Form <b>845</b>	3-EO	E	cempt O	rganizatio El	on Decla ectronic		d Sign	ature f	or		OMB No. 1545-1879
		For calendar year 2	016, or tax ye	ar beginning <b>NC</b>	DV 1	, 2016, and	l ending O	СТ 31	1,2	20 17	2016
Department of the Internal Revenue S	Treasury	F	or use wit	h Forms 990	), 990-EZ,	990-PF, 11	20-POL,	and 886	8		
		n LAMBDA INC.	LEGAL	DEFENS	SE & I	DUCATI	ION F	UND,	Em		identification number 7395681
Part I	Type of Re	turn and Re	turn Info	ormation (	Whole Dol	lars ()nlv)	2				
								t if only	from th	o rotur	. If you check the box on
line 1a, 2a, 3a	<b>, 4a,</b> or <b>5a</b> belo pplicable, blar	ow and the amo	unt on that	t line of the re	eturn being	g filed with th	nis form v	vas blanl	k, then l	eave lin	e 1b, 2b, 3b, 4b, or 5b, Do not complete more
1a Form 990			tal revenu	<b>e,</b> if any (Forr	m 990, Par	t VIII, colum	n (A), line	12)		1b	16,861,051.
2a Form 990 3a Form 112		re 🕨 🛄 b	Total rev	enue, if any (	(Form 990-	EZ, line 9)		•••••		2b	
4a Form 990			Tax base	ax (Form 112 d on investr	0-POL, IING	e 22) me (Form 99	0-PF Pa	tVI line		3b 4b	
5a Form 886				(Form 8868,							
Part II	Declaration	n of Officer									
(dire taxe Treatinsti and If a dist electronic retu further declare intermediate s (a) an acknow the date of an Sign Here	act debit) entry es owed on this asury Financial tutions involve resolve issues copy of this re- cuted the elect specifically ide es of perjury, I irrn and accom e that the amou- service provide ledgement of in y refund. Signature of o	to the financial s return, and the Agent at 1-888- ed in the process is related to the p turn is being file tronic disclosure ntified in Part I a declare that I ar panying schedu unt in Part I abo r, transmitter, or receipt or reasor fficer	institution a financial i 353-4537 il sing of the bayment. d with a st: a consent of above) to th n an office les and st ve is the all r electronic n for reject <b>hic Retu</b> anization's	account indi- nstitution to o no later than electronic particular ate agency(ie contained with the selected s r of the above atements, an- mount showr r return origin ion of the trans- return original rn Original	cated in the debit the e 2 busines: ayment of es) regulati thin this rei tate agend e named c d to the be n on the con ator (ERO Date Date	tries on Form	ration sof account. to the pa eive confi as part o galisclosu and that oveledge ganizatio o organizatio o organizatio o organizatio o organizatio o organizatio o organizatio o organizatio o organizatio o n for an	tware for To revok yment (s dential ir f the IRS ire by the I have ex and belie n's elect tition's re y delay in <u>CEO</u> Title	r payme e a payme e a payme ettleme iformati i Fed/St e IRS of stamined if, they a ronic re- turn to the procession ee instru-	nt of th ment, I nt) date on nece ate pro- this Fo a copy are true turn. I c he IRS ssing th uctions) uctions	ect to the best of my
return. The org filed with the I for Business F	ganization offic RS, and have Returns. If I am	cer will have sigr followed all othe also the Paid P	ned this for er requirem reparer, ur	m before I su ents in Pub. Inder penalties	ubmit the r 4163, Moo s of perjur	eturn. I will g dernized e-fil y I declare th	give the o e (MeF) li nat I have	fficer a c nformatic examine	opy of a on for Au ed the a	all forms uthorize bove or	reflects the data on the s and information to be d IRS <i>e-file</i> Providers ganization's return and
		nd statements, a formation of wh				and belief, th	ney are tri	ue, corre	ct, and	comple	te. This Paid Preparer
EDO'a ERO'					Date		Check if also paid preparer	i	Check if self- employed		ERO's SSN or PTIN
	s name (or	MARKS	PANET	H LLP			properor				1-3518842
Only addre	s if self-employed), ess, and ZIP code			VENUE				-		Phone n	
		NEW YC	Contract of the second second second	Y 1001'						and the second se	2-503-8800
Under penaltie ledge and beli	ef, they are tru	ue, correct, and	ave examir complete.	Declaration o	of preparer	d accompar	all inform	edules a nation of	which t	he prep	and to the best of my know- parer has any knowledge.
Paid	Print/Type prep	barer s name		Preparer's sig	ynature		Date		Check emplo		PTIN P00227472
Preparer	Firm's name									SEIN D	
Use Only		MARKS	PANET	H LLP							
	Firm's address		IRD A		_				Phon		
-				Y 1001	And the second second second second	als af fr				(21	2)503-8800
623061 11-15-16	LHA FOR PR	ivacy Act and Pap	erwork Red	uction Act Not	iice, see ba	CK OT TORM.					Form <b>8453-EO</b> (2016)

	0	00	Return of Organization Exempt Fr	rom l	ncome Tax	OMB No. 1545-0047			
Forr	n <b>y</b>	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue C			ns) <b>2016</b>			
Dena	rtment	of the Treasury	Do not enter social security numbers on this form as	-		Open to Public			
		enue Service	Information about Form 990 and its instructions is a	at www.irs	s.gov/form990.	Inspection			
AF	or th	e 2016 calend	ar year, or tax year beginning $ m NOV1$ , $ m 2016$ and en	nding O	СТ 31, 2017				
Bc	heck if	C Name of	forganization		D Employer identified	cation number			
а	pplicab	LAMB	DA LEGAL DEFENSE & EDUCATION FUND,						
	Addro Chang								
	Name Chang	ge Doing bi	usiness as		23-7	395681			
	Initial returr	Number		oom/suite	E Telephone numbe				
	Final returr termi		WALL STREET, 19TH FLOOR		212-	809-8585			
	ated	City or to	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	36,068,132.			
	Amer returr		YORK, NY 10005-3904		H(a) Is this a group re				
	Appli tion pend		nd address of principal officer: RACHEL B. TIVEN			? Yes X No			
	-	SAME	AS C ABOVE		H(b) Are all subordinates in				
		empt status:		527	1	list. (see instructions)			
					H(c) Group exemptio				
	orm o Int I	-	X Corporation Trust Association Other ►	<b>L</b> Year	of formation: 1973	State of legal domicile: NY			
Fd		Summary	ie the organization's mission or most significant activities: $\underline{THE}$ LA						
e	1		ON FUND, INC. ("LAMBDA LEGAL") IS A		TONAL ORGAN				
Governance			$x \models \square$ if the organization discontinued its operations or disposed						
ver	2					28			
	4		lependent voting members of the governing body (Part VI, line Ta)			28			
Activities &	5		tal number of individuals employed in calendar year 2016 (Part V, line 2a) 5						
itie	6		of volunteers (estimate if necessary)			131 28			
ctiv			d business revenue from Part VIII, column (C), line 12			0.			
◄			business taxable income from Form 990-T, line 34			0.			
			,		Prior Year	Current Year			
Ð	8	Contributions	and grants (Part VIII, line 1h)		17,554,748.	15,751,957.			
Revenue	9		ce revenue (Part VIII, line 2g)		636,048.	565,783.			
eve	10	Investment ind	come (Part VIII, column (A), lines 3, 4, and 7d)		1,512,551.	535,047.			
ш	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		19,089.	8,264.			
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		19,722,436.	16,861,051.			
	13	Grants and sir	nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
	14	Benefits paid	to or for members (Part IX, column (A), line 4)		0.	0.			
es	15	Salaries, other	compensation, employee benefits (Part IX, column (A), lines 5-10) $_{\dots}$		11,955,839.				
ens	16a	Professional fu	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) $\blacktriangleright$ 4,335,155	<u></u>	230,390.	414,934.			
Expense	b	Total fundraisi	ng expenses (Part IX, column (D), line 25) $\blacktriangleright$ 4,335,15	5.					
ш	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)		5,799,657.	6,863,215.			
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)		17,985,886.	20,258,344.			
5	19	Revenue less	expenses. Subtract line 18 from line 12		1,736,550.	-3,397,293.			
Net Assets or Fund Balances		<b>.</b>			ginning of Current Year	End of Year 19,865,270.			
Bala	20	Total assets (F		·····	$\frac{22,530,139}{2,169,463}$				
let A	21		(Part X, line 26)		3,168,463. 19,361,676.	<u>3,069,080.</u> 16,796,190.			
	22 Irt II		fund balances. Subtract line 21 from line 20		19,JUI,U/0.	10,190,190.			
			DIOCK I declare that I have examined this return, including accompanying schedules a	and statem	ante and to the heet of m	knowledge and belief, it is			
	•		Declaration of preparer (other than officer) is based on all information of which			/ KIIOWIEUYE AITU DEITEI, IL IS			
<u></u> ,	UUIE			in preparel					

Sign Here	Signature of officer         RACHEL B. TIVEN, CEO         Type or print name and title			Date						
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN					
Paid	ROBERT R. LYONS, CPA ROBERT R. LYONS, CPA06/14/18 P00227472									
Preparer	Firm's name ▶ MARKS PANETH LLF			Firm's EIN 🛌 1	1-3518842					
Use Only	Firm's address 685 THIRD AVENUE									
	NEW YORK, NY 100	17		Phone no. ( 212	)503-8800					
May the IF	May the IRS discuss this return with the preparer shown above? (see instructions)									
632001 11-1	1-16 LHA For Paperwork Reduction Act Noti	ce, see the separate instructions	5.		Form <b>990</b> (2016)					

