Form **990**

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2024

Open to Public

Department of the Treasury

A For the 2024 calendar year, or tax year beginning and ending Check if applicable: C Name of organization D Employer identification number NATIONAL LEGAL AID AND DEFENDER Address change ASSOCIATION Name change 36-2337880 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 1901 PENNSYLVANIA AVENUE, NW 500 (202) 452-0620City or town, state or province, country, and ZIP or foreign postal code 8,265,038. **G** Gross receipts \$ Amended 20006 WASHINGTON, DC H(a) Is this a group return Applica-tion pending F Name and address of principal officer: APRIL FRAZIER CAMARA ESO Yes X No for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions WWW.NLADA.ORG J Website: H(c) Group exemption number **K** Form of organization: X Corporation Other L Year of formation: 1949 M State of legal domicile: DC Trust Association Part I Summary Briefly describe the organization's mission or most significant activities: TO DEVELOP & PROMOTE HIGH **Activities & Governance** QUALITY, EFFECTIVE CIVIL LEGAL ASSISTANCE & PUBLIC DEFENSE SERVICES. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 18 3 Number of voting members of the governing body (Part VI, line 1a) 17 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2024 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Prior Year Current Year** 2,884,155. 4,515,028. Contributions and grants (Part VIII, line 1h) 8 2,879,928. 3,166,030. Program service revenue (Part VIII, line 2g) 28,234. 26,293. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 390,656. 298,011. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 6,090,328. 8,098,007. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 1,307,629. 11,808. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 3,790,852. 3,839,025. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 3,391,625. 3,240,282. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 8,386,936. 7,194,285. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -1,103,957. -288,929. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 4,067,216. 3,633,766. Total assets (Part X, line 16) 2,110,826. 1,966,305 21 Total liabilities (Part X, line 26) 三年 956,390. 1,667,461 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign RONALD SIMPSON-BEY, TREASURER Here Type or print name and title Date PTIN Check Preparer's name Preparer's signature 10/24/25 self-employed P00639053 FRANK H. SMITH FRANK H. SMITH Paid CBIZ ADVISORS, LLP Firm's EIN 11-1986323 Preparer Firm's name NW, SUITE 850 Firm's address 1899 L STREET, Use Only Phone no. (202) 227-4000WASHINGTON, DC 20036

X Yes

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

ASSOCIATION 36-2337880 Page 2 Part III | Statement of Program Service Accomplishments X Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: THE NATIONAL LEGAL AID & DEFENDER ASSOCIATION (NLADA) WORKS TO PROMOTE AND DEVELOP HIGH QUALITY, EFFECTIVE CIVIL LEGAL AID AND PUBLIC DEFENSE SERVICES. NLADA ACCOMPLISHES THIS BY SUPPORTING THE EXISTING NETWORK OF CIVIL AND DEFENDER SERVICES THROUGHOUT THE COUNTRY AND BY Did the organization undertake any significant program services during the year which were not listed on the Yes X No prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. 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 revenue, if any, for each program service reported. 3,499,417. including grants of \$ _ 1,307,629.) (Revenue \$) (Expenses \$ SPECIAL PROJECTS - RESTRICTED GRANTS RECEIVED BY NLADA TO CARRY OUT SPECIFIC PROJECTS ON BEHALF OF CIVIL LEGAL AID AND PUBLIC DEFENSE. NLADA'S CIVIL AND DEFENDER DIVISIONS BOTH RECEIVED FUNDING TO SUPPORT AND PROMOTE THE DELIVERY OF HIGH QUALITY LEGAL SERVICES IN THE FIELD. THE CIVIL DIVISION RECEIVED FUNDING TO SUPPORT WORK TO ENHANCE OUTREACH, EDUCATION AND TRAINING TO CIVIL LEGAL AID PROGRAMS DURING THE NATIONWIDE PANDEMIC AND LOCK DOWN. THE DEFENDER DIVISION HAS RECEIVED FUNDING TO CARRY OUT VARIOUS INITIATIVES ON BEHALF OF AN IMPROVED PUBLIC DEFENSE SYSTEM. 581,212. including grants of \$ **459,191.**) 4b) (Expenses \$) (Revenue \$ TRAINING AND CONFERENCE DIVISION - THE TRAINING AND CONFERENCE AGENDAS ARE IN ALIGNMENT WITH NLADA'S STRATEGIC GOALS AND THE WORK OF PROGRAM STAFF, PROVIDING TRAINING OPPORTUNITIES AND CONFERENCES TO BOTH THE CIVIL AND PUBLIC DEFENSE COMMUNITIES. 575 , 732 _ including grants of \$ 1,765,926.) (Revenue \$ CIVIL DIVISION - SUPPORTS A WIDE ARRAY OF ACTIVITIES ON BEHALF OF CIVIL LEGAL AID PROGRAM PROVIDERS, PRO BONO ATTORNEYS, LAW SCHOOLS, BAR ASSOCIATIONS AND OTHER ORGANIZATIONS AND INDIVIDUALS PLAYING A ROLE IN ENSURING THAT LOW-INCOME PEOPLE HAVE ACCESS TO EFFECTIVE REPRESENTATION IN CIVIL LEGAL MATTERS. THE DEFENDER DIVISION SUPPORTS AN ARRAY OF ACTIVITIES ON BEHALF OF IMPROVED PUBLIC DEFENSE SYSTEMS. Other program services (Describe on Schedule O.) 957 , 250 $\underline{\bullet}$ $\underline{\ \ including\ grants\ of\ \$}$ 940,913.)) (Revenue \$

