for this year? if *No* to line 3b, provide an explanation on Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a 4a b If *Yes,* enter the name of the foreign country > > 5a 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 5a Did any taxable party notify the organization file Form 8886-17? 6a 6a 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? 5a 6 To Granization netwer way tax deductible contributions under section 170(c). 6a 7 Organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c 7 Did the organization neceived a contribution of qualified intellectual property, did the organization file Form 8282? 7c 7 Did the organization neceive a any tawable distributiton sunder section 470(c		
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule 0 3b 4a 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 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 5a Was the organization a party to a prohibited tax shelter transaction? 5a 5a Did any taxable party notify the organization file Form 8886-17? 5a 6a Does the organization include with every solicitation an express statement that \$100,000, and did the organization solicit any contributions that were not tax deductible ac chartable contributions? 5c 6b Dr organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7a 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b 7c Tod 7a 7a 7c If the organization and y they donor of the value of the goods or services provided? 7b 7c Tod 7a 7a 7b If the organization no		
4a 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 b If "Yes," enter the name of the foreign country b 5a See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a 16 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a 16 U dany taxable party notify the organization file Form 8886-17? 5c 6a 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 chartable contributions? 5b 7b If "Ves," idid the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c). 6b 7 Organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7a 7c If the organization notify the donor of the value of the goods or services provided? 7a 7c If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c 7d If "Yes," indicate the number of Forms 8282 filed during the year? 7a 9 Did the organization received a contribution of qualified intelectual pro	X X X	-
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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 12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state?		_
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		
c Enter the amount of reserves on hand		
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a 14b 14b 14b	<u> </u>	_
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	1	_
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	v	
If "Yes," see 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.	x	

Form **990** (2019)

932005 01-20-20

Form 990	(2019)
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NATIONAL CRIME VICTIM LAW INSTITUTE

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

1

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

					Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year	1 a	11	4		
	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	11	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with a	ny other			
	officer, director, trustee, or key employee?			2		2
3	Did the organization delegate control over management duties customarily performed by or under the	e direct	supervision			
				3		
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		2
6	Did the organization have members or stockholders?			6		2
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					,
	more members of the governing body?			7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st					,
-	persons other than the governing body?			7b		Σ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		0		v	
a	The governing body?			<u>8a</u>	X X	-
b	Each committee with authority to act on behalf of the governing body?			8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					2
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Re			9		2
	ternal He choices (This Section B requests information about policies not required by the internal He	venue	_0de.)		Yes	N
10a	Did the organization have local chapters, branches, or affiliates?			10a	163	
	If "Yes," did the organization have written policies and procedures governing the activities of such ch					+
5		•		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body			11a	x	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	,	g tre rettri			
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? // "/					
	in Schedule O how this was done	,		12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approva					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
	Other officers or key employees of the organization			15b		2
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent wi	th a			
	taxable entity during the year?			16a		2
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its pa	articipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization	'S			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright OR					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	nd 990-	T (Section 501(c)(3)	s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain		,			
	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	nflict o	f interest policy, an	d finan	cial	
19						
	statements available to the public during the tax year.					
19 20	statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's box ELLEN DULLY - (503) 768-6853	oks and	records			
	State the name, address, and telephone number of the person who possesses the organization's boot ELLEN DULLY - (503) 768-6853	oks and				

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Par

(E)

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

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

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

(B)

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

 (\mathbf{C})

(D)

 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 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	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week		cer ar I	id a d	irecto	r/trus I	tee)	from	from related	other
	(list any	ector	Individual trustee or director Institutional trustee Officer					the	organizations	compensation
	hours for	or dir				ted		organization	(W-2/1099-MISC)	from the
	related	stee	ruste			pense		(W-2/1099-MISC)		organization
	organizations	ial tru	onal		ploye	ee com				and related
	below line)	dividu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) HELENE R. DAVIS	1.00	-	<u> </u>	Q	Ъ	토등	요			
PRESIDENT	1.00	х		x				0.	0.	0.
(2) LISA ZAUNER	1.00	Λ		1				0.	0.	
TREASURER	1.00	x		x				0.	0.	0.
(3) DOUGLAS BELOOF	1.00			- 23						
SECRETARY		x		x				0.	0.	0.
(4) DIANE BARKER HARROLD	1.00									
BOARD MEMBER		х						0.	Ο.	0.
(5) KATHLEEN CADY	1.00									
BOARD MEMBER		х						0.	0.	0.
(6) JOHN GILLIS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(7) RYAN GUILDS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) JANIS PURACAL	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) SEAN RIDDELL	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) JENNIFER STORM	1.00									•
BOARD MEMBER	1 00	Х						0.	0.	0.
(11) ASHLEY VAUGN	1.00								0	0
BOARD MEMBER (12) MARGARET GARVIN	27 50	Х						0.	0.	0.
EXECUTIVE DIRECTOR	37.50			x				114,656.	0.	29,825.
EXECUTIVE DIRECTOR				^				114,050.	0.	29,023.
		-								
932007 01-20-20	I	I						1		Form 990 (2019)
302007 01-20-20										1 0111 (2010)

	990 (2019) NATIONAL	CRIME V	ΊC	TI	М	LA	W	IN	ISTITUTE	71-08	379	090	Pa	age 8
Par	t VII Section A. Officers, Directors, Trust	ees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
	(A)	(B)			(0				(D)	(E)			(F)	
	Name and title	Average	(do		Posi		i than c	ne	Reportable	Reportable		Es	timate	d
		hours per	box	, unles	ss per	son i	s both	an	compensation	compensatio	n	an	nount	of
		week		cer an	d a di	irecto	r/trust	iee)	from	from related			other	
		(list any	rector						the	organizations	I		pensa	
		hours for related	or di	ee			ated		organization	(W-2/1099-MIS	;C)		om the	
		organizations	ustee	trust		e	upens		(W-2/1099-MISC)			•	anizati d relati	
		below	lual tr	tional		ploy	st con yee	L					anizatio	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orge	a nzaci	5110
				_	0	×	1 0	4						
	Subtotal								114,656.		0.	2	9,82	
	Total from continuation sheets to Part VII								0.		0.			0.
	Total (add lines 1b and 1c)								114,656.		0.	2	9,82	25.
2	Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	ł			1
	compensation from the organization												Yes	<u>1</u> No
•								I			ſ		res	NO
3	Did the organization list any former officer,	-		•	•	•		Ŭ	• •			0		v
	line 1a? If "Yes," complete Schedule J for su											3		X
4	For any individual listed on line 1a, is the su													х
_	and related organizations greater than \$150											4		
5	Did any person listed on line 1a receive or a											-		Х
Sect	rendered to the organization? If "Yes." comp tion B. Independent Contractors	plete Schedule	e J fo	or su	ich p	pers	on .					5		Λ
1	Complete this table for your five highest cor	npensated inc	ene	nder	nt co	ontra	actor	s th	nat received more than \$	100 000 of comp	ensat	tion fro	m	
•	the organization. Report compensation for t										onout			
	(A)								(B)			(0	;)	
	Name and business	address	NC	ONE	2				Description of s	ervices	C	ompe	nsatio	า
2	Total number of independent contractors (in	cluding but n	ot lin	nited	l to t	thos	e lis	ted	above) who received me	ore than				
	\$100,000 of compensation from the organiz	-				C							000 //	