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	LAMBDA LEGAL DEFENSE & EDUCATION FUND,
	990 (2016) INC. 23-7395681 Page 2
Par	t III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Check if Schedule O contains a response or note to any line in this Part III
	THE LAMBDA LEGAL DEFENSE AND EDUCATION FUND, INC. IS A NATIONAL
	ORGANIZATION COMMITTED TO ACHIEVING FULL RECOGNITION OF THE CIVIL
	RIGHTS OF LESBIANS, GAY MEN, BISEXUALS, TRANSGENDER PEOPLE AND ANYONE
	WITH HIV THROUGH IMPACT LITIGATION, EDUCATION AND PUBLIC POLICY WORK.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
•	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-	revenue, if any, for each program service reported. (Code: ) (Expenses \$ 8,136,820 · including grants of \$ ) (Revenue \$ 565,783 · )
4a	(Code:) (Expenses \$8,136,820. including grants of \$) (Revenue \$565,783.) LEGAL PROGRAM
	DURING 2017, LAMBDA LEGAL WAS ACTIVE IN LITIGATION, LEGISLATION,
	POLICY, AND ADVOCACY EFFORTS AT THE FEDERAL AND STATE LEVEL, FURTHERING
	THE CIVIL RIGHTS OF LESBIAN, GAY, BISEXUAL, AND TRANSGENDER PEOPLE AND
	EVERYONE LIVING WITH HIV. THIS WORK BUILDS OF DECADES OF LEGAL ACTION
	AND ADVOCACY THAT HAS SECURED MAJOR RIGHTS ADVANCES FOR LGBT PEOPLE IN
	THE U.S. WE RESPONDED TO 6,502 CALLS TO OUR LEGAL HELP DESK.
	WE MADE MAJOR ADVANCES IN SECURING EMPLOYMENT DISCRIMINATION PROTECTION
	FOR LGBT PEOPLE. WE WON A HISTORIC RULING FROM THE FULL SEVENTH CIRCUIT
	COURT OF APPEALS, HOLDING THAT TITLE VII THE CIVIL RIGHTS ACT DOES
4b	(Code:) (Expenses \$5,145,437. including grants of \$) (Revenue \$)
	EDUCATION & PUBLIC AFFAIRS PROGRAM
	LAMBDA LEGAL PROVIDES INFORMATION AND RESOURCES TO A WIDE AUDIENCE
	ACROSS MANY CHANNELS THROUGHOUT THE YEAR.
	IN 2017, WE PUBLISHED TWO MAJOR REPORTS: SAFE HAVEN: CLOSING THE GAP
	BETWEEN RECOMMEND PRACTICE AND REALITY FOR TRANSGENDER AND
	GENDER-EXPANSIVE YOUTH IN OUT-OF-HOME CARE, THE FIRST COMPREHENSIVE
	ANALYSIS OF STATE LAWS AND POLICIES TO PROTECT TRANSGENDER AND GENDER NON-CONFORMING YOUTH IN THE CHILD WELFARE, JUVENILE JUSTICE, AND
	RUNAWAY AND HOMELESS YOUTH SYSTEMS; AND JUSTICE OUT OF BALANCE, WHICH
	FOCUSED ON HOW THE ELECTION OF JUDGES AND THE STARK LACK OF DIVERSITY
4c	(Code:) (Expenses \$ including grants of \$ ) (Revenue \$ )
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 13,282,257.
	Form <b>990</b> (2016)
632002	SEE SCHEDULE O FOR CONTINUATION(S)

2	
,	

Form	990 (2016) INC. 23-7395	681	Р	age <b>3</b>
Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
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	Х	
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
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		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	Х	
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	Х	
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

INC.

Form 990 (2016)

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
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
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	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	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		<u> </u>
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
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	1		
	Note. All Form 990 filers are required to complete Schedule O	38	х	

Form	990 (2016) INC. 23-7395	581	Р	age <b>5</b>
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 78			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 131			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
•	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	-		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		

LAMBDA LEGAL DEFENSE & EDUCATION FUN	LAMBDA	LEGAL	DEFENSE	&	EDUCATION	FUND
--------------------------------------	--------	-------	---------	---	-----------	------

Form	990 (2016) INC •		23-7395	681	Р	age <b>6</b>
Pa	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 th	rough	7b below, and for a	"No" r	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	See i	nstructions.			
	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year	1a	28	8	103	
Ia	If there are material differences in voting rights among members of the governing body at the end of the tax year			-		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
h		46	28	2		
-	Enter the number of voting members included in line 1a, above, who are independent	1b		4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship					x
•	officer, director, trustee, or key employee?			2		
3	Did the organization delegate control over management duties customarily performed by or under the					x
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		X
6	Did the organization have members or stockholders?			6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or	_		
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockh	olders, or			37
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	-	-		37	
	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					<u></u>
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	e Code.)			
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch					
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	37	
	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y befo	re filing the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
				12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye					
	in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approva	al by ir	idependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent v	/ith a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its p	participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nizatio	n'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 $\blacktriangleright$ NY , CA , IL , GA					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Sect	ion 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain	in Scł	nedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con	nflict c	of interest policy, an	d finan	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks ar	nd records:			
	NATALIE BLEDMAN - 212-809-8585					
	120 WALL STREET, 19TH FLOOR, NEW YORK, NY 10005-3	919				

Form 990 (2	2016)	INC.					23-73
Part VII	Compensation	of Officers,	Directors,	Trustees,	Key Employees,	Highest (	Compensated
	Employees, an	d Independe	ent Contra	ctors			

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

INC.

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

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

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

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

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

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	(da		Pos	ition			Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	than is bot	h an	compensation	compensation	amount of
	week		cer an	nd a d	irecto	or/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	ę.			ated		organization	(W-2/1099-MISC)	from the
	related	ustee	truste		æ	bensi		(W-2/1099-MISC)		organization
	organizations below	ual tri	ional		ploye	t com				and related organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) TRACEY WALLACE	20.00	<u> </u>			$\times$	τæ	۰ <u>ت</u>			
CO-CHAIR		x		x				0.	Ο.	0.
(2) STEVE WINTERS	20.00									
CO-CHAIR		X		X				0.	0.	0.
(3) DAVID DEFIGUEIREDO	6.00									
TREASURER		X		Х				0.	0.	0.
(4) VADIM SCHICK	6.00									
SECRETARY		X		Х				0.	0.	0.
(5) YEMI A. ADEGBONMIRE	5.00	1							_	
DIRECTOR		X						0.	0.	0.
(6) SHERI BONSTELLE	5.00	l								
DIRECTOR		X						0.	0.	0.
(7) WENDY CHANG	5.00									•
DIRECTOR		X						0.	0.	0.
(8) ROBERTA CONROY	5.00	- 						0	0	0
DIRECTOR	5.00	X						0.	0.	0.
(9) TRAYTON DAVIS	5.00	x						0.	0.	0.
DIRECTOR	5.00	<u>⊢</u>						0.	0.	0.
(10) RACHEL GOLDBERG DIRECTOR	5.00	x						0.	0.	0.
(11) RODERICK HAWKINS	5.00	<u>^</u>						0.	0.	0.
DIRECTOR	5.00	x						0.	0.	0.
(12) ANNE KROOK	5.00	<u> </u>							0.	<b>0</b> .
DIRECTOR	5100	x						0.	0.	0.
(13) LAURA MAECHTLEN	5.00									
DIRECTOR		x						0.	0.	0.
(14) PATRICK S. MENASCO	5.00									
DIRECTOR		x						0.	0.	0.
(15) CAROL MEYER	5.00	1				1				
DIRECTOR		x						0.	0.	0.
(16) ANDREW MITCHELL-NAMDAR	5.00									
DIRECTOR		X						0.	0.	0.
(17) DANIELLE PIERGALLINI	5.00									
DIRECTOR		X				1		0.	0.	0.

INC.

Form 990 (2016) INC .									23-73	395	681	Pa	age <b>8</b>
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	vees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average	(do		Pos		) than	one	Reportable	Reportable		Est	timate	ed
	hours per	box	, unle	ess pe	erson	is bot	h an	compensation	compensatio	n	am	ount	of
	week	<u> </u>	cer ar	10 a 0	Irecto	or/trus	tee)	from	from related			other	
	(list any hours for	recto						the	organizations			oensa	
	related	or di	ee			sated		organization	(W-2/1099-MIS	5C)		om th	
	organizations	ustee	trust		ee	npens		(W-2/1099-MISC)			•	anizat I relat	
	below	d ual tr	tional	Ι.	yolqr	st cor yee	-					nizati	
	line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				5-		
(18) KATRINA QUICKER	5.00	_			-								
DIRECTOR		x						0.		0.			Ο.
(19) JOHN RICHARDS	5.00												
DIRECTOR		X						0.		0.			Ο.
(20) VICKY G. ROBINSON	5.00												
DIRECTOR		X						0.		0.			Ο.
(21) TODD SEARS	5.00												
DIRECTOR		X						0.		0.			0.
(22) DANIEL SLAUGHTER	5.00												
DIRECTOR		X						0.		0.			0.
(23) JOHN STAFSTROM	5.00												
DIRECTOR		Х						0.		0.			0.
(24) HOLLY THOMAS	5.00												
DIRECTOR		Х						0.		0.			0.
(25) LAWRENCE TRACHTENBERG	5.00									_			_
DIRECTOR		Х						0.		0.			0.
(26) DAVID TSAI	5.00												•
DIRECTOR		X						0.		0.			0.
1b Sub-total								0.		0.			0.
c Total from continuation sheets to Part VI	I, Section A							1,756,685.		0.			05.
d Total (add lines 1b and 1c)								1,756,685.		0.	388	3,4	05.
2 Total number of individuals (including but n	ot limited to th	lose	liste	ed a	bov	e) wł	no r	received more than \$100	0,000 of reportabl	е			0
compensation from the organization												Yes	9 No
										ſ	_	res	NO
<b>3</b> Did the organization list any <b>former</b> officer,					•			•					х
line 1a? If "Yes," complete Schedule J for s	ucn individual										3		л
4 For any individual listed on line 1a, is the su and related organizations greater than \$150									the organization			х	
5 Did any person listed on line 1a receive or a											4	23	
rendered to the organization? If "Yes," com	-				-			led organization of indiv	idual for services		5		х
Section B. Independent Contractors		01	013	ucn	pers	<u>son</u> .					5		
1 Complete this table for your five highest co	mpensated in	dep	ende	ent c	cont	racto	ors	that received more than	\$100.000 of com	npens	ation fi	rom	
the organization. Report compensation for	-												
(A)	,			0				(B)			(C	)	
								omper		n			
JOAN M GARY VOICE													
59 BEVERLY RD, WEST ORANG	GE, NJ (	)7(	052	2				CONSULTANT			119	9,1	00.
							_						
							_						

Total number of independent contractors (including but not limited to those listed above) who received more than 2 \$100,000 of compensation from the organization 1

INC.