5,613,611.

Form 990 (2024)

36-2337880

Form 990 (2024) ASSOCIATION
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		7.7	
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		.,
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			₹.
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	l _		
_	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			х
_	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		x
4.4	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	as applicable.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D.			
а		11a	Х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	110		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<u>_</u> _
	complete Schedule G, Part III	19		<u> </u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		37	
	domestic government on Part IX, column (A), line 1? If "Yes " complete Schedule I, Parts I and II	21	Х	I

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NATIONAL LEGAL AID AND DEFENDER

Form 990 (2024) ASSOCIATION

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	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 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			,,
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?	200		х
L	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
C	·	28c		x
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	23		
00	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? <i>If "Yes," complete</i>	<u> </u>		
-	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	L
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	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	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
_	Note: All Form 990 filers are required to complete Schedule 0	38	X	
Par				
	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			
b				
С				
	(gambling) winnings to prize winners?	1c	X	<u> </u>

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ASSOCIATION

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Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 2h X Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a 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 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 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? Х 6a 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). Х 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 X If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7с If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f 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? 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 Sponsoring organizations maintaining donor advised funds. 9 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 10 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 Section 501(c)(12) organizations. Enter: 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 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 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. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? Х 15 If "Yes," see the instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17 If "Yes," complete Form 6069.

432005 12-10-24

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ASSOCIATION 36-2337880 Page 6 Form 990 (2024) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 18 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 17 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b

Section C. Disclosure

taxable entity during the year?

exempt status with respect to such arrangements?

17 List the states with which a copy of this Form 990 is required to be filed AL ,	ı, AR, CA, HI, KS, MD, MI, NJ, NY, ND, OK, OF
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Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website X Upon request __ Other (explain on Schedule O)

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records YVETTE HATCHER - (202) 452-0620

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.

1901 PENNSYLVANIA AVENUE NW, # 500, WASHINGTON

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Х

16a

16b

Form 990 (2024) ASSOCIATION

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

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

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

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

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	box	not c , unles	heck i ss per	ition more rson is	than o	n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) JO-ANN WALLACE DIRECTOR	1.00 37.50	Х		Х				0.	341,028.	49,769.
(2) APRIL CAMARA FRAZIER	37.50	Λ		Λ		\vdash		0.	341,020.	49,109.
PRESIDENT AND CEO	37.30	1		Х				249,704.	0.	31,732.
(3) ALISON BLOOMQUIST	37.50							240,104.	0.	31,732.
VP, DLS	37.30	1			x			178,238.	0.	31,581.
(4) MARIA SOTO	37.50							,	-	
SR. VP OF OPERATIONS/SECRETARY		1		х				180,893.	0.	26,788.
(5) AILEEN MOFFATT	37.50							<u> </u>		,
VP OF EXTERNAL RELATIONS					Х			173,077.	0.	26,645.
(6) RADHIKA SINGH	37.50									-
VP, CIVIL LEGAL AID INITIATIVES					Х			167,113.	0.	14,404.
(7) RABIAH BURKS	37.50									
VP, COMMUNICATIONS					Х			151,215.	0.	13,141.
(8) PATRICIA FOXEN	37.50									
DIRECTOR, COMMUNITY RESEARCH						X		138,201.	0.	20,560.
(9) YVETTE HATCHER	37.50									
DIRECTOR, FINANCE						X		128,004.	0.	20,861.
(10) CHRISTOPHER BUERGER	37.50									
CHIEF COUNSEL, CIVIL						X		117,300.	0.	5,093.
(11) MICHAEL MROZINSKI, DIRECTOR	37.50									
COMMUNITY-FOCUSED INITIAT. & POLICY						X		105,800.	0.	19,235.
(12) JUSTIN HEIM	37.50	1								
DIRECTOR, LEARNING INNOVATION						X		108,071.	0.	4,140.
(13) MARIA THOMAS-JONES	1.00									
CHAIRPERSON - AS OF 11/2024		Х		Х				0.	0.	0.
(14) STAN GERMAN,	1.00									
IMMED. PAST CHAIR - AS OF 11/2024		Х		Х				0.	0.	0.
(15) RHODIA D. THOMAS, IMMED. PAST	1.00								_	•
CHAIR - UNTIL 11/2024, DIRECTOR	1 00	Х		Х		_		0.	0.	0.
(16) ROSITA STANLEY	1.00	٦,		v					_	^
VICE CHAIRPERSON	1 00	Х	\vdash	Х	_	_		0.	0.	0.
(17) TINA LUONGO	1.00	v		v				0.	0.	0.
VICE CHAIRPERSON		X		X	<u> </u>			1 0.	U •	990 (2024)

