Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

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

2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

			endar year, or tax year beginning OCT 1 , 2022, and ending	<u>SEP 30</u>	, 2023
В	Check if applicat	ole:	C Name of organization	D Employer	identification number
F	=	ess change	NATIONAL JUVENILE COURT FOUNDATION, INC.	200	140750
L	Nam	e change	36-6142750		
L	Initia Final	I return return/	E Telephone number		
Ļ	termi	inated	1) 507-4777	
Ļ	Amei	nded return	City or town, state or province, country, and ZIP or foreign postal code	F Group Exe	emption
		ation pending	RENO, NV 89507	Number	
		nting Meth	, ; · · · · · · · · · · · · · · · · · ·	H Check	X if the organization is
	Websi		/A	1	ed to attach Schedule B
			s (check only one) — X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	(Form 990)).
		of organiza			
			and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part	II,	225
		n (B)) are S	500,000 or more, file Form 990 instead of Form 990-EZ Prue, Expenses, and Changes in Net Assets or Fund Balances (see the instr	\$	206.
Р	art I		f the organization used Schedule 0 to respond to any question in this Part I		·
_	1				<u>^\</u>
	2		service revenue including government fees and contracts		
	3	Ivieitibers	hip dues and assessments nt income SEE SCHEDULE O	3	206.
	4		1 1	4	200.
	5a		ount from sale of assets other than inventory 5a		
	b		t or other basis and sales expenses	-	
	°	•	oss) from sale of assets other than inventory (subtract line 5b from line 5a)	<u>5c</u>	
	6		nd fundraising events:		
e	a		ome from gaming (attach Schedule G if greater than		
Revenue	١.	\$15,000)			
æ	b		ome from fundraising events (not including \$ of contributions		
			Iraising events reported on line 1) (attach Schedule G if the sum of such		
		-	ome and contributions exceeds \$15,000)		
	Ι.		ct expenses from gaming and fundraising events 6c		
	_d		ne or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
	7 a		es of inventory, less returns and allowances 7a		
	b		t of goods sold		
	C	Gross pro	fit or (loss) from sales of inventory (subtract line 7b from line 7a)	7c	
	8	Other rev	enue (describe in Schedule O)	8	206
_	9		enue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		206.
	10		d similar amounts paid (list in Schedule O)		
	11		aid to or for members		
es	12		other compensation, and employee benefits		
Sue	13		nal fees and other payments to independent contractors		
Expenses	14		y, rent, utilities, and maintenance		
ш	15	•	publications, postage, and shipping		
	16	•	enses (describe in Schedule O)		
_	17		enses. Add lines 10 through 16	17	0.
s	18		(deficit) for the year (subtract line 17 from line 9)	18	206.
set	19		s or fund balances at beginning of year (from line 27, column (A))		4.5 - 4.5
Net Assets	1		ee with end-of-year figure reported on prior year's return)		19,788.
Net	20		nges in net assets or fund balances (explain in Schedule O)		0.
_	21	Net asset	s or fund balances at end of year. Combine lines 18 through 20	21	19,994.
LH.	A For	Paperwor	k Reduction Act Notice, see the separate instructions.		Form 990-EZ (2022)