Form 990

23-7395681

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average			Posi	ition	I		Reportable	Reportable	Estimated
	hours	(cl	heck	all t	hat	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	5				loyee		the	organizations	compensation
	(list any	irecto				emp		organization	(W-2/1099-MISC)	from the
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	truste	al trus		yee	mpen				organizations
	below	ndividual trustee or director	Institutional trustee	5	Key employee	Highest compensated employee	er			
	line)	Indiv	Instit	Officer	Key e	Highe	Former			
(27) MICHELLE WAITES	5.00									
DIRECTOR		х						0.	Ο.	0.
(28) KENNETH WEISSENBERG	5.00									
DIRECTOR		х						0.	0.	0.
(29) MARLA BUTLER	5.00									
DIRECTOR (FORMER)		х						0.	0.	0.
(30) JEFFREY CLEGHORN	5.00									
DIRECTOR (FORMER)		Х						0.	0.	0.
(31) KAREN DIXON	5.00									
DIRECTOR (FORMER)		Х						0.	0.	0.
(32) VINCENT JONES	5.00									
DIRECTOR (FORMER)		Х						0.	0.	0.
(33) ROBERT KUHN	5.00									
DIRECTOR (FORMER)		Х						0.	0.	0.
(34) SUZANNE LEVAN	5.00									
DIRECTOR (FORMER)		Х						0.	0.	0.
(35) GAIL MORSE	5.00									
DIRECTOR (FORMER)		Х						0.	0.	0.
(36) ELLIOTT SERNEL	5.00									
DIRECTOR (FORMER)		Х						0.	0.	0.
(37) LISA SNYDER	5.00								_	_
DIRECTOR (FORMER)		Х						0.	0.	0.
(38) STEVE THORNTON	5.00									
DIRECTOR (FORMER)		Х						0.	0.	0.
(39) RACHEL B. TIVEN	40.00									
CEO				Х				150,000.	0.	13,093.
(40) KEVIN CATHCART	40.00							284 825	•	
EXECUTIVE DIRECTOR (FORMER)	40.00			х				371,795.	0.	36,886.
(41) LAWSON SHADBURN	40.00							125 020	0	
CFAO (FORMER)	10.00			Х				135,238.	0.	35,646.
(42) JON DAVIDSON	40.00				37			047 400	0	
LEGAL DIRECTOR	40.00				Х			247,488.	0.	63,465.
(43) FRANCES GOLDSTEIN	40.00					37			0	40 001
DEPUTY DIRECTOR (FORMER)	40.00					X		227,569.	0.	40,801.
(44) HAYLEY GORENBERG	40.00					v		175 047	^	10 211
LEGAL DEPUTY DIRECTOR	40.00					X		175,247.	0.	49,211.
(45) SUSAN SOMMER	40.00					x		152 02/	0.	60 020
DIR. CONSTITUTION LAW	40.00					^		152,934.	0.	69,930.
(46) JUDITH O KELLY	40.00					x		110 010	0.	16 671
DIRECTOR OF LEADERSHIP		L						149,843.	0.	46,671.
Total to Part VII, Section A, line 1c										

Form 990 INC.	EGAL DEI	FEI	ISI	Ξ 8	£1	EDI	JCZ	ATION FUND,	23-739	5681
Part VII Section A. Officers, Directors, Tru	ustees. Kev Fr	nolo	over	s. a	nd I	liah	est	Compensated Employ		5001
(A)	(B)		<i>.</i>		C)	ngi		(D)	(E)	(F)
Name and title	Average				ition	n		Reportable	Reportable	Estimated
Name and the	hours	(c	hecł				lv)	compensation	compensation	amount of
	per	(0)				I	, <u>,</u> ,	from	from related	other
	week					vee		the	organizations	compensation
	(list any	ctor				nploy		organization	(W-2/1099-MISC)	from the
	hours for	r dire				ed er		(W-2/1099-MISC)		organization
	related	stee o	ustee			en sat				and related
	organizations	ul trus	nal tr		lo yee	dwo				organizations
	below	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	Former			
	line)	Indi	Inst	Officer	Key	Hig	Боп			
(47) JENNIFER PIZER	49.00									
DIRECTOR OF LAW AND POLICY						X		146,571.	0.	32,702.
Total to Part VII, Section A, line 1c								1,756,685.		388,405.

		(2016) INC.					23-7395	681 Page 9
Pa	rt VII	II Statement of Rever	nue					
		Check if Schedule O cont	ains a response	or note to any lin		(D)		
					<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grai and Other Similar Amour	1 a	Federated campaigns	1a					
our		Membership dues						
Am (	с	Fundraising events	1c	3,967,844.				
lar lar	d	Related organizations	1d					
ns, Simi		Government grants (contributi						
ersi	f	All other contributions, gifts, grant	ts, and					
Ę		similar amounts not included abov	ve <b>1f</b>	11,784,113.				
ont D d C	g	Noncash contributions included in lines	1a-1f: \$	525,510.				
σõ	h	Total. Add lines 1a-1f			15,751,957.			
				Business Code				
/ice	2 a			541100	565,783.	565,783.		
Ser	b							
žen Ven	C I							
Be	d							
Pro	e f	All other program service reve						
	g				565,783.			
-	3	Investment income (including			, .			
	-	other similar amounts)			404,571.			404,571.
	4	Income from investment of tax						<i>.</i>
	5	Royalties		F				
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
	с	Rental income or (loss)						
	d	Net rental income or (loss)	►					
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	18,483,811.					
	b	Less: cost or other basis						
		and sales expenses	18,353,335.					
		Gain or (loss)		· · · · · · · · · · · · · · · · · · ·	120 476			120 476
		Net gain or (loss)		▶	130,476.			130,476.
anu	8 a	Gross income from fundraising including \$3,967						
ver		contributions reported on line						
Å,		Part IV, line 18	-	853,746.				
Other Revenue	b	Less: direct expenses		853,746.				
Ó		Net income or (loss) from fund		· · · · · · · · · · · · · · · · · · ·	Ο.			
		Gross income from gaming ac						
		Part IV, line 19						
	b	Less: direct expenses						
	с	Net income or (loss) from gam	ing activities	►				
	10 a	Gross sales of inventory, less						
		and allowances						
		Less: cost of goods sold						
ļ	С	Net income or (loss) from sales						
ļ		Miscellaneous Revenu	e	Business Code	0.000			0.001
		MISCELLANEOUS REVENUE		541100	8,264.			8,264.
	b							
	c c							
		All other revenue			8,264.			
	12 12	Total revenue. See instructions.			16,861,051.	565,783.	0.	543,311.
		. stat. te te ta a cos mon donolid.			, · · · - , <b>- ·</b>	· · · <b>,</b> · •		· · · · · · · · · · · · · · · · · · ·

632009 11-11-16

	1 990 (2016) INC . rt IX Statement of Functional Expense	E DEFENSE & .			395681 Page <b>10</b>
	ion 501(c)(3) and 501(c)(4) organizations must corr		er organizations must co	omplete column (A).	
	Check if Schedule O contains a respor		<b>U</b>		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21 $\dots$				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
Ū	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	1,827,968.	1,242,416.	303,310.	282,242
6	Compensation not included above, to disqualified		_//	,	,
Ū	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	7,634,968.	5,711,328.	590,079.	1,333,561
8	Pension plan accruals and contributions (include		414 001		100 005
	section 401(k) and 403(b) employer contributions)	568,070.	414,861.	50,974.	102,235
9	Other employee benefits	2,233,196. 715,993.	1,657,642.	171,218.	404,336
10	Payroll taxes	/15,995.	526,959.	65,128.	123,906
1	Fees for services (non-employees):				
	Management				
b					
	Accounting	93,214.		93,214.	
	Lobbying Professional fundraising services. See Part IV, line 17	414,934.		5572111	414,934
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)	1,249,974.	616,183.	628,157.	5,634
2	Advertising and promotion	. ,	,		•
3	Office expenses	201,939.	148,624.	18,369.	34,946
14	Information technology				
15	Royalties				
16	Occupancy	1,285,352.	945,997.	116,919.	222,436
7	Travel	728,854.	385,573.	160,971.	182,310
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
0	Interest				
1	Payments to affiliates	010 014		10 102	26 244
2	Depreciation, depletion, and amortization	210,014.	154,567.	19,103.	36,344
3		93,336.	68,694.	8,490.	16,152
4	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	PRINTING AND OUTREACH	1,695,223.	677,899.		1,017,324
b	TELECOMMUNICATIONS	323,268.	237,920.	29,405.	55,943
c	BANK AND CARD FEES	249,074.		249,074.	
d	RECRUITMENT	176,020.	129,548.	16,011.	30,461
е	All other expenses	556,947.	364,046.	120,510.	72,391
25	Total functional expenses. Add lines 1 through 24e	20,258,344.	13,282,257.	2,640,932.	4,335,155
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

Check here Tif following SOP 98-2 (ASC 958-720)

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Form 990	(2016)	INC.	2	3
Part X	Balance Sheet			