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Form **990** (2024)

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average hours per week	box	not cl	ss per	more son i	than o s both or/trust	an	Reportable compensation from	Reportable compensation from related	an	timate nount other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	fr org and	pensa om the anizati d relate anizatio	e ion ed
(18) RONALD SIMPSON-BEY	1.00											
TREASURER		Х		Х				0.	0.			0.
(19) JAMES CHOSY	1.00											
DIRECTOR		Х						0.	0.			0.
(20) ANGELA CIOLFI	1.00											
DIRECTOR		Х						0.	0.			0.
(21) SOUMMER CRAWFORD	1.00											
DIRECTOR		Х						0.	0.			0.
(22) EDDIE ELLIS	1.00											
DIRECTOR		Х						0.	0.			0.
(23) CLARISSA GAFF	1.00											
DIRECTOR		Х						0.	0.			0.
(24) LILLIAN JOHNSON	1.00											
DIRECTOR - UNTIL 11/2024		Х						0.	0.			0.
(25) JACK LONDEN	1.00											
DIRECTOR		Х						0.	0.			0.
(26) AISHA MCWEARY	1.00											
DIRECTOR - UNTIL 11/2024		Х						0.	0.			0.
1b Subtotal								1,697,616.	341,028.	26	3,94	
c Total from continuation sheets to Part VII	, Section A							0.	0.			0.
d Total (add lines 1b and 1c)								1,697,616.	341,028.	26	3,9	<u>49.</u>
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable			
compensation from the organization												11
											Yes	No
3 Did the organization list any former officer,	director, truste	ee, k	еу е	mpl	oye	e, or	hig	hest compensated emp	loyee on			
line 1a? If "Yes," complete Schedule J for st	uch individual									3		<u>X</u>
4 For any individual listed on line 1a, is the su												
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	dule	Jf	or such individual		4	Х	

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services

the organization. Report compensation for the calendar year ending with or within	i the organization's tax year.	
(A) Name and business address	(B) Description of services	(C) Compensation
Name and business address	Description of services	Compensation
TECHNOLOGY EXPRESS	A/V SERVICES FOR	
3504 SUTTON DRIVE, ST. CHARLES, MO 63301	CONFERENCES	189,456.
ALAINA BLOODWORTH, 7731 CEDAR TRAIL DRIVE,	EXECUTIVE DIRECTOR	
DENHAM SPRINGS, LA 70706	FOR BPDA PROGRAM	125,000.

\$100,000 of compensation from the organization 2
SEE PART VII, SECTION A CONTINUATION SHEETS

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

rendered to the organization? If "Yes." complete Schedule J for such person

Form 990 (2024)

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Form 990 ASSOCIATION 36-2337880

orm 990 ASSUCIAT	1011								30-233	7000
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
(A) Name and title	(B) Average			(C Pos	C)			(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours for related organizations below line)	stee or director				Highest compensated employee	Former Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
27) LIZA MERRILL DIRECTOR	1.00	Х						0.	0.	0
28) JODI METZ DIRECTOR	1.00	х						0.	0.	0
29) KELLI NEPTUNE IRECTOR	1.00	x						0.	0.	0
30) PRESTON PUGH	1.00	X						0.	0.	
SIRECTOR 31) JOHN SCHULTZ	1.00									0
IRECTOR		Х						0.	0.	0
_										
	1	1	ı		i l	ı	1	I		