232171 12-16-22

Pa	art II	Balance Sheets (see the instructions for Par	•					
		Check if the organization used Schedule O to	o respond to any ques				X	<u>. </u>
				(A) Beginning of year		(B) E	nd of year	_
22	Cash,	savings, and investments		76,221	• 22		76,427	•
23		and buildings			23	 		_
24	Other	assets (describe in Schedule 0)			24	1		_
25		assets		76,221		 	76,427	
26	Total	liabilities (describe in Schedule 0) SEE SCHEDUL	ıE O	56,433			56,433	
27	Net a	sets or fund balances (line 27 of column (B) must agree with li Statement of Program Service Accomplish	ne 21)	19,788	• 27		19,994	•
Pa	art III		•	•			xpenses	
		Check if the organization used Schedule O to		tion in this Part III	X		for section and 501(c)(4)	
Wha	at is the o	rganization's primary exempt purpose? SEE SCHEDUL	iE O			organízati	ons; optional for	r
		ganization's program service accomplishments for each of its three largest pr		enses. In a clear and concise		others.)		
		be the services provided, the number of persons benefited, and other relevant	t information for each program title.					
28	SEE	SCHEDULE O						
	(Grants	\$) If this amount includes fo	reign grants, check here			28a		
29								
	(Grants	\$) If this amount includes fo	reign grants, check here			29a		
30	•	•	,					
	(Grants	\$) If this amount includes fo	reign grants, check here			30a		
31		•						
	(Grants		reign grants, check here			31a		
32		rogram service expenses (add lines 28a through 31a)				32	0	١.
Pa	art IV	List of Officers, Directors, Trustees, and K	ey Employees (list each	one even if not compensated - s	see the i	instructions fo	or Part IV)	
		Check if the organization used Schedule O to	o respond to any ques	tion in this Part IV				\neg
			(b) Average hours	(C) Reportable		alth benefits,	(e) Estimated	— d
		(a) Name and title	per week devoted t			ributions to oyee benefit	amount of oth	
		(=)	position	1099-NEC) (if not paid, enter -0-)		and deferred	compensation	n
GA	YL E	RANUM CARR				-		_
	ESII		0.50	0.		0.	l 0	
JO	EY C	RDUNA HASTINGS		-				
		ARY, CEO	0.50	0.		0.	l 0	
		HEATH						_
	EASU		0.25	0.		0.	l 0	
		B. KATZ		-			_	_
		ENT - UNTIL 07/2023	0.50	0.		0.	l 0	
		HOFMANN		-				
		RER - UNTIL 07/2023	0.50	0.		0.	0	
		DULONG						Ť
		INANCE	0.50	0.		0.	1 0	١.
								_
								_
								_
								_
								_
								_
				1				

	instructions for Part v.) Check if the organization used Sch. O to respond to any question in this	Part	<u>v</u>	X		
			Yes	No		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule 0					
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended					
	documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		X		
35 a	a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported					
	on lines 2, 6a, and 7a, among others)?	35a		Х		
b	7	35b	N/	A		
C	Was the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization subject to section $6033(e)$ notice, reporting, and proxy tax	35c		х		
	requirements during the year? If "Yes," complete Schedule C, Part III					
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes,"			37		
	complete applicable parts of Schedule N	36		X		
	Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 0 •	-		v		
	Did the organization file Form 1120-POL for this year?	37b		X		
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		Х		
h	If "Yes," complete Schedule L, Part II, and enter the total amount involved 38b N/A	308		21		
39	Section 501(c)(7) organizations. Enter:	-				
	Initiation fees and capital contributions included on line 9 39a N/A					
b	37/3					
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:					
	section 4911 0 • ; section 4912 0 • ; section 4955					
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit					
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any					
	of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X		
C	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on					
	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958					
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed					
	by the organizationO •					
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter					
	transaction? If "Yes," complete Form 8886-T	40e		X		
41	List the states with which a copy of this return is filed NONE	507	177	77		
42 a		307 3950		/ /		
	Located at PO BOX 8970, RENO, NV ZIP+4 & At any time during the calendar year, did the organization have an interest in or a signature or other authority	930	/			
U	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No		
	account)?	42b		X		
	If "Yes," enter the name of the foreign country	720				
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
C	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		Х		
	If "Yes," enter the name of the foreign country					
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here					
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A				
			Yes	No		
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of					
	Form 990-EZ	44a		X		
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead			77		
	of Form 990-EZ	44b		X		
	Did the organization receive any payments for indoor tanning services during the year?	44c		X		
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation	443				
AE -	in Schedule 0 Did the graphization have a controlled entity within the manning of section 512/b/(12/2)	44d		Х		
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		Λ		
0	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions	45b				
	- στείσχι το βετι τους ετοιτί σου απά συπουαίο τι παχ πουά το συ συπιριστό πιστόα οι Γοιτί σου-Ελ. όσο πιστάστιστο	Form 0	00 E7 /	(2022)		