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments		2	908,595.
	3	Pledges and grants receivable, net		3	1,667,913.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ŝt		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
∢	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	880,441.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 1,884,088	•		
	b	Less: accumulated depreciation 10b 908,988		10c	975,100.
	11	Investments - publicly traded securities	14,402,590.	11	12,055,602.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	3,417,295.	15	3,377,619.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	22,530,139.	16	19,865,270.
	17	Accounts payable and accrued expenses	1,055,425.	17	1,096,410.
	18	Grants payable		18	
	19	Deferred revenue	100,009.	19	22,546.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons.			
iab		Complete Part II of Schedule L		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	2,013,029.		1,950,124.
	26	Total liabilities. Add lines 17 through 25	3,168,463.	26	3,069,080.
		Organizations that follow SFAS 117 (ASC 958), check here 🕨 🔟 and			
es		complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets			13,639,552.
Bal	28	Temporarily restricted net assets	3,684,190.		2,733,548.
pu	29	Permanently restricted net assets	423,090.	29	423,090.
Ŀ		Organizations that do not follow SFAS 117 (ASC 958), check here			
л С		and complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
let	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	19,361,676.	33	16,796,190.
	34	Total liabilities and net assets/fund balances	22,530,139.	34	19,865,270.
					Form <b>990</b> (2016)

LAMBDA LEGAL DEFENSE & EDUCAT	ION FUND,
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	990 <u>(</u> 2016) INC •	23-	7395	681	Pa	ge <b>12</b>
Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
			1.0	0.0	1 0	<b>F</b> 1
	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,86</u>		
	Total expenses (must equal Part IX, column (A), line 25)	2		,25		
	Revenue less expenses. Subtract line 2 from line 1	3		, 39		
	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	19			76.
	Net unrealized gains (losses) on investments	5		89	5,0	31.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
	Prior period adjustments	8				
	Other changes in net assets or fund balances (explain in Schedule O)	9		-6	3,2	24.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	16	,79	6,1	90.
Par	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					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					
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	d 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 separat	te 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	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C	).			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit			
	Act and OMB Circular A-133?			3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	dit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

SC	HEC	DULE A		Dublia	Cha	with Ctatura		hlia Ci			OMB No. 1545-0047
(Fo	rm 99	90 or 990-EZ)	0			rity Status a					2016
			C	omplete if		nization is a section 47(a)(1) nonexempt			or a section		2010
		of the Treasury				Attach to Form 990					Open to Public
Intern	al Reve	nue Service	Information	tion about S	chedule A	(Form 990 or 990-EZ) a	nd its instruc	tions is at <sup>N</sup>	/ww.irs.gov/fc	orm990.	Inspection
Nam	e of t	the organizati			GAL I	DEFENSE & El	DUCATIO	ON FUN	ID,		identification number
			INC								3-7395681
Pa	rt I	Reason	for Public	Charity S	Status (	(All organizations mus	t complete tł	nis part.) S	ee instruction	S.	
The	organ	ization is not a	private foun	dation beca	ause it is:	(For lines 1 through 1	2, check only	y one box.)			
1		A church, co	nvention of cl	nurches, or	associati	on of churches descr	bed in <b>secti</b>	on 170(b)(	1)(A)(i).		
2		A school des	cribed in <b>sec</b>	tion 170(b)	(1)(A)(ii).	(Attach Schedule E (F	orm 990 or 9	90-EZ).)			
3		A hospital or	a cooperative	e hospital se	ervice org	anization described in	section 17	0(b)(1)(A)(i	ii).		
4		A medical res	earch organi	zation opera	ated in co	onjunction with a hosp	ital describe	d in <b>sectio</b>	on 170(b)(1)(A	<b>)(iii).</b> Enter	the hospital's name,
		city, and stat									
5		-	-			ollege or university ow	ned or opera	ated by a g	overnmental	unit descrik	ped in
			(b)(1)(A)(iv). (	-	-						
6	A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b> An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in										
7	Χ	0		2		antial part of its suppo	ort from a go	vernmenta	l unit or from t	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.)										
8	H				• •						
9	An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or										
			or a non-ianu-	grant colleç	ge of agric	culture (see instructio	is). Enter the	e name, cit	y, and state o	i the colleg	eor
10		university:	on that norm	ally received	e: (1) mor	e than 33 1/3% of its	support from	contributi	ons member	shin faas a	nd gross receipts from
10											from gross investment
						e (less section 511 tax					
		See section					,			. gaa	
11				-		sively to test for public	safety. See	section 5	09(a)(4).		
12		-	•	-		sively for the benefit o	-			arry out the	purposes of one or
		more publicly	supported o	rganization	s describ	ed in section 509(a)(	I) or section	509(a)(2).	See section	509(a)(3). (	Check the box in
		lines 12a thro	ough 12d that	describes	the type of	of supporting organiza	ation and cor	nplete line	s 12e, 12f, an	d 12g.	
а		<b>Type I.</b> A s	upporting org	anization o	perated, s	supervised, or control	ed by its su	oported or	ganization(s),	typically by	giving
		the suppor	ted organizat	ion(s) the p	ower to re	egularly appoint or ele	ct a majority	of the dire	ctors or trust	ees of the s	upporting
		organizatio	n. <b>You must</b>	complete F	Part IV, S	ections A and B.					
b				-	-	d or controlled in con			-		-
						ganization vested in th	e same pers	ons that c	ontrol or mana	age the sup	ported
		7 -		-		, Sections A and C.					
с			-	-		ng organization operat				ally integrate	ed with,
-		- ··	0			s). You must comple		,		المحامد المحامد	
d						porting organization o				•	
						ization generally must mplete Part IV, Secti				u an alleni	IVEIIESS
е		- ·				written determination					
Ŭ						onally integrated supp			a i ypo i, i ypo	, n, rype m	
f	Ente										
						ed organization(s).					
		i) Name of supp		(ii) E		(iii) Type of organization	n (iv) Is the org	anization listed ning document?	(v) Amount o	f monetary	(vi) Amount of other
		organizatior	l			(described on lines 1-1 above (see instruction	Vec	No	support (see ii	nstructions)	support (see instructions)
							_				
Tota	1										

# Schedule A (Form 990 or 990 EZ) 2016 INC.

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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.)

Sec	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	9775797.	10422829.	16186205.	17554748.	15751957.	69691536.		
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	9775797.	10422829.	16186205.	17554748.	15751957.	69691536.		
	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)						67,015.		
6	Public support. Subtract line 5 from line 4.						69624521.		
	tion B. Total Support						0000000000000000		
	ndar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
	Amounts from line 4	9775797.	10422829	16186205	17554748	15751957	69691536.		
8	Gross income from interest,	57767576							
0									
	dividends, payments received on								
	securities loans, rents, royalties	207,478.	238,591.	218,297.	286,800.	535,047.	1486213.		
~	and income from similar sources	207,470.	230,371.	210,257.	200,000.	555,047.	1400213.		
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			16,890.	19,089.	0 264	11 212		
	assets (Explain in Part VI.)			10,090.	19,009.	8,264.	<u>44,243.</u> 71221992.		
	Total support. Add lines 7 through 10								
	Gross receipts from related activities,	,	,				,797,767.		
13	First five years. If the Form 990 is for	-	s first, second, thi	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)			
<u> </u>	organization, check this box and stor		roontago				▶∟		
	ction C. Computation of Publ						07 76		
	Public support percentage for 2016 (		-			14	97.76 %		
	Public support percentage from 2015					15	97.57 %		
16a	33 1/3% support test - 2016. If the o	-							
	stop here. The organization qualifies								
b	33 1/3% support test - 2015. If the o								
	and <b>stop here.</b> The organization qualifies as a publicly supported organization								
17a	10% -facts-and-circumstances tes								
	and if the organization meets the "fac		-	•	•	e e			
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		▶∟		
b	10% -facts-and-circumstances tes	t - 2015. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or		
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, c	heck this box and	stop here. Explair	n in Part VI how the	e		
	organization meets the "facts-and-cire	cumstances" test.	The organization	qualifies as a publi	cly supported orga	anization	▶□		
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17l	b, check this box a	and see instructior	ns ►		

Schedule A (Form 990 or 990-EZ) 2016

# Schedule A (Form 990 or 990-EZ) 2016 INC .

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

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

Section A. Public Support							
Calendar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2	2016	(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							
<b>3</b> 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>b</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							
<b>c</b> Add lines 7a and 7b							
8 Public support. (Subtract line 7c from line 6.)							
Section B. Total Support							
Calendar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) (	2016	(f) Total
9 Amounts from line 6	(.,		(0) = 0 + 1	(0, 2010			(1) 1010
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
<b>b</b> Unrelated business taxable income							
(less section 511 taxes) from businesses							
acquired after June 30, 1975							
<b>c</b> Add lines 10a and 10b							
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12 Other income. Do not include gain or loss from the sale of capital							
assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.)					1		
14 First five years. If the Form 990 is for	the organization'	s first second thi	rd fourth or fifth t	ax vear as a section	1 = 501(c)(c)	(3) organiz	ation
check this box and stop here	•			2		(o) organiz	
Section C. Computation of Public		ercentage					
15 Public support percentage for 2016 (lir			column (f))		15		%
16 Public support percentage from 2015					16		%
Section D. Computation of Inves							70
17 Investment income percentage for 201					17		04
							<u>%</u>
18 Investment income percentage from 2 10a 22 1/2% support toots 2016 If the					<b>18</b>	and line 1	% Z is not
<b>19a 33 1/3% support tests - 2016.</b> If the o							
more than 33 1/3%, check this box an						00 1/00/	
<b>b 33 1/3% support tests - 2015.</b> If the o							
line 18 is not more than 33 1/3%, chec							
20 Private foundation. If the organization	ald not check a	box on line 14, 19	a, or 19b, check t	nis box and see in	struction	S	▶∟

Yes

No

#### Schedule A (Form 990 or 990-EZ) 2016 INC. 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 (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.)