Form 990 (2024) ASSOCIA
Part VIII Statement of Revenue

		Check if Schedule O contains a response of	or note to any lin	e in this Part VIII			
		•	,	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
SS	1 9	Federated campaigns 1a	6,389.				
anta			0,303.				
ij d			662,172.				
fts,		•	002,172.				
Contributions, Gifts, Grants and Other Similar Amounts			938,920.				
ns, Sim		• • •	930,940.				
er i	T	All other contributions, gifts, grants, and	007 547				
현된			907,547.				
d d	_	Noncash contributions included in lines 1a-1f 1g \$	4,750.	4 515 000			
<u>0 g</u>	h	Total. Add lines 1a-1f		4,515,028.			
			Business Code	1 004 065	1 004 065		
9		MEMBERSHIP DUES		1,934,967.			
e Š		CONFERENCE & TRAINING	900099	824,961.			28,125.
Sen		CONTRACT INCOME	900099	235,502.			
am eve		INSURANCE ADMIN.	900099	133,100.			
Program Service Revenue	е	PUBLICATIONS	900099	37,500.	37,500.		
P	f	All other program service revenue					
	g	Total. Add lines 2a-2f		3,166,030.			
	3	Investment income (including dividends, interes	st, and				
		other similar amounts)		26,293.			26,293.
	4	Income from investment of tax-exempt bond pr					
	5	Royalties		442,019.			442,019.
		(i) Real	(ii) Personal				,
	6 a	Gross rents 6a					
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)					
		Gross amount from sales of (i) Securities	(ii) Other				
	, ,	assets other than inventory 7a	()				
	h	Less: cost or other basis					
a							
her Revenue	_	and sales expenses 7b					
eve		Gain or (loss) 7c					
Æ		Net gain or (loss)					
	8 a	Gross income from fundraising events (not					
δ		including \$ 662,172. of					
		contributions reported on line 1c). See	F6 767				
			56,767.				
			167,031.	110 064			110 064
		Net income or (loss) from fundraising events		-110,264.			-110,264.
	9 a	Gross income from gaming activities. See					
		Part IV, line 199a					
		Less: direct expenses 9b					
	c	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances 10a					
	b	Less: cost of goods sold10b					
		Net income or (loss) from sales of inventory					
<u>,</u> ,]			Business Code				
ño «	11 a	OTHER INCOME	900099	58,901.			58,901.
Miscellaneous Revenue	b						
eve	c						
is B	d	All other revenue					
2	_ е	Total. Add lines 11a-11d		58,901.			
	12	Total revenue. See instructions		8,098,007.		0.	445,074.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising expenses (C) Management and general expenses (B) Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations 1,307,629. 1,307,629. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 496,796. 1,244,531. 513,473. 234,262. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 2,041,620. 1,471,762. 397,333. 172,525. Other salaries and wages 7 Pension plan accruals and contributions (include 56,746. 27,736. 23,284. 5,726. section 401(k) and 403(b) employer contributions) 329,531. 159,921. 134,120. 35,490. Other employee benefits 9 166,597. 76,014. 68,444. 22,139. 10 Payroll taxes Fees for services (nonemployees): 125,000. 69,197. 39,278. 16,525. Management 47,878.47,878. Legal 47,187. 47,187. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 1,127,880. 248,326. 144,471. 735,083. column (A), amount, list line 11g expenses on Sch O.) Advertising and promotion 12 312,417. 92,463. 184,148. 35,806. Office expenses 13 Information technology 14 Royalties 15 218,708. 73,566. 28,226. 116,916. 16 Occupancy 357,122. 312,713. 18,769. 25,640. 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials ... 618,447. 577,757. 12,270. 28,420. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 65,932. 23,129. 29,643. 13,160. Depreciation, depletion, and amortization 22 37,577. 13,183. 16,894. 7,500. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 134,655. 99,907. 29,449. 5,299. DUES AND REGISTRATIONS OTHER OPERATING EXPENSE 130,133. 72,691. 19,864. 37,578. 17,346. 4,064. 7,841. 5,441. EOUIP. RENTAL & MAINT. С d All other expenses 8,386,936. 5,613,611. 1,955,117. 818,208. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2024)