Form **990** (2019)

932008 01-20-20

Ра	πνιι								
		Check if Schedule O	contains a res	ponse	or note to any lin	<u>ie in this Part VIII</u>	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded
							function revenue	business revenue	from tax under sections 512 - 514
s s	1 a	Federated campaigns	1:						
Contributions, Gifts, Grants and Other Similar Amounts	b		11			-			
D Gr	c	Fundraising events		-					
ifts, r A	b b	Related organizations		-					
s, G nila	e	Government grants (contr			891,940.				
ons	f	All other contributions, gifts,							
her	-	similar amounts not included		-	88,483.				
lot	g	Noncash contributions included in		g \$	4,525.				
Cor and	h	Total. Add lines 1a-1f			-	3,980,423.			
					Business Code				
e	2 a	TRAINING ASSI	STANCE	CO	541900	269,012.	269,012.		
vic	b	ANNUAL CONFER	ENCE		541900	146,796.			
Ser	с	CLINICS			541900	45,988.	45,988.		
am eve	d	TUITION & FEE	S		541900	13,510.	13,510.		
Program Service Revenue	е					-	-		
Pro	f	All other program service	revenue						
	g	Total. Add lines 2a-2f				475,306.			
	3	Investment income (includ	ding dividends	s, intere	est, and				
		other similar amounts)			►	222.			222.
	4	Income from investment of	of tax-exempt	bond p	oroceeds 🕨 🕨				
	5	Royalties	· . <u></u>	<u></u>	🕨				
			(i) R	eal	(ii) Personal				
	6 a	Gross rents	6a						
	b	Less: rental expenses	6b						
	с	Rental income or (loss)	6c						
	d	Net rental income or (loss))		🕨				
	7 a	Gross amount from sales of	(i) Secu	urities	(ii) Other				
		assets other than inventory	7a						
	b	Less: cost or other basis							
anı		and sales expenses	7b						
Revenue		Gain or (loss)	7c						
		Net gain or (loss)			····· 🕨				
ther	8 a	Gross income from fundraising							
Oth		including \$		f					
		contributions reported on	-						
	_	Part IV, line 18							
		Net income or (loss) from	-		<u> </u>				
	9 a	Gross income from gamin							
		Part IV, line 19							
			aomina ootivi		L				
		Net income or (loss) from Gross sales of inventory, I							
	10 a	and allowances		10a					
	h	Less: cost of goods sold							
		Net income or (loss) from							
	Ū				Business Code				
SNC	11 a	MISCELLAENOUS	INCOME	2	900099	2,879.	2,879.		
nec	b					,	,		
ella wei	c								
Miscellaneous Revenue	d	All other revenue							
Σ	e	Total. Add lines 11a-11d			>	2,879.			
	12	Total revenue. See instruction				4,458,830.	478,185.	0.	222.
93200	9 01-20-	-20							Form 990 (2019)

NATIONAL CRIME VICTIM LAW INSTITUTE

Form 990 (2019)

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NATIONAL CRIME VICTIM LAW INSTITUTE Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respons	e or note to any line in t	his Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		·		•
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	144,135.	115,886.	26,017.	2,232.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	754,068.	606,279.	136,114.	11,675.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	62,534.	50,278.	11,288.	968.
9	Other employee benefits	108,320.	87,090.	19,553.	968. 1,677. 1,074.
10	Payroll taxes	69,398.	55,797.	12,527.	1,074.
11	Fees for services (nonemployees):				-
а	Management				
	Legal				
	Accounting	12,825.		12,825.	
	Lobbying	2,000.			2,000.
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
5	column (A) amount, list line 11g expenses on Sch O.)	132,761.	122,781.	9,980.	
12	Advertising and promotion	799.	799.	,	
13	Office expenses	28,787.	18,543.	7,816.	2,428.
14	Information technology	11,108.	4,375.	5,938.	795.
15	Royalties			,	
16	Occupancy	69,433.	53,072.	14,886.	1,475.
17	Travel	25,123.	25,123.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	68,587.	67,118.	108.	1,361.
20	Interest		, <u> </u>		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,680.		2,680.	
24	Other expenses. Itemize expenses not covered	_,		_,	
24	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	SUBRECIPIENTS	2,780,453.	2,780,453.		
b	ADMIN SERVICES	34,799.	2,,00,1000	34,799.	
c	BANKS FEES	10,393.	7,987.	18.	2,388.
d		_ 0,000.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		2,000
	All other expenses	6,177.	58.	6,119.	
25	Total functional expenses. Add lines 1 through 24e	4,324,380.	3,995,639.	300,668.	28,073.
<u>25</u> 26	Joint costs. Complete this line only if the organization	1,521,5000			20,013
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