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

10b

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Sche		-739568	1 Pa	age <b>5</b>
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described 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		
C	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 <b>Part VI</b> 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			
0	the supported organization(s).	1		L
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how			
2	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 <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations	3		L
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction)	tions)		
' a	The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	ee instructions	:)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	
-	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described 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 <b>Part VI</b> the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? <i>Provide details in <b>Part VI.</b></i>	3a		
b				
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2016

Sche	edule A (Form 990 or 990-EZ) 2016 INC.			23-7395681 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	a Orga		
1	Check here if the organization satisfied the Integral Part Test as a qualifying			Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must cor	nplete S	Sections 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):			
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		
e	Discount claimed for blockage or other			
	factors (explain in detail in <b>Part VI</b> ):			
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-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2016

632026 09-21-16

<u> </u>		DEFENSE & EDUC.		3-7395681 Page 7
	dule A (Form 990 or 990-EZ) 2016 INC. tV Type III Non-Functionally Integrated 509	(a)(2) Summarting Org	4	5-7595061 Page7
		(a)(3) Supporting Orga	anizations (continued)	
	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	he organization is responsive	9	
	(provide details in <b>Part VI</b> ). See instructions			
_9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
с	From 2013			
d	From 2014			
e	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
-	Applied to 2016 distributable amount			
с	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, 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 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c			
8	Breakdown of line 7:			
a				
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

Schedule A	(Form 990 or 990 EZ) 2016 INC •	23-7395681	Page 8
Part VI	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a of Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any addition (See instructions.)	or 17b; Part III, line 12; 1 and 2; Part IV, Section V, Section B, line 1e; Pa	n C.

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

Department of the Treasury

Internal Revenue Service Name of the organization

# Schedule of Contributors

 Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047

# 2016

Employer identification number

LAME
INC.

BDA LEGAL DEFENSE & EDUCATION FUND,

23-7395681

Organizatio	n type	(check	one):

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 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.

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

#### 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. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047

**Open to Public** 

Inspection

Department of the Treasury Internal Revenue Service

#### 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.

Nar		LEGAL DEFENSE & E	DUCATION FU	IND,	Employer identification number
	INC.				23-7395681
Pa	art I-A Complete if the org	ganization is exempt unde	r section 501(c)	or is a section 5	527 organization.
2	Provide a description of the organi Political campaign activity expendi Volunteer hours for political campa	tures			
Pa	art I-B Complete if the or	ganization is exempt unde	r section 501(c)(	3).	
1	Enter the amount of any excise tax	incurred by the organization unde	r section 4955	-	
2	Enter the amount of any excise tax	incurred by organization manager	s under section 4955		. ► \$
3	If the organization incurred a section	on 4955 tax, did it file Form 4720 fo	or this year?		Yes No
4a	a Was a correction made?				
k	If "Yes." describe in Part IV.				
Pa	art I-C Complete if the org	ganization is exempt unde	r section 501(c),	except section	
	Enter the amount directly expende		-		► \$
2	Enter the amount of the filing organ				
	exempt function activities				
3	Total exempt function expenditure		,		
	line 17b				
4	Did the filing organization file <b>Form</b>				
5	,				
	made payments. For each organiza				-
	contributions received that were pupplical action committee (PAC). If			•	separate segregated fund or a
		1 /1		1	
	<b>(a)</b> Name	(b) Address	(c) EIN	(d) Amount paid fu filing organization funds. If none, ente	n's contributions received and

632041 11-10-16

Schedule C (Form 990 or 990-EZ) 20	16 INC.				23-7	395681 Page 2				
Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under										
section 501(h)).										
A Check ► if the filing orga	A Check 🕨 📖 if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,									
expenses, and	share of excess	lobbying	expenditures).							
B Check ▶ if the filing orga	inization checke	d box A ar	nd "limited control" pro	visions apply.						
(The term "ex	)	<b>(a)</b> Filing organization's totals	<b>(b)</b> Affiliated group totals							
<b>1a</b> Total lobbying expenditures to	<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)									
<b>b</b> Total lobbying expenditures to		• •			80,056.					
<b>c</b> Total lobbying expenditures (a					93,214.					
d Other exempt purpose expend					20,165,130.					
e Total exempt purpose expend					20,258,344.					
f Lobbying nontaxable amount.	-				1,000,000.					
If the amount on line 1e, column			bying nontaxable am							
Not over \$500,000			the amount on line 1e.							
Over \$500,000 but not over \$	1,000,000	\$100,00	0 plus 15% of the exc	ess over \$500,000.						
Over \$1,000,000 but not over	\$1,500,000	\$175,00	0 plus 10% of the exc	ess over \$1,000,000.						
Over \$1,500,000 but not over	\$17,000,000	\$225,00	0 plus 5% of the exce	ss over \$1,500,000.						
Over \$17,000,000		\$1,000,0	000.							
	·									
g Grassroots nontaxable amour	t (enter 25% of	line 1f)			250,000.					
h Subtract line 1g from line 1a. I	f zero or less, er	nter -0-			0.					
i Subtract line 1f from line 1c. If	zero or less, en	ter -0-			0.					
j If there is an amount other that	n zero on either	line 1h or	line 1i, did the organiz	ation file Form 4720						
reporting section 4911 tax for	this year?					Yes No				
4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)										
	Lobby	/ing Exper	nditures During 4-Yea	ar Averaging Period						
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2	013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> Total				
2a Lobbying nontaxable amount	960	,393.	1,000,000.	1,000,000.	1,000,000.	3,960,393.				

<ul> <li>b Lobbying ceiling amount</li> <li>(150% of line 2a, column(e))</li> </ul>					5,940,590.
c Total lobbying expenditures	47,432.	35,005.	5,344.	93,214.	180,995.
d Grassroots nontaxable amount	240,098.	250,000.	250,000.	250,000.	990,098.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,485,147.
f Grassroots lobbying expenditures	239.	6,512.	1,006.	13,158.	20,915.

Schedule C (Form 990 or 990-EZ) 2016

#### Schedule C (Form 990 or 990-EZ) 2016 INC. Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the	e lobbying activity.	Yes	No	Amo	ount
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 c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
с	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5	i), or se	ection	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		. 2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Par	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."				ne 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 political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		. 2a		
b	Carryover from last year		2b		
	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
	expenditure next year?		. 4		
5	Taxable amount of lobbying and political expenditures (see instructions)				
	t IV Supplemental Information				
	do the descriptions required for Part IA, line 1: Part IP, line 4: Part IC, line 5: Part IIA (affiliated group	liet). Dort II A	lines 1	and 2 (acc	

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

SCHEDULE D		Supplementa	al Financia	al Statement	s		OMB No. 154	5-0047
	n 990)	Supplemental Financial Statements <ul> <li>Complete if the organization answered "Yes" on Form 990,</li> </ul>					201	6
Doport	ment of the Treasury	Part IV, line 6, 7, 8, 9, 10	3, 9, 1Ŏ, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990.					Public
	Revenue Service	Information about Schedule D (For Formation)	rm 990) and its in	structions is at www.ii	rs.gov/fo	orm99	0. Inspectio	n
Nam	e of the organizati		SE & EDUC	ATION FUND,		Emp	oloyer identification	
Der		INC.		hay Cimilar Fund			23-739568	
Pa		ations Maintaining Donor Advise n answered "Yes" on Form 990, Part IV, lir		iner Similar Fund	SOFA	ccou	IIIIS.Complete if the	)
	organizatio	Tansweled Tes Ofform 390, Faitty, in		advised funds	(1	) Fun	ds and other accoun	its
1	Total number at er	nd of year	,		· ·	- <b>,</b>		
2		f contributions to (during year)						
3								
4		t end of year						
5		on inform all donors and donor advisors in		sets held in donor advi	sed fund	ds		
	are the organizatio	on's property, subject to the organization's	exclusive legal co	ntrol?			Yes	🗌 No
6	Did the organization	on inform all grantees, donors, and donor a	advisors in writing	that grant funds can be	e used o	only		
	for charitable purp	oses and not for the benefit of the donor o	or donor advisor, o	r for any other purpose	e conferi	ring		
_	impermissible priv							No No
Pa		ation Easements. Complete if the or	-		Part IV,	line 7.		
1		servation easements held by the organizat	· –					
		n of land for public use (e.g., recreation or e	education)	Preservation of a hist	-	•		
		f natural habitat		Preservation of a cer	tified his	storic s	structure	
2		n of open space through 2d if the organization held a quali	fied concernation .	ontribution in the form			tion opportion th	a laat
2	day of the tax year	0 0 1	ned conservation (		101 a CO	riserva	Held at the End of the	
а		onservation easements				2a		
b		ricted by conservation easements				2b		
c		vation easements on a certified historic sti				2c		
d		vation easements included in (c) acquired			r			
		nal Register				2d		
3		vation easements modified, transferred, re				izatior	n during the tax	
	year 🕨							
4	Number of states	where property subject to conservation ea	sement is located	▶				
5	U U	tion have a written policy regarding the pe	0.	nspection, handling of				
-		orcement of the conservation easements						└── No
6	Staff and voluntee	er hours devoted to monitoring, inspecting,	, handling of violati	ons, and enforcing con	iservatio	on eas	ements during the ye	ear
7			dling of violations	and anforcing concorr	otion on		to during the year	
7	► \$	ses incurred in monitoring, inspecting, hand	uning of violations,	and emorcing conserva	alion ea	Serrier	its during the year	
8		vation easement reported on line 2(d) abo	ve satisfy the requ	irements of section 17(	)(h)(4)(B	) <i>(</i> i)		
•		)(4)(B)(ii)?					Yes	No
9		be how the organization reports conservat						nd
	include, if applicat	ble, the text of the footnote to the organiza	tion's financial sta	tements that describes	the org	janizat	tion's accounting for	
_	conservation ease							
Pa		ations Maintaining Collections o			Other S	Simil	ar Assets.	
	Complete if	f the organization answered "Yes" on Form	n 990, Part IV, line	8.				
1a	U U	elected, as permitted under SFAS 116 (AS						
		s, or other similar assets held for public ex		, or research in furthera	ance of	public	service, provide, in F	Part XIII,
		tnote to its financial statements that descr						
a	-	elected, as permitted under SFAS 116 (As						
	relating to these it	r similar assets held for public exhibition, e	oucation, or resea	ion in furtheralice of pl	anine sel	vice, p		amounts
	-	ded on Form 990, Part VIII, line 1					\$	
							\$ \$	
2	.,	received or held works of art, historical tre						
-		unts required to be reported under SFAS 1					-	
а	-	on Form 990, Part VIII, line 1		-			\$	
		I Form 990, Part X						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 632051 08-29-16