				•				Yes	No
	e organization engage, directly or indirec				•				
If "Yes	s," complete Schedule C, Part I Section 501(c)(3) Organiz	ations Only					46		X
rait Vi	All section 501(c)(3) organizations	-	.49h and 52 and	d complete t	he tables for lines	50 and 51			
	Check if the organization used So	•	•	•					
								Yes	No
	e organization engage in lobbying activiti	. ,		-					l
If "Yes," complete Sch. C, Part II 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E									X
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 49a Did the organization make any transfers to an exempt non-charitable related organization?									X
 49a Did the organization make any transfers to an exempt non-charitable related organization? b If "Yes," was the related organization a section 527 organization? 									
	lete this table for the organization's five h						ach re	ceived r	nore
than \$	3100,000 of compensation from the organ			. 1		. D	<u> </u>		
	(a) Name and title of each e	mployee	(b) Average		(C) Reportable compensation (Forms	 (d) Health benefit contributions to employee benefit 	1 000	e) Estim nount of	
		NONE	positio	1	W-2/1099-MISC/ 1099-NEC)	plans, and deferre compensation	· . I	ompens	
							-		
							-		
f Total r	number of other employees paid over \$1	00,000							
	lete this table for the organization's five h	· · · · · · · · · · · · · · · ·	nt contractors who	o each receive	ed more than \$100,0	00 of compensa	tion fr	om the	
	ization. If there is none, enter "None."	NONE		/b) 7		(2)	0		
(6	a) Name and business address of each in	аеренаеті сопітасіог		(D) I	Type of service	(6)	Сопр	ensatio	п
d Tabel	and the second section of the second section of the section of the second section of the section								
	number of other independent contractors e organization complete Schedule A? No	•	rations must attac						
							Χγ	es 🗌	No
Under penal	lties of perjury, I declare that I have exam	ined this return, including acco	mpanying schedul	les and statem	nents, and to the bes	t of my knowled	ge and	d belief,	it is
true, correct	t, and complete. Declaration of preparer (other than officer) is based on a	all information of v	which prepare	r has any knowledge) <u>.</u>			
Sign	Signature of officer					Date			
Here	JOEY ORDUNA HAS	TINGS, CHIEF E	XECUTIVE	OFFIC	ER				
	Type or print name and title			_					
	Print/Type preparer's name	Preparer's signature		Date	Check] if PTIN			
Paid	AADON M EOV	AADON M. E	·OV	07/22	self- emplo		265	020	
Prepare	LEirm's name NATO CITIM T	AARON M. F	OA	07/23/	/ 24 Firm's EIN	P01 11-19			
Use Onl	V	STREET, NW #85	0		Phone no.	202-22			
	I	TON, DC 20036				,		_	
May the IRS	discuss this return with the preparer sh	own above? See instructions					X γ		No
							Form	990-EZ	(2022)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public

Inspection **Employer identification number**

NATIONAL JUVENILE COURT FOUNDATION 36-6142750 INC. Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)) NATIONAL COUNCIL OF JUVENILE FAMILY COU 36-2486896 X 0 0.

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
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						
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)						
6	Public support. Subtract line 5 from line 4.						
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	(4,) = 0.10	(3) = 3 · 3	(5) = 5 = 5	(4) = 5 = 1	(6) = 5 = 5	(.,
8	Gross income from interest.						
·	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
Ū	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc (see instruction	one)			12	
	First 5 years. If the Form 990 is for the	•		fourth or fifth tax i			
10	organization, check this box and stop						
Se	ction C. Computation of Publi						
	Public support percentage for 2022 (I			column (f))		14	%
	Public support percentage from 2021					15	%
	33 1/3% support test - 2022. If the						
	stop here. The organization qualifies						
ŀ	33 1/3% support test - 2021. If the		•				
	and stop here. The organization qual						
17:	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances te					_	
	10% -facts-and-circumstances test	•	•			 17a and line 15 is	
	more, and if the organization meets the	-	-				10/0 01
	organization meets the facts-and-circle				-		
18	Private foundation. If the organization		-				
10	i invate roundation. If the organization	ni did fiot difect a	DOA OIT III IC TO, TO	a, 100, 17a, 01 17k	, oriect triis bux a		(Form 990) 2022