11 2019.05010 NATIONAL CRIME VICTIM LAW 6849___1

		Check if Schedule O contains a response or no	te to an	v line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1,310.	1	1,190.	
	2	Savings and temporary cash investments			104,100.	2	311,874.
	3	Pledges and grants receivable, net		485,057.	3	862,049.	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs	ontributor, or 35%				
		controlled entity or family member of any of the			5		
	6	Loans and other receivables from other disqual	ified per	sons (as defined			
		under section 4958(f)(1)), and persons describe	tion 4958(c)(3)(B)		6		
s	7	Notes and loans receivable, net			7		
Assets	8	Inventories for sale or use				8	
As	9	–			50,168.	9	22,805.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	18,000.			
	b	Less: accumulated depreciation	10b	18,000.	0.	10c	0.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equ			640,635.	16	1,197,918.
	17	Accounts payable and accrued expenses		176,967.	17	396,886.	
	18	Grants payable				18	
	19	Deferred revenue	23,768.	19	0.		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete				21	
	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, subs					
ilidi		controlled entity or family member of any of the				22	
Ë	23	Secured mortgages and notes payable to unrel				23	
	24	Unsecured notes and loans payable to unrelate		· · · · · · · · · · · · · · · · · · ·		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on line					
		of Schedule D			476,139.	25	702,821.
	26	Total liabilities. Add lines 17 through 25			676,874.	26	1,099,707.
		Organizations that follow FASB ASC 958, ch	eck her	e 🕨 X			
es		and complete lines 27, 28, 32, and 33.					
anc	27				-37,239.	27	97,211.
Bal	28	Net assets with donor restrictions			1,000.	28	1,000.
pu		Organizations that do not follow FASB ASC					
Ъu		and complete lines 29 through 33.	-				
P C	29	Capital stock or trust principal, or current funds	6			29	
șets	30	Paid-in or capital surplus, or land, building, or e				30	
Ass	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32	Total net assets or fund balances		······	-36,239.	32	98,211.
Z	33	Total liabilities and net assets/fund balances			640,635.	33	1,197,918.

Form **990** (2019)

Form 990 (2019)
Part X Balance Sheet

	1990 (2019) NATIONAL CRIME VICTIM LAW INSTITUTE	71-087	79090	Pa	_{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				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,458	<u> </u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,324		
3	Revenue less expenses. Subtract line 2 from line 1	3			50.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-30	5,2	39.
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	98	3,2	<u>11.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		X
				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 in 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	e 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?		. 2 c	Х	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	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 Sir	gle Audit			1
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				
			F =	aan .	(2010)

Form **990** (2019)

932012 01-20-20

(Form 990 or 990-EZ)

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.

OMB No. 1545-0047
2019
Open to Public Inspection

	t of the Treasury venue Service			Attach to Form 990 or F			formation		Open to Public Inspection	
	of the organizati		Go to www.irs.go	v/Form990 for instruction	ons and th	ie latest ir	formation.	Employer	identification number	
Name C			ONAL CRIME	VICTIM LAW	INSTI	יווייד			1-0879090	
Part	Reason			All organizations must co			e instructions		1 0079090	
The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							VAVi).			
2	7			Attach Schedule E (Form			·/···			
3	7			anization described in se			i).			
4		•		njunction with a hospital			•	(iii). Enter	the hospital's name,	
	city, and stat		·						•	
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
	section 170	(b)(1)(A)(iv). (C	Complete Part II.)							
6	A federal, sta	ate, or local gov	vernment or governn	nental unit described in	section 17	70(b)(1)(A)	(v).			
7 X	An organizat	ion that norma	lly receives a substa	ntial part of its support fr	om a gove	ernmental	unit or from th	ie general p	oublic described in	
	section 170	(b)(1)(A)(vi). (C	omplete Part II.)							
8	A community	/ trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)					
9	An agricultur	al research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college	
	or university	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or	
	university:									
10 🗌	-		•	than 33 1/3% of its supp					•	
				ct to certain exceptions,						
				(less section 511 tax) fro	m busines	ses acquii	red by the org	anization a	tter June 30, 1975.	
11	-		mplete Part III.)	ively to test for public as	Total Case	oootion EC	O(a)(A)			
12	¬ -	-	-	ively to test for public sat ively for the benefit of, to	•			rny out the	nurnoses of one or	
	-	-	-	ed in section 509(a)(1) o	-			-		
				f supporting organization						
a		-	• •	supervised, or controlled				-	aivina	
			-	gularly appoint or elect a	• • • •	-				
		-	complete Part IV, Se		, ,					
ь	Type II. A	supporting org	anization supervised	l or controlled in connect	ion with it:	s supporte	d organizatio	n(s), by hav	ring	
	control or r	management o	f the supporting org	anization vested in the sa	ame perso	ns that co	ntrol or manag	ge the supp	ported	
	organizatio	on(s). You mus	t complete Part IV,	Sections A and C.						
c	Type III fu	nctionally inte	grated. A supportin	g organization operated	in connect	tion with, a	and functional	ly integrate	d with,	
_	its support	ed organization	n(s) (see instructions). You must complete I	Part IV, Se	ctions A,	D, and E.			
d	Type III no	on-functionally	integrated. A supp	porting organization oper	ated in co	nnection w	ith its suppor	ted organiz	zation(s)	
		,	0 0	zation generally must sat			•	an attentiv	reness	
г				nplete Part IV, Sections						
e		•		written determination from			Type I, Type	I, Type III		
				nally integrated supporting						
	nter the number		n about the supporte	d organization(a)						
<u> </u>	(i) Name of supp		(ii) EIN	(iii) Type of organization		anization listed	(v) Amount of	monetary	(vi) Amount of other	
	organization	n		(described on lines 1-10 above (see instructions))	in your governi Yes	No	support (see ir	structions)	support (see instructions)	
Total										

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932021 09-25-19 Schedule A (Form 990 or 990-EZ) 2019 13

Schedule A (Form 990 or 990-EZ) 2019 NATIONAL CRIME VICTIM LAW INSTITUTE 71 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	636,229.	831,123.	866,051.	1609001.	3980423.	7922827.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	636,229.	831,123.	866,051.	1609001.	3980423.	7922827.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						48,232.
6	Public support. Subtract line 5 from line 4.						7874595.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 4	636,229.	831,123.	866,051.	1609001.	3980423.	7922827.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1,367.	646.	198.	146.	222.	2,579.
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.)				35,134.	2,879.	38,013.
11	Total support. Add lines 7 through 10					,	7963419.
	Gross receipts from related activities,	etc. (see instructio	ins)			12 1	,214,652.
	First five years. If the Form 990 is for			, fourth, or fifth ta	x vear as a section		, ,
	organization, check this box and stor				-		
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2019 (I	ine 6, column (f) div	vided by line 11, c	olumn (f))		14	98.88 %
15	Public support percentage from 2018	Schedule A, Part	II, line 14			15	96.10 %
	33 1/3% support test - 2019. If the o					ore, check this bo>	and
	stop here. The organization qualifies						N V
b	33 1/3% support test - 2018. If the o	organization did no	t check a box on li				
	and stop here. The organization qual	-				·	
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			-	-		
b	10% -facts-and-circumstances test	-					
	more, and if the organization meets th	-					
	organization meets the "facts-and-circ						
18	Private foundation. If the organizatio		•	-			
				,,, c. // o			