LAMBDA	LEGAL	DEFENSE	&	EDUCATION	FUND
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	T110	LEGAL DEFE	NSE & EDUC	ATION FU	ND,	00 7	000001	
	dule D (Form 990) 2016 INC •						395681	
Par	t III   Organizations Maintaining C	Collections of A	t, Historical Tr	easures, or C	Other S	Similar Asso	ets(continu	ied)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are	e a signif	ficant use of its	s collection	items
	( <u>check</u> all that apply):							
а	Public exhibition	d	Loan or exc	hange programs				
b	Scholarly research	е	Other					
с	Preservation for future generations							
4	4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.							
5	During the year, did the organization solicit of	or receive donations of	of art, historical trea	sures, or other s	milar as	sets		
	to be sold to raise funds rather than to be made	aintained as part of t	he organization's c	ollection?			Yes	🗌 No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the organizatio	on answered "Yes	s" on For	rm 990, Part IV	, line 9, or	
	reported an amount on Form 990, Pa		-					
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contribution	ns or other assets	s not incl	luded		
	on Form 990, Part X?		•				Yes	No No
b	If "Yes," explain the arrangement in Part XIII					—		
			lowing table.		Г		Amount	
~	Reginning balance				ŀ	1c	Amount	
	Additions during the year					1d		
	Additions during the year							
	Distributions during the year					1e		
t On	Ending balance					1f	Yes	
	Did the organization include an amount on F		•					No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete i						<u></u>	
ı aı				1		Three years heal		aara baali
		(a) Current year	(b) Prior year	(c) Two years ba		Three years back		ears back
	Beginning of year balance	1,038,290.	367,126.			327,322	·	306,987.
	Contributions	150.040	666,027.			45.040		
	Net investment earnings, gains, and losses	150,940.	5,137.	6,8	03.	15,013	·	20,335.
	Grants or scholarships							
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance	1,189,230.	1,038,290.	. 367,1	26.	342,335	. 3	327,322.
2	Provide the estimated percentage of the cur		e (line 1g, column (	a)) held as:				
а	Board designated or quasi-endowment	52.24	_%					
b	Permanent endowment  12.18	_%						
с	Temporarily restricted endowment ► 3	5.58 %						
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.						
3a	Are there endowment funds not in the posse	ession of the organization	ation that are held a	and administered	for the c	organization		
	by:						Y	es No
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations						3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organiza							
4	Describe in Part XIII the intended uses of the							
	t VI Land, Buildings, and Equipm							
	Complete if the organization answere		), Part IV. line 11a S	See Form 990. Pa	art X. line	e 10.		
	Description of property	(a) Cost or o			c) Accur		(d) Book	value
	Description of property	basis (investr		(other)	deprec			value
10	Land	· · ·		()				
	Land							
	Buildings		24	0,196.	30	9,537.	550	,659.
	Leasehold improvements			3,892.		9,451.		,441.
	Equipment		<u></u>	13,094.	59.	<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	+44	,
	Other			10-1		<u> </u>	075	100
Iotal	. Add lines 1a through 1e. (Column (d) must e	equai ⊢orm 990, Part	x, column (B), line 🛛	IUC.)		🕨 📘	515	,100.

Schedule D (Form 990) 2016

LAMBDA I	LEGAL	DEFENSE	&	EDUCATION	FUND,
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Schedule D (Form 990) 2016 INC.

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Part viii investments - Other Securities.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		

# Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

## Part IX Other Assets.

(8) (9)

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

(a) Description	(b) Book value
(1) ASSETS HELD FOR GIFT ANNUITIES	2,295,827.
(2) BENEFICIAL INTEREST IN TRUSTS	1,081,792.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	3,377,619.

#### Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	805,353.
(3) LIABILITES UNDER GIFT ANNUITIES	1,144,771.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	1,950,124.

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

Schedule D (Form 990) 2016

	dule D (Form 990) 2016 LNC .			Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem		nue per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a			
1	Total revenue, gains, and other support per audited financial statements			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments			
b	Donated services and use of facilities	. 2b		
С	Recoveries of prior year grants	. 2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
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 <b>4a</b> and <b>4b</b>			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	=	enses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	l.		
	· · · · · · · · · · · · · · · · · · ·			
1	Total expenses and losses per audited financial statements		1	
1 2	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:			
-	Total expenses and losses per audited financial statements		1	
2	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	2a		
2 a	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	2a 2b	1	
2 a b	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	2a 2b 2c	1	
2 a b c	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 <b>2a</b> through <b>2d</b>	2a 2b 2c 2d	2e	
2 a b c d	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	2e	
2 a b c d e	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 <b>2a</b> through <b>2d</b>	2a 2b 2c 2d	2e	
2 a b c d e 3	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	2a 2b 2c 2d	2e	
2 a b c d e 3 4	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 2d	2e	
2 a b c d e 3 4 a	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.)         Add lines 4a and 4b	2a 2b 2c 2d 2d 4a 4b	2e 3 	
2 a b c d e 3 4 a b c 5	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 <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> 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	2e 3 	

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 V, LINE 4:

EARNINGS HAVE BEEN RETAINED IN THE ENDOWMENT TO ALLOW THE BALANCE TO GROW.

THE ORGANIZATION PLANS ON USING EARNINGS FOR PROGRAMMATIC PURPOSES IN THE

FUTURE.

PART X, LINE 2:

LAMBDA LEGAL BELIEVES IT HAS NO UNCERTAIN INCOME TAX POSITIONS AS OF

#### OCTOBER 31, 2017 AND 2016, IN ACCORDANCE WITH ACCOUNTING STANDARDS

CODIFICATION ("ASC") TOPIC 740 ("INCOME TAXES"), WHICH PROVIDES STANDARDS

#### FOR ESTABLISHING AND CLASSIFYING ANY TAX PROVISIONS FOR UNCERTAIN TAX

### POSITIONS.

LAMBDA       LEGAL       DEFENSE       EDUCATION       FUND,         Schedule D (Form 990) 2016       INC.       23-7395681       Page 5         Part XIII       Supplemental Information (continued)
PARTS XI AND XII
THE ORGANIZATION CHANGED ITS ACCOUNTING PERIOD TO END ON DECEMBER 31, 2017
AND ITS FINANCIAL STATEMENTS FOR THE 14-MONTH PERIOD THEN ENDED WERE
AUDITED BY AN INDEPENDENT ACCOUNTANT.

SCHEDULE G	Suppleme	ental Information Regarding	, Fun	drais	ing or Gaming	Activ	vities	OMB No. 1545-0047	
(Form 990 or 990-EZ)	Complete if th	e organization answered "Yes" on	Form	990, F	Part IV, line 17, 18, o			2016	
Department of the Treasury	(	organization entered more than \$1 Attach to Form 990						Open to Public	
Internal Revenue Service	Information a	about Schedule G (Form 990 or 990-EZ	) and its	s instru	uctions is at www.irs.g	gov/fo	rm990.	Inspection	
Name of the organization	LAMBDA	LEGAL DEFENSE & EI	DUCA	TIO	N FUND,		Employer id	entification number	
	INC.						23-739		
	complete this par	• Complete if the organization answert.	ered "Y	′es" oi	n Form 990, Part IV,	line 17	7. Form 990-E	Z filers are not	
		sed funds through any of the followi	-			-			
<b>b</b> X Internet and					nment grants				
c X Phone solicit		g X Special	fundra	aising	events				
d X In-person so									
		or oral agreement with any individua					or V		
• • •		Part VII) or entity in connection with p			-		X Ye		
	-	viduals or entities (fundraisers) purs	uant to	agree	ements under which	the fu	ndraiser is to	be	
compensated at le	ast \$5,000 by the	e organization.							
			(iii)	Did		(v) /	Amount paid	(vi) Amount paid	
(i) Name and addres		(ii) Activity	have c	ustody	(iv) Gross receipts		r retained by) undraiser	to (or retained by)	
or entity (fund	araiser)		or cor contrib	ntrol of utions?	from activity		ed in col. (i)	organization	
RISING TIDE DIRECT	- 233	MEMBERSHIP & DIRECT MAIL	Yes	No					
NEEDHAM STREET, NEW	WTON, MA	CONSULTING		X	1,774,509.		130,298	. 1,644,212.	
EVENT MANAGEMENT G	ROUP INC -								
411 EAST 83RD STREE	ET, SUITE	SPECIAL EVENT FUNDRAISER		х	983,909.		42,500	. 941,409.	
BING CONSULTING SE	RVICES INC								
- 3361 MISSION STR	EET, SAN	SPECIAL EVENT FUNDRAISER		х	401,133.		38,105	. 363,028.	
GBK PRODUCTIONS LL	C - 143 S								
ALMONTH DRIVE, LOS	ANGELES,	SPECIAL EVENT FUNDRAISER		X	336,115.		34,587	. 301,528.	
EDELMAN - 21992 NE	TWORK								
PLACE, CHICAGO, IL		EMAIL		X	151,278.		206,822	-55,545.	
GRASSROOTS CAMPAIG									
P.O. BOX 120557, BO	OSTON, MA	CANVASSING		X	116,846.		90,185	. 26,661.	
		1	I						
Total					3,763,790.		542,497	. 3,221,293.	
		on is registered or licensed to solicit		outions		d it is (			

or licensing.