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

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

Sed	ction A. Public Support	slow, picase comp	oicte i art ii.j				
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or 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						
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	(a) 2010	(6) 2019	(6) 2020	(4) 2021	(6) 2022	(i) iotai
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	J		,	•	() ()	· —
	check this box and stop here						
	ction C. Computation of Publi					 	
	Public support percentage for 2022 (li	, ,,,	•	column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves			. 10 1 (0)		14-1	
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	% 7 in
198	33 1/3% support tests - 2022. If the						
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2021. If the	organization did r	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and st	top here. The orga	anization qualifies a	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

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

	_	
	Yes	No
1	Х	
2		Х
За		Х
3b		
0.0		
20		
3c		
4-		Х
4a		
4b		
4c		
5a		Х
5b		
5c		
6		Х
8		
_		v
7		X
		v
8		X
9a		X
9b		X
9с		_X_
10a		Х
10b		
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	555)	

SCHE	dule A	A POINT 990) 2022 INTITIONAL GOVERNIEL COOKI TOOMBATION, INC. 50 OF	4413	U Pa	age 3
Pa	rt IV	Supporting Organizations (continued)			
	_			Yes	No
11	Has th	he organization accepted a gift or contribution from any of the following persons?			
а	A pers	son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c b	pelow, the governing body of a supported organization?	11a		X
b	A fam	nily member of a person described on line 11a above?	11b		X
С	A 35%	% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
		in Part VI.	11c		X
Sec	tion E	B. Type I Supporting Organizations			
				Yes	No
1	more direct	ne governing body, members of the governing body, officers acting in their official capacity, or membership of one or supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, tors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			

effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 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

Х Х

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, upervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No." describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)

 Yes	No

Yes Nο

Section D. All Type III Supporting Organizations

- Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).
- By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's

1	
2	
3	

<u>supported organizations played in this regard.</u>

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- The organization satisfied the Activities Test. Complete line 2 below.
- h The organization is the parent of each of its supported organizations. Complete line 3 below.
- The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions) c

Activities Test. Answer lines 2a and 2b below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	2a		
	2b		
	3a		
	3b		
dule	A (Forn	n 990)	2022

Yes No

	dule A (Form 990) 2022 NATIONAL JUVENILE COUR			6-6142750 Page 6					
Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporti								
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.								
	All other Type III non-functionally integrated supporting organizations mu	st complete	e Sections A through E.	1					
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)					
1	Net short-term capital gain	1							
2	Recoveries of prior-year distributions	2							
3	Other gross income (see instructions)	3							
4	Add lines 1 through 3.	4							
5	Depreciation and depletion	5							
6	Portion of operating expenses paid or incurred for production or								
	collection of gross income or for management, conservation, or								
	maintenance of property held for production of income (see instructions)	6							
7	Other expenses (see instructions)	7							
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8							
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)					
1	Aggregate fair market value of all non-exempt-use assets (see								
	instructions for short tax year or assets held for part of year):								
а	Average monthly value of securities	1a							
b	Average monthly cash balances	1b							
С	Fair market value of other non-exempt-use assets	1c							
d	Total (add lines 1a, 1b, and 1c)	1d							
е	Discount claimed for blockage or other factors								
	(explain in detail in Part VI):								
2	Acquisition indebtedness applicable to non-exempt-use assets	2							
3	Subtract line 2 from line 1d.	3							
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,								
	see instructions).	4							
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5							
6	Multiply line 5 by 0.035.	6							
7	Recoveries of prior-year distributions	7							
8	Minimum Asset Amount (add line 7 to line 6)	8							
Sect	ion C - Distributable Amount			Current Year					
1	Adjusted net income for prior year (from Section A, line 8, column A)	1							
2	Enter 0.85 of line 1.	2							
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3							
4	Enter greater of line 2 or line 3.	4							
5	Income tax imposed in prior year	5							
6	Distributable Amount. Subtract line 5 from line 4, unless subject to								
	emergency temporary reduction (see instructions).	6							
7	Check here if the current year is the organization's first as a non-function	ally integrat	ted Type III supporting orga	nization (see					

Schedule A (Form 990) 2022

instructions).