Schedule A (Form 990 or 990-EZ) 2019

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Schedule A (Form 990 or 990-EZ) 2019 NATIONAL CRIME VICTIM LAW INSTITUTE Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8 Sec	Public support. (Subtract line 7c from line 6.) Ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10 <i>a</i>	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is fo	r the organization's	s first, second, thi	rd, fourth, or fifth t	tax year as a sectio	n 501(c)(3) orga	anization,
0	check this box and stop here						
	ction C. Computation of Publi						
	Public support percentage for 2019 (column (f))		15	%
	Public support percentage from 2018					16	%
	ction D. Computation of Inves						
	Investment income percentage for 20 Investment income percentage from					17 18	<u> </u>
19a	1 33 1/3% support tests - 2019. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than 3		ne 17 is not
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2018. If the						%, and
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19	9a, or 19b, check t	his box and see ins	structions	
93202	23 09-25-19				Sch	edule A (Form	990 or 990-EZ) 2019
			15	5			

Schedule A (Form 990 or 990-EZ) 2019 NATIONAL CRIME VICTIM LAW INSTITUTE

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

Yes No

Part IV Supporting Organizations

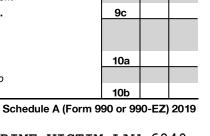
(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete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

Section A. All Supporting Organizations

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

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Schedule A (Form 990 or 990-EZ) 2019 NATIONAL CRIME VICTIM LAW INSTITUTE 71-0879090 Page 5 Part IV Supporting Organizations (continued) 71-0879090 Page 5

			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 in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
-			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	1		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	
•	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 in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	<u>2a</u>		
a	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	2b		
3	activities but for the organization's involvement. Parent of Supported Organizations. Answer (a) and (b) below.	2.0		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
u	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
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.	3b		

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Schedule A (Form 990 or 990-EZ) 2019

	dule A (Form 990 or 990 EZ) 2019 NATIONAL CRIME VICTIM L			71-0879090 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov. 20, 1970 (explain in	Part VI). See instructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ly integrat	ted Type III supporting or	ganization (see

Schedule A (Form 990 or 990-EZ) 2019

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instructions).

Schedule A (Form 990 or 990 EZ) 2019 NATIONAL CRIME VICTIM LAW INSTITUTE

Fai	I v I spe III Non-Functionally Integrated 509	a)(3) Supporting Orga	inizations (continued)	1
Secti	on D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	e organization is responsive	9	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
_1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
с	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
с	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

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Schedule A	(Form 990 or 990-EZ) 2019	NATIONAL	CRIME	VICTIM	LAW	INSTITUTE	71-0879090	Page 8
Part VI	Supplemental Infor	mation. Provid	e the explana	ations required	by Part	II, line 10; Part II, line	e 17a or 17b; Part III, line 12;	
	Part IV, Section A, lines 1	l, 2, 3b, 3c, 4b, 4c	, 5a, 6, 9a, 9	b, 9c, 11a, 11b), and 11	Ic; Part IV, Section E	8, lines 1 and 2; Part IV, Sectio 1; Part V, Section B, line 1e; P	n C, art V
	Section D, lines 5, 6, and	8; and Part V, Se	ction E, lines	2, 5, and 6. Al	, 20, 3a, so comp	blete this part for any	additional information.	art v,
	(See instructions.)					-		
932028 09-25-1	9					9	Schedule A (Form 990 or 990	-EZ) 2019

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

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

OMB No. 1545-0047

2019

Employer identification number

-1					
NATIONAL	CRIME	VICTIM	LAW	INSTITUTE	

71-0879090

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

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

General Rule

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

Special Rules

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

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

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

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

 $\label{eq:LHA} \ \ \mbox{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Employer identification number

71-0879090

NATIONAL CRIME VICTIM LAW INSTITUTE

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

			1
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$3,841,304.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

12031209 781409 6849

Name of organization

Employer identification number

NATIONAL CRIME VICTIM LAW INSTITUTE

71-0879090

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art 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.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
Part I			
		\$	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate) (See instructions.)	(d) Date received
Part I			
		\$	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate) (See instructions.)	(d) Date received
Part I			
		\$	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(See instructions.)	
		\$	
(a)			
No. from	(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
Part I		(See instructions.)	

23

Schedule I	B (Form 990, 990-EZ, or 990-PF) (2019)				Page 4		
Name of o	rganization				Employer identification number		
NATIO	NAL CRIME VICTIM LAW INS	STITUTE			71-0879090		
Part III		ions to organizations desc) through (e) and the follow	ina line entry. For o	organizations	that total more than \$1,000 for the year		
	Use duplicate copies of Part III if additional	space is needed.		· · · · · · · · · · · · · · · · · · ·			
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Des	cription of how gift is held		
	- <u></u>	(c) Trong	for of sift				
	Transferee's name, address, a		fer of gift	elationshin of tra	ansferor to transferee		
(a) No							
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Des	cription of how gift is held		
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Des	cription of how gift is held		
		(o) Trans	fer of gift				
	T						
	Transferee's name, address, a	Πα ΖΙΡ + 4			ansferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Des	cription of how gift is held		
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	R	elationship of tra	ansferor to transferee		
002454 11.00	2 10			Sabadula	B (Form 990, 990-F7, or 990-BE) (2019)		

Z, or 990-PF) (

12031209 781409 6849

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

9 **ZU** Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

Section 527 organizations: Complete Part I-A only.

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

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

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

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

• Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization

Name of org	anization	Employe	er identificatio	n number
	NATIONAL CRIME VICTIM LAW INSTITUTE		71-08790	90
Part I-A	Complete if the organization is exempt under section 501(c) or is a section	527 orga	nization.	
<u> </u>				
1 Provide	a description of the organization's direct and indirect political campaign activities in Part IV.			
2 Politica	I campaign activity expenditures	▶\$_		
	er hours for political campaign activities			
Part I-B	Complete if the organization is exempt under section 501(c)(3).			
1 Enter th	e amount of any excise tax incurred by the organization under section 4955	▶\$_		
	e amount of any excise tax incurred by organization managers under section 4955			
	ganization incurred a section 4955 tax, did it file Form 4720 for this year?			🗌 No
4a Was a (correction made?		Yes	No No
	" describe in Part IV.			
Part I-C	Complete if the organization is exempt under section 501(c), except section	<u>າ 501(c)(3</u>).	
1 Enter th	e amount directly expended by the filing organization for section 527 exempt function activities	► \$		
2 Enter th	e amount of the filing organization's funds contributed to other organizations for section 527			
exempt	function activities	► \$		
3 Total ex	empt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,			
line 17)	►\$_		
4 Did the	filing organization file Form 1120-POL for this year?		Yes	🗌 No
5 Enter th	e names, addresses and employer identification number (EIN) of all section 527 political organizations	to which th	e filing organiza	ation
•	ayments. For each organization listed, enter the amount paid from the filing organization's funds. Also			
ما است می م	the second se			

contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

Schedule C (Form 990 or 990-EZ) 2019

932041 11-26-19

Schedule C (Form 990 or 990-EZ) 2019						879090 Page 2	
Part II-A Complete if the org section 501(h)).	anization	is exem	ipt under section	501(c)(3) and file	ed Form 5768 (ele	ction under	
		to on offili	ated and on a list in				
	-		÷ · ·	Part IV each amiliated	group member's name	e, address, Elin,	
expenses, and shar			• •	visions analy			
<u> </u>	Check Ch						
(The term "expend	ditures" mea	ans amour	nts paid or incurred.)		organization's totals	totals	
1a Total lobbying expenditures to influ	uence public	opinion (g	rassroots lobbying)		449.		
b Total lobbying expenditures to influ	b Total lobbying expenditures to influence a legislative body (direct lobbying)						
c Total lobbying expenditures (add lir	nes 1a and 1	b)			449.		
d Other exempt purpose expenditure					4,295,858.		
e Total exempt purpose expenditures	s (add lines ⁻	Ic and 1d)			4,296,307.		
f Lobbying nontaxable amount. Ente	er the amoun	t from the	following table in both	n columns.	364,815.		
If the amount on line 1e, column (a) o	or (b) is:	The lobb	oying nontaxable amo	ount is:			
Not over \$500,000		20% of t	he amount on line 1e.				
Over \$500,000 but not over \$1,000	0,000	\$100,00	0 plus 15% of the exce	ess over \$500,000.			
Over \$1,000,000 but not over \$1,50	00,000	\$175,00	0 plus 10% of the exce	ess over \$1,000,000.			
Over \$1,500,000 but not over \$17,0	000,000	\$225,00	0 plus 5% of the exces	s over \$1,500,000.			
Over \$17,000,000		\$1,000,0	00.				
					91,204.		
g Grassroots nontaxable amount (en	g Grassroots nontaxable amount (enter 25% of line 1f)						
h Subtract line 1g from line 1a. If zero	o or less, ent	er -0			0.		
i Subtract line 1f from line 1c. If zero					0.		
j If there is an amount other than zer	ro on either l	ine 1h or li	ne 1i, did the organiza	tion file Form 4720	-		
reporting section 4911 tax for this						Yes No	
<i>(</i> 2			raging Period Under	• •			
(Some organizations the second s			1(h) election do not h te instructions for lin	•	of the five columns be	low.	
	Lobby	ing Expen	ditures During 4-Yea	r Averaging Period	I		
Calendar year (or fiscal year beginning in)	(a) 20	16	(b) 2017	(c) 2018	(d) 2019	(e) Total	
2a Lobbying nontaxable amount	170	,588.	178,978.	244,585.	364,815.	958,966.	
b Lobbying ceiling amount (150% of line 2a, column(e))						1,438,449.	
c Total lobbying expenditures	3	,583.	1,506.	1,506.	449.	7,044.	
d Grassroots nontaxable amount	42	,647.	44,745.	61,146.	91,204.	239,742.	
e Grassroots ceiling amount							
(150% of line 2d, column (e))						359,613.	
f Grassroots lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2019

Schedule C (Form 990 or 990-EZ) 2019 NATIONAL CRIME VICTIM LAW INSTITUTE 71-0879090 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)
of the	e lobbying activity.	Yes	No	Amo	unt
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
g					
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5), or sec	tion	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from th				
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered " answered "Yes."	'No" OR (b) Part I		3, is
1	Dues, assessments and similar amounts from members		. 1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al			
_	expenses for which the section 527(f) tax was paid).		0		
	Current year				
	Carryover from last year				
-	Total				
3 4			3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po				
			4		
5	expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)		. 4		
	t IV Supplemental Information		5		
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list): Part II A	lines 1 or	nd 2 (600	
	ictions); and Part II-B, line 1. Also, complete this part for any additional information.		., iii oo i ai	10 2 1000	

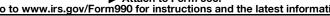
Schedule C (Form 990 or 990-EZ) 2019

SCHEDULE D)
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Department of the Treasury Internal Revenue Service

9 0)

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.