AK, AL, AR, AZ, CA, CO, CT, FL, GA, IL, KS, KY, LA, MA, MD, ME, MI, MN, MS, NC, ND, NH, NJ, NM, NY OK, OH, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV, HI, DC, NV

#### LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

23-7395681 Page 2

Schedule G (Form 990 or 990-EZ) 2016  $\, {
m INC}$  . Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NY LIBERTY SAN(add col. (a) through 29 AWARDS FRANCISCO SO col. (c)) (event type) (event type) (total number) Revenue 4,821,590. 983,909. 3,436,548. 401,133. 1 Gross receipts 763,803. 262,745. 2,941,296. 3,967,844. 2 Less: Contributions 220,106. 138,388. 495,252. 853,746. **3** Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 41,900. 90,670. 134,441. 267,011. 6 Rent/facility costs 174,212. 306,260. 1,400. 481,872. 7 Food and beverages 8 Entertainment 2,547. 3,994. 98,322. 104,863. 9 Other direct expenses 853,746. **10** Direct expense summary. Add lines 4 through 9 in column (d) ► 0. 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than Part III \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes % Yes % Yes % 6 Volunteer labor No No No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? Ves No **b** If "No," explain: **10a** Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? No **b** If "Yes," explain:

632082 09-12-16

Schedule G (Form 990 or 990-EZ) 2016

LAMBDA	LEGAL	DEFENSE	&	EDUCATION	FUND,

Sch	edule G (Form 990 or 990-EZ) 2016 INC - 23-	7395681	Page 3
	Does the organization conduct gaming activities with nonmembers?		No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No No
	Indicate the percentage of gaming activity conducted in:		
	The organization's facility		%
	an outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No No
k	If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount		
	of gaming revenue retained by the third party  \$		
c	If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation 🕨 \$		
	Description of services provided 🕨		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	🔛 Yes	└── No
k	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year 🕨 \$		
Ра	<b>Supplemental Information.</b> Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	lines 9, 9b, 1	0b, 15b,
50	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISE	K5:	
(I	) NAME OF FUNDRAISER: RISING TIDE DIRECT		
(I	) ADDRESS OF FUNDRAISER: 233 NEEDHAM STREET, NEWTON, MA 0246	4	
(I	) NAME OF FUNDRAISER: EVENT MANAGEMENT GROUP INC		
(I	) ADDRESS OF FUNDRAISER:		
-	1 EAST 83RD STREET, SUITE 3F, NEW YORK, NY 10028		
- T	T TWO T OLVE DIVERT' DOTTE DI' NEW TOUK' NI TOORO		

LAMBDA LEGAL DEFENSE & EDUCATION FUND, INC. Schedule G (Form 990 or 990-EZ)

**Part IV** Supplemental Information (continued)

23-7395681 Page 4

(I) NAME OF FUNDRAISER: BING CONSULTING SERVICES INC

(I) ADDRESS OF FUNDRAISER: 3361 MISSION STREET, SAN FRANCISCO, CA 94110

(I) NAME OF FUNDRAISER: GBK PRODUCTIONS LLC

(I) ADDRESS OF FUNDRAISER: 143 S ALMONTH DRIVE, LOS ANGELES, CA 90048

(I) NAME OF FUNDRAISER: EDELMAN

(I) ADDRESS OF FUNDRAISER: 21992 NETWORK PLACE, CHICAGO, IL 60673-1219

(I) NAME OF FUNDRAISER: GRASSROOTS CAMPAIGNS INC

(I) ADDRESS OF FUNDRAISER: P.O. BOX 120557, BOSTON, MA 02112

sc	SCHEDULE J Compensation Information						
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		2016			
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		20	IU	,	
Depa	rtment of the Treasury	Attach to Form 990.		Open to			
Interr	al Revenue Service	► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/for		Inspe			
Nan	ne of the organizatio		Employer ic			mber	
		INC.	23-7	39568	1		
Pa	rt I Question	s Regarding Compensation					
4.	Check the engineer	inte la v(a) if the even institut availad any of the following to suffy a second listed on Four	- 000		Yes	No	
а		iate box(es) if the organization provided any of the following to or for a person listed on Form line 1a. Complete Part III to provide any relevant information regarding these items.	1990,				
	First-class or o						
	Travel for com	, i i i i i i i i i i i i i i i i i i i					
		cation and gross-up payments Health or social club dues or initiation fee					
		spending account Personal services (such as, maid, chauffe					
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or					
	•	provision of all of the expenses described above? If "No," complete Part III to explain		1b			
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,					
		rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2			
3	Indicate which, if a	ny, of the following the filing organization used to establish the compensation of the organization	ation's				
	CEO/Executive Dire	ector. Check all that apply. Do not check any boxes for methods used by a related organizat	ion to				
	establish compens	ation of the CEO/Executive Director, but explain in Part III.					
	Compensation						
	Independent compensation consultant						
	X Form 990 of c	ther organizations	committee				
4		any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing					
2	organization or a re			4a		x	
a b		e payment or change-of-control payment? ceive payment from, a supplemental nonqualified retirement plan?				X	
		ceive payment from, an equity-based compensation arrangement?				X	
C		nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.		+0			
	Only section 501(	c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on				
	contingent on the r						
а	The organization?			5a		Х	
	<b>b</b> Any related organization?					Х	
		or 5b, describe in Part III.					
6	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on				
	contingent on the r						
а	The organization?			6a		X	
b		ation?		6b		X	
		or 6b, describe in Part III.					
7	-	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment		7		x	
~	not described on lines 5 and 6? If "Yes," describe in Part III						
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to t				v	
~		eption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X	
9		id the organization also follow the rebuttable presumption procedure described in					
		n 53.4958-6(c)?			- 000		
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Schedu	ule J (Forn	n 990	) 2016	

Schedule J (Form 990) 2016

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

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

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

<b>(A)</b> Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	Denefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) RACHEL B. TIVEN	(i)	150,000.	0.	0.	0.	13,093.	163,093.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) KEVIN CATHCART	(i)	371,795.	0.	0.	18,842.	18,044.	408,681.	0.
EXECUTIVE DIRECTOR (FORMER)	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) LAWSON SHADBURN	(i)	135,238.	0.	0.	0.	35,646.	170,884.	0.
CFAO (FORMER)	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JON DAVIDSON	(i)	247,488.	0.	0.	26,593.	36,872.	310,953.	0.
LEGAL DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) FRANCES GOLDSTEIN	(i)	227,569.	0.	0.	22,757.	18,044.	268,370.	0.
DEPUTY DIRECTOR (FORMER)	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) HAYLEY GORENBERG	(i)	175,247.	0.	0.	17,525.	31,686.	224,458.	0.
LEGAL DEPUTY DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) SUSAN SOMMER	(i)	152,934.	0.	0.	15,293.	54,637.	222,864.	0.
DIR. CONSTITUTION LAW	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JUDITH O KELLY	(i)	149,843.	0.	0.	14,984.	31,687.	196,514.	0.
DIRECTOR OF LEADERSHIP	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) JENNIFER PIZER	(i)	146,571.	0.	0.	14,657.	18,045.	179,273.	0.
DIRECTOR OF LAW AND POLICY	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Page 2

23-7395681

LAMBDA	LEGAL	DEFENSE	&	EDUCATION	FUND,
INC.					

Part III Supplemental Information

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

Schedule J (Form 990) 2016

SCHEDULE	Μ
(Form 990)	

Department of the Treasury Internal Revenue Service

# **Noncash Contributions**

OMB No. 1545-0047

990)	
	Complet

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
 Attach to Form 990.

Open To Public Inspection

Name of the	organization
Name of the	organization
	-

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. LAMBDA LEGAL DEFENSE & EDUCATION FUND, Employ

loyer	identi	ifica	tion	number
2.	רי ר	201		<b>5</b> 1

	INC.				23-	7395	681	
Pa	rt I Types of Property							
		<b>(a)</b> Check if applicable	(b) Number of contributions or items contributed	<b>(c)</b> Noncash contribution amounts reported on Form 990, Part VIII, line 1g	<b>(d</b> Method of c noncash contrib	etermin	•	S
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	89	525,510.	FAIR MARKE	r va	LUE	
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other $_{\dots}$							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other 🕨 ( )							
29	Number of Forms 8283 received by the organized							
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement 29				
							Yes	No
30a	During the year, did the organization receive by							
	must hold for at least three years from the date			•				
	exempt purposes for the entire holding period?	?				30a		X
	If "Yes," describe the arrangement in Part II.						v	
31	Does the organization have a gift acceptance				itions?	31	Х	
32a	Does the organization hire or use third parties		-					v
	contributions?					32a		X
b	If "Yes," describe in Part II.			· · · · · · · · · ·				

LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.
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	LAMBDA :	LEGAL	DEFENSE	&	EDUCATION	FUND,
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Schedule M	I (Form 990) (2016)	INC.	23-7395681	Page <b>2</b>
Part II	Supplemental	<b>Information.</b> Provide the information required by Part I, lines 30b, 32b, and 33, : I, column (b), the number of contributions, the number of items received, or a comb dditional information.	and whether the organiza ination of both. Also com	ition
	. ,			

632142 08-23-16

OMB No 1545-0047 SCHEDULE O Supplemental Information to Form 990 or 990-EZ 16 Complete to provide information for responses to specific questions on (Form 990 or 990-EZ) Form 990 or 990-EZ or to provide any additional information. **Open to Public** Attach to Form 990 or 990-EZ. Department of the Treasury Information about Schedule O (Form 990 or 990-EZ) and its instructions is at WWW.irs.gov/form990. Inspection Internal Revenue Service LAMBDA LEGAL DEFENSE & EDUCATION FUND, Name of the organization Employer identification number 23-7395681 INC. FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: COMMITTED TO ACHIEVING FULL RECOGNITION OF THE CIVIL RIGHTS OF LESBIANS, GAY MEN, BISEXUALS, TRANSGENDER PEOPLE AND ANYONE WITH HIV THROUGH IMPACT LITIGATION, EDUCATION AND PUBLIC POLICY WORK.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: COVER LESBIAN, GAY, AND BISEXUAL PEOPLE THROUGH ITS PROHIBITION AGAINST SEX DISCRIMINATION. WE APPEALED A SECOND TITLE VII CASE TO THE SUPREME COURT, WHICH DECLINED TO HEAR IT; AND ARGUED A THIRD BEFORE THE FULL SECOND CIRCUIT COURT OF APPEALS.