Pa	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations _{(continue}	ed)	
Section D - Distributions					Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpos	es of supported organizations	,	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pi	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	he organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(:)	/::\		/:::\

Section E - Distribution Allocations (see instruction	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C,	line 6		
2 Underdistributions, if any, for years prior to 202	2 (reason-		
able cause required - explain in Part VI). See in:	structions.		
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instruction	ns)		
j Remainder. Subtract lines 3g, 3h, and 3i from li	ne 3f.		
4 Distributions for 2022 from Section D,			
line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4	1.		
5 Remaining underdistributions for years prior to	2022, if		
any. Subtract lines 3g and 4a from line 2. For re	esult greater		
than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2022. Subtract	t lines 3h		
and 4b from line 1. For result greater than zero,	explain in		
Part VI. See instructions.			
7 Excess distributions carryover to 2023. Add	lines 3j		
and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule A (Form 990) 2022

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 Inspection

Name of the organization

NATIONAL JUVENILE COURT FOUNDATION, INC. **Employer identification number** 36-6142750

FORM 990-EZ, PART I, LINE 4, OTHER INVESTMENT INCOME:						
DESCRIPTION OF PROPERTY: AMOUNT:						
DIVIDENDS 85.						
INTEREST INCOME 121.						
TOTAL INCLUDED ON FORM 990-EZ, LINE 4 206.						
FORM 990-EZ, PART II, LINE 26, OTHER LIABILITIES:						
DESCRIPTION BEG. OF YEAR END OF YEAR						
DUE TO NCJFCJ 56,433. 56,433.						
FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE - TO ASSIST AND BENEFIT THE						
NATIONAL COUNCIL OF JUVENILE AND FAMILY COURT JUDGES.						
FORM 990-EZ, PART III, LINE 28, PROGRAM SERVICE ACCOMPLISHMENTS:						
ASSISTED THE NATIONAL COUNCIL OF JUVENILE AND FAMILY COURT						
JUDGES (NCJFCJ) IN: (A) IMPROVING THE STANDARDS,						
PRACTICES, AND EFFECTIVENESS OF COURTS EXERCISING						
JURISDICTION OVER FAMILIES AND CHILDREN; (B) INFORMING OR ASSISTING						
THOSE WHO DEAL WITH OR AFFECT THESE COURTS; (C) EDUCATING PERSONS						
CONNECTED WITH THESE COURTS AND OTHER INTERESTED MEMBERS OF THE PUBLIC						
IN DEVELOPMENTS AND PRINCIPLES RELATING TO SUCH COURTS; (D) ENGAGING IN						
EDUCATIONAL AND RESEARCH ACTIVITIES IN FURTHERANCE OF THE FOREGOING						
OBJECTIVES. THE NCJFCJ PROVIDED TRAINING AND EDUCATION TO THOUSANDS OF						
JUDGES AND JUSTICE PROFESSIONALS THROUGH DELIVERY OF CONFERENCES,						
TRAINING PROGRAMS, MEETINGS, AND TECHNICAL ASSISTANCE OR COURT						
OBSERVATION SITE VISITS.						
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2022						

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

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022		Page 2
Name of the organization NATIONAL JUVENILE COURT FOUNDATION, I		Employer identification number 36-6142750
FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BE	ENEFIT	CONTRACTS:
THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY	Y FUND	S, DIRECTLY,
OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT (CONTRA	CT.
THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PROPERTY.	REMIUM	S, DIRECTLY,
OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.		