NATIONAL CRIME VICTIM LAW INSTITUTE

Employer identification number 71-0879090

organization answered "Ves" on Form 990, Part IV, line 6. I Trial number at end of year Aggregate value of contributions to (during year) Did the organization inform al donors and donor advisors in writing that the assets held in donor advised funds are the organization inform al donors and donor advisors in writing that grant funds can be used only for chartable purposes and not for the borelli of the donor or donor advisor, or form any other purpose confering impermisable purvate benefit of the donor or donor advisor, or form any other purpose confering impermisable purvate benefit of the organization (free dat al that apply). Part III Conservation easements held by the organization check al that apply. Part Beservation of an for public use (for example, recreation or education) Preservation of a historically inported benefit Or done space Complete lines a through 2014 the organization held a qualified conservation contribution in the form of a context and area Held at the End of the Tax Year a Total number of conservation easements Device of conservation easements and other data that apply. No Conservation easements con a certified biotic structure Device of conservation easements con a certified biotic structure Device of conservation easements con a certified biotic structure Device of conservation easements con a certified biotic structure Device of states where property subject to conservation easements is located Aunthor of conservation easements modified, transferred, nanding of violations, and enforcing conservation easements during the year Aunthor of states where property subject to conservation easements is located Total and under transferred on the conservation easements is located Aunthor of conservation easements modified, transfer	Par	tl	Organizations Maintaining Donor Advised	d Funds or Other S	imilar Funds (or Accoun	Its. Complete if th	ne
1 Total number at end of year Aggregate value of contributions to (during year) Aggregate value of contributions to (during year) Aggregate value of antist from (during year) Aggregate value of antist from (during year) Did the organization inform all donors advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor advisor, or for any other purpose conferring impermised private benefit? Part III Conservation Easements. Complete if the organization inform all privates, donors, advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermised private benefit? Part III Conservation Easements. Complete if the organization inform all donors advisor, or for any other purposes conferring impermised value of a public use (for sample, recreation or education) Preservation of a historical structure Protection of natural habitat Protection of natural habitat Protection on a assements 2 Complete lines 2 a through 2d If the organization held a qualified conservation contribution in the form of a conservation easements 3 Number of conservation easements 4 Number of conservation easements 9 Total arcange existicad by conservation easements 9 Under of donservation easements 9 Staff and value property subject to conservation easements 9 Staff and value property subject to conservation easements 9 Staff and value property subject to montoring, inspecting, handling of violations, and enforcing conservation easements 9 Staff and value property subject to montoring, inspecting, handling of violations, and enf			organization answered "Yes" on Form 990, Part IV, line	e 6.				
2 Aggregate value of contributions to (during year) 4 Aggregate value at end of typer 5 Ot the organization inform all grantese, donces, and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantese, donces, and donor advisors in writing that grant funds can be used only for charable purposes and not for the benefit of the donor or dovisors in writing that grant funds can be used only for charable purposes. And not for the benefit of the donor or dovisors in writing that grant funds can be used only for charable purposes. And not for the benefit of the donor or dovisors in writing that grant funds can be used only for charable purposes. And not for the benefit of the donor or dovisors of a value of the many of the donor dovisors. Percentation assements held by the organization index all statements of Yes' on Form 930, Part IV, line 7. Protection of natural habitat Protection of a historically important land area Protection of a historically important land area Protection of a historically important land area Protection of a comparison assements meet the state of the say set. a Total number of conservation essements b Total acreage restricted by conservation essements b Total acreage restricted by conservation essements c Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation essements c Number of conservation essements in coefficient fistor. Structure included in (a) c Number of conservation essements in coefficient fistor. Structure included in (a) c Number of conservation essements in coefficient fistor. Structure included in (b) c Staff and volunteer property subject to conservation essements is loated c structure advected to monitoring, inspecting, handling of violations, and enforcing conservation essements during the year c Staff and volunteer hours deviced to interviction terms and enforcing conservation essements during the year c structure included in (b) conservation essemen				(a) Donor advise	d funds	(b) Fun	ds and other accou	ints
2 Aggregate value of contributions to (during year) 4 Aggregate value at end of typer 5 Ot the organization inform all grantese, donces, and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantese, donces, and donor advisors in writing that grant funds can be used only for charable purposes and not for the benefit of the donor or dovisors in writing that grant funds can be used only for charable purposes. And not for the benefit of the donor or dovisors in writing that grant funds can be used only for charable purposes. And not for the benefit of the donor or dovisors in writing that grant funds can be used only for charable purposes. And not for the benefit of the donor or dovisors of a value of the many of the donor dovisors. Percentation assements held by the organization index all statements of Yes' on Form 930, Part IV, line 7. Protection of natural habitat Protection of a historically important land area Protection of a historically important land area Protection of a historically important land area Protection of a comparison assements meet the state of the say set. a Total number of conservation essements b Total acreage restricted by conservation essements b Total acreage restricted by conservation essements c Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation essements c Number of conservation essements in coefficient fistor. Structure included in (a) c Number of conservation essements in coefficient fistor. Structure included in (a) c Number of conservation essements in coefficient fistor. Structure included in (b) c Staff and volunteer property subject to conservation essements is loated c structure advected to monitoring, inspecting, handling of violations, and enforcing conservation essements during the year c Staff and volunteer hours deviced to interviction terms and enforcing conservation essements during the year c structure included in (b) conservation essemen	1	Total nu	umber at end of year					
Aggregate value at end of year Aggregate value at end of year Aggregate value at end of year Adgregate value at end of year Addregate value at end year Addregate value at end year Addregate value at end year Addregate year Addregate year Addregate year Addr	2							
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's accuration is excitable purposes and not for the benefit of the donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the dorganization answered "Yes" on Form 990, Part IV, line 7. Partill Conservation of land for public use (for example, recreation or education) Preservation of a land for public use (for example, recreation or education) Preservation of a conservation easements addition of a latural habitat Protection of natural habitat B addition of a conservation easements C addition of conservation easements B addition of a laturation addition of a laturation addition and laturation addition addition of a laturation addition addition of a laturation addition	3							
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's accuration is excitable purposes and not for the benefit of the donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the dorganization answered "Yes" on Form 990, Part IV, line 7. Partill Conservation of land for public use (for example, recreation or education) Preservation of a land for public use (for example, recreation or education) Preservation of a conservation easements addition of a latural habitat Protection of natural habitat B addition of a conservation easements C addition of conservation easements B addition of a laturation addition of a laturation addition and laturation addition addition of a laturation addition addition of a laturation addition	4	Aggreg	ate value at end of year					