Form 990 (2024) Part X Balance Sheet

ı aı	ιλ	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			208,478.	1	300.
	2	Savings and temporary cash investments			2,178,963.	2	1,146,457.
	3	Pledges and grants receivable, net			962,760.	3	1,031,171.
	4	Accounts receivable, net			199,212.	4	434,830
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst	antial c	ontributor, or 35%			
		controlled entity or family member of any of thes	se perso	ons		5	
	6	Loans and other receivables from other disqualit	fied per	sons (as defined			
		under section 4958(f)(1)), and persons described	l in sect	tion 4958(c)(3)(B)		6	
Ŋ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9				93,357.	9	92,400.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	1,066,637.			
	b	Less: accumulated depreciation	10b	1,038,160.	78,049.	10c	28,477.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1			12		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	346,397.	15	900,131.		
	16	Total assets. Add lines 1 through 15 (must equa	al line 3	3)	4,067,216.	16	3,633,766.
	17	Accounts payable and accrued expenses		332,483.	17	395,456.	
	18	Grants payable		18			
	19	Deferred revenue	1,156,673.	19	354,283.		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete I	Part IV	of Schedule D		21	
S	22	Loans and other payables to any current or form	er offic	er, director,			
Liabilities		trustee, key employee, creator or founder, subst	antial c	ontributor, or 35%			
iabi		controlled entity or family member of any of thes	se perso	ons		22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated			147,603.	24	143,924.
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	17-24).	. Complete Part X	454 065		4 000 640
		of Schedule D			474,067.		1,072,642.
	26	Total liabilities. Add lines 17 through 25			2,110,826.	26	1,966,305.
,		Organizations that follow FASB ASC 958, che	ck here	e X			
čě		and complete lines 27, 28, 32, and 33.			500 A15		012 050
lan	27	Net assets without donor restrictions	573,415.	27	213,859.		
l Ba	28	Net assets with donor restrictions			1,382,975.	28	1,453,602.
un		Organizations that do not follow FASB ASC 9					
F F		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds				29	
sse	30	Paid-in or capital surplus, or land, building, or ed				30	
Ļ	31	Retained earnings, endowment, accumulated in			1 056 202	31	1 ((7 4(1
Re	32	Total net assets or fund balances			1,956,390.	32	1,667,461.
	33	Total liabilities and net assets/fund balances			4,067,216.	33	3,633,766.

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Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,09		
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,38		
3	Revenue less expenses. Subtract line 2 from line 1	3	-28		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,95	6,3	<u>90.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,66	7,4	<u>61.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis X 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	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 on Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				1
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			X	
			Form	990	(2024)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

NATIONAL LEGAL AID AND DEFENDER

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

OMB No. 1545-0047

2024
Open to Public

Inspection
Employer identification number
36-2337880

	ASSOCIATION 36-2337880											
Part I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	S.					
The organ	nization is not a private found											
1 🔲	A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1)(A)(i).						
2	A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	า 990).)								
3	A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(i	ii).						
4	A medical research organiz	ation operated in cor	njunction with a hospital	described	in section	n 170(b)(1)(A)	(iii). Enter	the hospital's name,				
	city, and state:											
5	An organization operated for	or the benefit of a col	llege or university owned	or operat	ed by a go	overnmental ur	nit describe	ed in				
	section 170(b)(1)(A)(iv). (Complete Part II.)											
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7 X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in											
	section 170(b)(1)(A)(vi). (C	omplete Part II.)										
8 💹	A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Par	t II.)								
9 🔙	An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a	land-grant	college				
	or university or a non-land-o	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of	the college	or				
	university:											
10	An organization that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns, membershi	p fees, and	d gross receipts from				
	activities related to its exen	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	s support f	rom gross investment				
	income and unrelated busing		(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	fter June 30, 1975.				
	See section 509(a)(2). (Co	•										
11	An organization organized	•	•	•								
12	An organization organized a	•	•	-			•	•				
	more publicly supported or	•						Check the box on				
	lines 12a through 12d that	* *					-					
a	Type I. A supporting orga	· · · · · · · · · · · · · · · · · · ·	•	•	-							
	the supported organization			majority o	of the direc	ctors or trustee	es of the su	ipporting				
	organization. You must o						<i>(</i>)					
b	Type II. A supporting org	•				-		-				
	control or management o			ame perso	ns tnat co	ntrol or manag	ge the supp	ροπεα				
	organization(s). You mus			in aannaat	ion with a	and functional		od with				
C L	Type III functionally inte	-					y integrate	ed with,				
	its supported organization		·				tad araani	ration(a)				
d L							-					
	that is not functionally int requirement (see instruct	-		•		·=	an alterniv	/eness				
e \square	Check this box if the orga	•	•	•			I Type III					
• _	functionally integrated, or					Type I, Type I	i, Type iii					
f Ent	er the number of supported of		nany integrated supportin	ig organiz	ation.							
	vide the following information	•	d organization(s).									
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nnization listed	(v) Amount of	monetary	(vi) Amount of other				
	organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see in	structions)	support (see instructions)				
Total						I						