MEANWHILE, WE ALSO TOOK STEPS TO PROTECT THE EMPLOYMENT RIGHTS OF TRANSGENDER PEOPLE AND PEOPLE LIVING WITH HIV. WE SUED THE TRUMP ADMINISTRATION OVER ITS TRANSGENDER MILITARY BAN, AND WON A NATIONWIDE PRELIMINARY INJUNCTION, ENSURING THAT TRANSGENDER AMERICANS WOULD BE ABLE TO CONTINUE TO SERVE AND BEGIN TO ENLIST AS THE LITIGATION CONTINUES. WE FILED SUIT ON BEHALF OF AN HIV-POSITIVE DEPUTY SHERIFF WHOSE EMPLOYMENT OFFER WAS WITHDRAWN WHEN HIS HIV STATUS BECAME KNOWN.

THE MILITARY BAN CASE IS ONE OF MANY ACTIONS WE TOOK IN 2017 TO PROTECT THE RIGHTS OF TRANSGENDER PEOPLE. OTHER ACTIONS INCLUDED THE SETTLEMENT OF OUR CASE AGAINST NORTH CAROLINA FOR ITS ANTI-TRANS LAW BARRING TRANSGENDER PEOPLE FROM USING PUBLIC BATHROOMS; THE SETTLEMENT OF A PENNSYLVANIA CASE ON BEHALF OF HIGH SCHOOL STUDENTS DENIED ACCESS TO APPROPRIATE BATHROOMS; THE FILING OF A SIMILAR CHALLENGE ON BEHALF OF A FLORIDA STUDENT SEEKING THE RIGHT TO USE THE BATHROOM; AND THE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2016)

632211 08-25-16

Schedule O (Form 990 or 990-EZ) (2016)	Page <b>2</b>
Name of the organization LAMBDA LEGAL DEFENSE & EDUCATION FUND,	Employer identification number
INC.	23-7395681
FILING OF LAWSUITS IN PUERTO RICO AND IDAHO CHALLENGING T	HOSE STATES'
REFUSAL TO LET TRANSGENDER PEOPLE CORRECT THEIR BIRTH CER	TIFICATES. IN
ADDITION, WE SUED THE MISSOURI DEPARTMENT OF CORRECTIONS	ON BEHALF OF
AN INCARCERATED TRANSGENDER WOMAN WHO WAS BEING DENIED ME	DICALLY
NECESSARY TREATMENT.	

IN ADDITION TO LITIGATION WORK ON TRANSGENDER RIGHTS ISSUES, WE PARTNERED WITH TRANSGENDER LEGAL DEFENSE & EDUCATION FUND TO COLLABORATE ON THEIR NAME CHANGE PROJECT. THE PROJECTS PROVIDES FREE LEGAL NAME-CHANGE SERVICES TO LOW-INCOME TRANSGENDER PEOPLE; TLDEF RUNS THE PROJECT IN NEW YORK AND LAMBDA LEGAL JOINED THE PROJECT TO HELP DEVELOP THE INITIATIVE IN ATLANTA.

WE WON A SIGNIFICANT FAIR HOUSING ACT RULING IN COLORADO ON BEHALF OF A TRANSGENDER, LESBIAN FAMILY DENIED HOUSING, AND WE CONTINUED LITIGATING A CASE IN WHICH WE ARE SEEKING TO HOLD ACCOUNTABLE A SENIOR LIVING FACILITY FOR THE HARASSMENT AND VIOLENCE A LESBIAN RESIDENT ENDURED AT THE HANDS OF OTHER RESIDENTS.

AMIDST EFFORTS BY OPPONENTS OF LGBT RIGHTS TO UNDERMINE THE FULL PROMISE OF MARRIAGE EQUALITY WON IN THE 2015 OBERGEFELL DECISION, WE CONTINUED TO DEFEND THOSE RIGHTS IN SEVERAL LAWSUITS. THESE INCLUDED A CASE IN FLORIDA WHERE WE AFFIRMED THE RIGHT TO BE PROPERLY RECOGNIZED ON DEATH CERTIFICATES; A CASE IN TEXAS WHERE WE ARE FIGHTING TO PROTECT THE EQUAL PROVISION OF EMPLOYEE BENEFIT COVERAGE; A CASE IN HAWAII WHERE WE ARE ESTABLISHING THAT THE FULL RIGHTS AND RESPONSIBILITIES OF MARRIAGE ALSO INCLUDES CHILD SUPPORT OBLIGATIONS; AND A CASE IN MISSISSIPPI WHERE WE INSISTED THAT A NON-BIOLOGICAL PARENT HAS THE SAME

Schedule O (Form 990 or 990-EZ) (2016) Pa							Page <b>2</b>
Name of the organization	LAMBDA INC.	LEGAL	DEFENSE	&	EDUCATION	FUND,	Employer identification number 23-7395681

RIGHTS IN SAME-SEX MARRIAGES AS IN OPPOSITE-SEX MARRIAGES

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

ON STATE COURTS THREATEN LGBT RIGHTS.

WE MAINTAIN A ROBUST ONLINE PRESENCE THAT PROVIDES COMPREHENSIVE RESOURCES, TIMELY NEWS, ANALYSIS, AND COMMENTARY ACROSS MULTIPLE PLATFORMS. THESE INCLUDE OUR WEBSITE, WHICH IN 2017 HAD 1,172,495 VISITORS; AND FACEBOOK, TWITTER, INSTAGRAM, AND YOUTUBE SOCIAL MEDIA CHANNELS, WHERE HUNDREDS OF PIECES OF CONTENT REACH OVER A MILLION OR MORE PEOPLE EVERY WEEK.

OUR MEDIA TEAM PRODUCES HUNDREDS OF PRESS RELEASES A YEAR, REGULARLY SPEAKS WITH A BROAD RANGE OF REPORTERS TO KEEP THEM INFORMED ON LGBT RIGHTS ISSUES, AND GENERATES TENS OR THOUSANDS OF NEWS STORIES ANNUALLY.

LAMBDA LEGAL ATTORNEYS AND OTHER STAFF SPEAK AT DOZENS OF CONFERENCES EVERY YEAR, PROVIDING INSIGHT AND INFORMATION ON THE LATEST LGBT RIGHTS DEVELOPMENTS.

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

A DRAFT OF THE RETURN IS REVIEWED BY THE AUDIT COMMITTEE AND THE

ADMINISTRATION & FINANCE COMMITTEE. THE FINAL DRAFT IS THEN SENT TO THE

FULL BOARD FOR A COMMENT PERIOD OF AT LEAST FIVE DAYS PRIOR TO FILING.

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

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Schedule O (Form 990 or 990-EZ) (2016)	Page <b>2</b>
Name of the organization LAMBDA LEGAL DEFENSE & EDUCATION FUND, INC.	Employer identification number 23-7395681
OF INTEREST. DURING NEW HIRE ORIENTATION ALL EMPLOYEES AR	E INTRODUCED TO
LAMBDA LEGAL'S EMPLOYEE HANDBOOK WHICH INCLUDES A POLICY	THAT DEFINES
CONFLICTS OF INTEREST AND REQUIRES STAFF TO AVOID ANY CON	FLICTS OF INTEREST
AND NOTIFY THEIR DIRECTOR IF A POTENTIAL CONFLICT EXISTS.	

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

IN JULY 2016, A NEW CEO WAS HIRED TO REPLACE THE RETIRING EXECUTIVE DIRECTOR. THE BOARD APPOINTED A HIRING COMMITTEE, WHICH CONDUCTED A WIDE SEARCH USING A LEADING NATIONAL SEARCH FIRM. THE COMMITTEE AND THE FIRM CONSIDERED COMPENSATION DATA FOR LEADERS OF OTHER ORGANIZATIONS IN THIS FIELD, AND THE COMPENSATION PACKAGE WAS APPROVED BY THE FULL BOARD OF DIRECTORS IN AN EXECUTIVE SESSION DURING A REGULARLY-SCHEDULED BOARD MEETING. THE CEO'S COMPENSATION HAS NOT CHANGED SINCE THAT TIME.

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

IN FEBRUARY 2017, COMPENSATION FOR THE ENTIRE ORGANIZATION WAS AUDITED BY WILLIS TOWERS WATSON, A LEADING NATIONAL COMPENSATION FIRM, THAT PROVIDED AN EXTENSIVE COMPARABILITY DATA FOR ALL POSITIONS BY AN INDEPENDENT SOURCE. IN ADDITION, OFFICERS AND KEY EMPLOYEES HAVE BEEN RECRUITED TO THE ORGANIZATION SINCE THAT TIME, SEVERAL OF THEM USING SEARCH FIRMS THAT BROUGHT FURTHER COMPARABILITY DATA TO THE PROCESS. DELIBERATION OF COMPENSATION FOR THOSE OFFICERS AND KEY EMPLOYEES WAS SUBSTANTIATED AT THE TIME OF HIRING IN INTERNAL MEMORANDA.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST

POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC THROUGH ITS OWN

Schedule O (Form 990 or 990-EZ) (2016) Page 2							
Name of the organization	LAMBDA INC.	LEGAL	DEFENSE	&	EDUCATION	FUND,	Employer identification number 23-7395681

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN VALUE OF GIFT ANNUITIES	-114,781.
CHANGE IN VALUE OF BENEFICIAL INTERESTS IN TRUSTS	51,557.
TOTAL TO FORM 990, PART XI, LINE 9	-63,224.

FORM 990, PART XII, LINE 2:

THE ORGANIZATION CHANGED ITS ACCOUNTING PERIOD TO END ON DECEMBER 31,

2017 AND ITS FINANCIAL STATEMENTS FOR THE 14-MONTH PERIOD THEN ENDED

WERE AUDITED BY AN INDEPENDENT ACCOUNTANT.

FORM 990, PART XII, LINE 2C:

THE PROCESS OF OVERSEEING THE AUDIT AND SELECTION OF INDEPENDENT

ACCOUNTANT HAS NOT BEEN CHANGED FROM PRIOR YEAR.