 G bid the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charatisble purposes and not for the benefit of the donor of donor advisor, or for any other purpose conferring mominabile purposes and not for the benefit of the organization answered "Ves" on Form 980, Part IV, line 7. Partial Conservation Easements lield by the organization (check all that apply). Preservation of alm dro public use (for example, recreation or education) Preservation of a land thor public use (for example, recreation or education) Preservation of a conservation easements lield by the organization (check all that apply). Preservation of and thor public use (for example, recreation or education) Preservation of a conservation easements included in led a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total arcmege restricted by conservation easements included in (a) Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year. Number of states where property subject to conservation easement is located ▶ So cost excinction and writter policy magneting, handling of violations, and enforcing conservation easements during the year ▶ \$ So cost each conservation easements reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(i); and section	5			vriting that the assets he	ld in donor advise	ed funds		
 G bid the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charatisble purposes and not for the benefit of the donor of donor advisor, or for any other purpose conferring mominabile purposes and not for the benefit of the organization answered "Ves" on Form 980, Part IV, line 7. Partial Conservation Easements lield by the organization (check all that apply). Preservation of alm dro public use (for example, recreation or education) Preservation of a land thor public use (for example, recreation or education) Preservation of a conservation easements lield by the organization (check all that apply). Preservation of and thor public use (for example, recreation or education) Preservation of a conservation easements included in led a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total arcmege restricted by conservation easements included in (a) Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year. Number of states where property subject to conservation easement is located ▶ So cost excinction and writter policy magneting, handling of violations, and enforcing conservation easements during the year ▶ \$ So cost each conservation easements reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(i); and section		are the	organization's property, subject to the organization's e	exclusive legal control?			Yes	No No
repartiellog purposes and not for the benefit of the donor or donor advisor, or for any other purpose confering	6							
Part III Conservation Easements. Complete if the organization answered "Yest on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of a certified historic structure Preservation of a certified historic structure Preservation of a certified historic structure included in (a) 2a a Total number of conservation easements 2a b Total acreage restricted by conservation easements is curred in (a) 2c d Number of conservation easements in curred in (check all that 725/06, and not on a historic structure included in (a) 2d s Number of conservation easements in curred in (check all the organization during the tax year)								
1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historic structure Preservation of pane space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last. day of the tax year. a Total number of conservation easements 2a 2 Data 2a 3 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure 2a 4 Number of states where property subject to conservation easements is located >		imperm	issible private benefit?				Yes	No No
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□ Preservation of a certified historic structure □ Preservation of open space 2 Complete lines 2a through 2d if the organization heid a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Image: Complete lines 2a through 2d if the organization heid a qualified conservation contribution in the form of a conservation easements Image: Complete lines 2a through 2d if the organization heid a qualified conservation contribution in the form of a conservation easements included in (a) Image: Complete lines 2a through 2d if the organization heid in (c) acquired after 7/25/06, and not on a historic structure 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year / 4 Number of states where property subject to conservation easements is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year > 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year > 5 S 0 In Part XIII. describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization secounting for conservation easements.	1	Purpos	e(s) of conservation easements held by the organizatio	on (check all that apply).				
□ Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2a c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2a 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year		- P	reservation of land for public use (for example, recreat	tion or education)	Preservation of	a historically	important land area	1
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 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶	d	Numbe	r of conservation easements included in (c) acquired a	fter 7/25/06, and not on	a historic structur	re		
 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶		listed in	the National Register			2d		
 A Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ T Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ S	3						during the tax	
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 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$		violatio	ns, and enforcement of the conservation easements it	holds?			Yes	No
 \$	6	Staff ar	d volunteer hours devoted to monitoring, inspecting, h	handling of violations, an	d enforcing conse	ervation ease	ments during the ye	ear
 \$		▶						
 B Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. Ia If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part X \$ 4 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Reve	7	Amoun	t of expenses incurred in monitoring, inspecting, hand	ling of violations, and en	forcing conservati	ion easement	ts during the year	
 and section 170(h)(4)(B)(iii)?		▶\$_						
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2019								
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Sche		L CRIME VI	-					71-08			age 2
Par	t III Organizations Maintaining C	Collections of Ar	t, Histo	rical T	reasures, or	^r Other	^r Simila	r Assets	contin	ued)	
3	Using the organization's acquisition, access	ion, and other record	s, check a	any of th	ne following that	make si	gnificant ι	use of its			
	collection items (check all that apply):										
а	Public exhibition	c	1 🛄 L	oan or e	exchange progra	ım					
b	Scholarly research	e	• 🗌 0	ther							
с	Preservation for future generations										
4	Provide a description of the organization's c	ollections and explai	n how the	y furthe	r the organizatio	n's exen	npt purpo	se in Part	XIII.		
5	During the year, did the organization solicit of	or receive donations of	of art, hist	orical tr	easures, or othe	r similar	assets				
	to be sold to raise funds rather than to be m	aintained as part of t	he organiz	zation's	collection?				Yes		No
Par	t IV Escrow and Custodial Arran	gements. Compl	ete if the c	organiza	ation answered "	Yes" on	Form 990	, Part IV,	line 9, or		
	reported an amount on Form 990, Pa			-							
1a	Is the organization an agent, trustee, custod	lian or other intermed	liary for co	ontributi	ons or other ass	ets not i	ncluded				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII										
									Amount		
с	Beginning balance						1c				
d	Additions during the year										
е	Distributions during the year										
f	Ending balance						1f				
2a	Did the organization include an amount on F						ty?		Yes		No
b	If "Yes," explain the arrangement in Part XIII	. Check here if the ex	planation	has be	en provided on F	Part XIII]
Par	Tt V Endowment Funds. Complete	if the organization ar	nswered "	Yes" on	Form 990, Part	IV, line 1	0.				
		(a) Current year	(b) Pri	ior year	(c) Two year	's back	(d) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions										
с	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur		e (line 1q,	column	(a)) held as:						
а	Board designated or quasi-endowment	•	%								
b	Permanent endowment										
с	Term endowment	%									
	The percentages on lines 2a, 2b, and 2c sho	- ould equal 100%.									
3a	Are there endowment funds not in the posse	•	ation that a	are held	and administer	ed for th	e organiza	ation			
	by:	5					5		Γ	Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza								3b		
4	Describe in Part XIII the intended uses of the										
Par	't VI 🛛 Land, Buildings, and Equipm										
	Complete if the organization answere	ed "Yes" on Form 990), Part IV,	line 11a	a. See Form 990,	, Part X,	line 10.				
	Description of property	(a) Cost or c	other	(b) C	ost or other	(c) A	ccumulate	ed	(d) Book	value	e
_		basis (investr	ment)	. ,	sis (other)	• •	oreciation				
1 a	Land										
b	Buildings										
	Leasehold improvements										
d	Equipment										
	Other				18,000.		18,0	00.			0.
	. Add lines 1a through 1e. (Column (d) must e		X. column	n (B) lini							0.
								Cohodulo	D /	000	0040

Schedule D (Form 990) 2019

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Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.	•		
Complete if the organization answered "Yes"	on Form 990 Part IV line	11c See Form 990 Part X line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-vear market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
	an Farma 000 Davit IV line	11d Cas Farm 000 Dart V line 15	
Complete if the organization answered "Yes"		TTd. 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 2	
1.(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) DUE TO LEWIS & CLARK COLL	EGE		702,821.
(3)			
(4)			
1+1			
(5)			
(5) (6)			
(5) (6) (7)			
(5) (6)			
(5) (6) (7)			
(5) (6) (7) (8)	9 25.)	•	► 702,821.

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) 2019

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Schedule D (Form 990) 2019 NATIONAL CRIME VICTIM LAW INSTITUTE Part VII Investments - Other Securities.

(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)		

_	edule D (Form 990) 2019 NATIONAL CRIME VICTIM LAW				0879090 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statem		evenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total revenue, gains, and other support per audited financial statements			1	4,468,553.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а					
b	Donated services and use of facilities	2b	9,723.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	9,723.
3	Subtract line 2e from line 1			3	4,458,830.
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			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	4,458,830.
5 Pa	rt XII Reconciliation of Expenses per Audited Financial Staten	nents With E	xpenses per F		<u>4,456,650.</u> n.
5 Pa	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12	nents With E a.	xpenses per F	Retur	n.
5 Ра 1	rt XII Reconciliation of Expenses per Audited Financial Staten	nents With E a.	xpenses per F		4,438,830. n. 4,334,103.
	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents With E	xpenses per F	Retur	n.
1	T XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents With E	xpenses per F	Retur	n.
1 2	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	nents With E	xpenses per F	Retur	n.
1 2 a	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	Pents With E 'a. 'a.	xpenses per F	Retur	n.
1 2 a b	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c	xpenses per F	Retur	n. 4,334,103.
1 2 a b c	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2a 2b 2c 2d	9,723.	Retur	n. <u>4,334,103</u> . 9,723.
1 2 b c d	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	9,723.	1	n. 4,334,103.
1 2 b c d e	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	9,723.	1 2e	n. <u>4,334,103</u> . 9,723.
1 2 b c d 8 3	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	9,723.	1 2e	n. <u>4,334,103</u> . 9,723.
1 2 3 4	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d	9,723.	1 2e	n. <u>4,334,103</u> . 9,723.
1 2 d c d e 3 4 a b	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 2d 4a 4b	9 , 723 .	1 2e 3 4c	n. <u>4,334,103.</u> <u>9,723.</u> <u>4,324,380.</u> 0.
1 2 d c d e 3 4 b c 5	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 2d 4a 4b	9 , 723 .	1 2e 3	n. 4,334,103. 9,723. 4,324,380.

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

PART X, LINE 2:

THE ORGANIZATION FOLLOWS THE PROVISION OF FASE ASC TOPIC OF ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. MANAGEMENT HAS EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH PROVISIONS OF THIS TOPIC.

932054 10-02-19

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. EZ
OMB No. 1545-0047
2019
Open to Public
Inspection
Employer identification number

NATIONAL CRIME VICTIM LAW INSTITUTE

71-0879090

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

TECHNICAL ASSISTANCE NATIONWIDE TO GROUPS CREATING AND OPERATING VICTIM

LEGAL ASSISTANCE NETWORKS AS PART OF A NATIONAL DEMONSTRATION PROJECT

DESIGNED TO ENSURE SURVIVORS HAVE ACCESS TO HOLISTIC, WRAPAROUND LEGAL

SERVICES AT NO COST. NCVLI ALSO CONTINUED ITS INITIATIVE TO PROVIDE

TRAINING AND TECHNICAL ASSISTANCE TO GROUPS CREATING AND OPERATING

VICTIM LEGAL ASSISTANCE PROJECTS THAT LEVERAGE TECHNOLOGY TO INCREASE

ACCESS TO LEGAL SERVICES. FINALLY, NCVLI LAUNCHED A NEW INITIATIVE TO

SUBGRANT TO AND PROVIDE TRAINING AND TECHNICAL ASSISTANCE TWO SIX (6)

LEGAL CLINICS THAT FOCUS ON RIGHTS ENFORCEMENT.

SECOND, NCVLI RESPONDED TO MORE THAN 100 REQUESTS FOR LEGAL TECHNICAL ASSISTANCE (I.E., LEGAL RESEARCH, WRITING, AND STRATEGIC LITIGATION ADVICE) FROM 26 DIFFERENT JURISDICTIONS AND FILED AMICUS CURIAE (FRIEND OF THE COURT) BRIEFS IN 8 CASES ACROSS THE COUNTRY.

NCVLI CONTINUED TO DEVELOP AND MAINTAIN ITS MEMBERSHIP ALLIANCE THIRD, THE NATIONAL ALLIANCE OF VICTIMS' RIGHTS ATTORNEYS & ADVOCATES (NAVRA), WHICH HAS MEMBERSHIP OF MORE THAN 1,900 ATTORNEYS, ADVOCATES, AND STUDENTS, HAILING FROM 49 STATES, THE DISTRICT OF COLUMBIA, GUAM PUERTO RICO, VIRGIN ISLANDS, ISRAEL, THE UNITED KINGDOM AND CANADA. NAVRA PROMOTES THE EXCHANGE OF KNOWLEDGE AND RESOURCES TO FOSTER A NATIONAL NETWORK OF SKILLED ATTORNEYS AND ADVOCATES TO REPRESENT AND ASSIST CRIME VICTIMS IN THE CRIMINAL JUSTICE SYSTEM. NAVRA HAS A DEDICATED WEBSITE (WWW.NAVRA.ORG) WITH SEARCH DATABASES OF CASES, SAMPLE PLEADINGS AND LEGAL MEMORANDA. NAVRA ALSO ROUTINELY SPONSORS Schedule O (Form 990 or 990-EZ) (2019) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

932211 09-06-19

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Name of the organization	Employer identification number $71 - 0879090$		
ONLINE CONTINUING	LEGAL EDUCATION (CLE) OPPORTUNITIES.	

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

LEARNING OPPORTUNITIES FOR VICTIM ADVOCATES. EDUCATION IS ALSO ACHIEVED

THROUGH PARTNERSHIPS; (3) THROUGH A KEY PARTNER WITH THE INTERNATIONAL

ASSOCIATION OF CHIEFS OF POLICE EDUCATING LAW ENFORCEMENT ON VICTIMS'

RIGHTS; AND (4) EDUCATION SERVICE PROVIDERS ON THE UNIQUE NEEDS AND

RIGHTS OF MILITARY-CONNECTED VICTIMS.

Schedule O (Form 990 or 990-EZ) (2019)

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

FORM 990 WILL BE DISTRIBUTED FOR THE FULL BOARD'S REVIEW PRIOR TO FILING. COMMENTS WILL BE SOLICITED BY E-MAIL. THE BOARD CHAIR WILL APPROVE PRIOR TO FILING.

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

NCVLI'S BY-LAWS SPECIFY A CONFLICT OF INTEREST POLICY. THE BOARD OF DIRECTORS REVIEWS THE BY-LAWS REGULARLY AND INDIVIDUAL MEMBERS SIGN AN AGREEMENT WHICH MAKES THE KNOWLEDGE OF SUCH AN EXPECTATION PART OF THEIR ROLE.

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

THE METHODS FOR DETERMINING COMPENSATION FOR THE EXECUTIVE DIRECTOR, EVERY OTHER YEAR, A FULL 360 DEGREE REVIEW OCCURS REGARDING COMPENSATION.

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

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS

ARE MADE AVAILABLE UPON REQUEST.

932212 09-06-19

Page 2

Schedule O (Form 990 or 990-EZ) (2019)	Page
Name of the organization NATIONAL CRIME VICTIM LAW INSTITUTE	Employer identification number 71-0879090
PART XII, LINE 2C:	
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.	
	Cakadula () (E
332212 09-06-19	Schedule O (Form 990 or 990-EZ) (201