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	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2194523.	4708842.	2216047.	2884155.	4515028.	16518595.
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	2194523.	4708842.	2216047.	2884155.	4515028.	16518595.
	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)						2108932.
6	Public support. Subtract line 5 from line 4.						14409663.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	Amounts from line 4	2194523.	4708842.	2216047.	2884155.		16518595.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	333,829.	250,164.	270,538.	447,059.	468,312.	1769902.
9	Net income from unrelated business	, , ,	,	,	,		
_	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)			13,703.	2,240.	58,901.	74,844.
11	Total support. Add lines 7 through 10			•	•		18363341.
	Gross receipts from related activities,	etc. (see instructio	ns)				,389,901.
	First 5 years. If the Form 990 is for the	•	,				
	organization, check this box and stop	-		•			
Sec	tion C. Computation of Publi						
14	Public support percentage for 2024 (I	ine 6, column (f), di	vided by line 11, c	column (f))		14	78.47 %
15	Public support percentage from 2023	Schedule A, Part I	I, line 14			15	79.79 %
16a	33 1/3% support test - 2024. If the o	organization did no	t check the box or	n line 13, and line 1	4 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2023. If the	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	ition			
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organization	n qualifies as a pu	blicly supported or	ganization		
b	10% -facts-and-circumstances test	- 2023. If the orga	anization did not c	heck a box on line			
	more, and if the organization meets th	_					
	organization meets the facts-and-circu						
<u>18</u>	Private foundation. If the organization			. ,			
		·			•		/Farm 000\ 0004

Schedule A (Form 990) 2024

ASSOCIATION Schedule A (Form 990) 2024

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

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

Se	ction A. Public Support	elow, please comp	olete i ait ii.j					
Cale	endar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total	
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(1) = 1 = 1	(12)	(5) = 5 = 5	(4,7=5=5	(5) = 5 = 1	χ,	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the 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							
7	A Amounts included on lines 1, 2, and 3 received from disqualified persons							
ŀ	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							
(Add lines 7a and 7b							
	Public support. (Subtract line 7c from line 6.)							
Cale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total	
	Amounts from line 6	(4,) = 3 = 3	(2) 232 :	(5) = 5 = -	(3,) = 3 = 3	(0) = 0 = 1	(.,	
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
ı	Unrelated business taxable income (less section 511 taxes) from businesses							
	acquired after June 30, 1975							
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
	Total support. (Add lines 9, 10c, 11, and 12.)	L					L	
14	First 5 years. If the Form 990 is for the	· ·		,	•	()()	<i>'</i> —	
_	check this box and stop here	- 0						
	ction C. Computation of Publi					 		
	Public support percentage for 2024 (I		•	column (f))		15	%	
	Public support percentage from 2023 ction D. Computation of Inves		-			16	%	
	Investment income percentage for 20			ine 13 column (f)		17	%	
	Investment income percentage from					18		
197	a 33 1/3% support tests - 2024. If the							
ı	more than 33 1/3%, check this box are 33 1/3% support tests - 2023. If the	organization did r	not check a box or	n line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	ind	
	line 18 is not more than 33 1/3%, che							
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions							

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes." answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? |f "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes." provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
	3b		
	3c		
	_		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	10b		
ule	A (Forn	n 990)	2024

Par	Tiv 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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one of			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officer directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	s,		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported	d		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	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,			
C1	supervised, or controlled the supporting organization.	2		
Seci	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			
Sect	the supported organization(s). tion D. All Type III Supporting Organizations	1		
566	tion B. All Type in Supporting Organizations		V	
_	Did the average time was ide to each of its average and average his the last day of the fifth was the of the		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	•		
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Sect	tion E. Type III Functionally Integrated Supporting Organizations	_	'	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruc	tions).		
а	The organization satisfied the Activities Test. Complete line 2 below.	•		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental			
	entity (see instructions).			
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2 a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations					
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.						
	All other Type III non-functionally integrated supporting organizations must		·					
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							
b	Average monthly cash balances	1b						
С	Fair market value of other non-exempt-use assets	1c						
d	Total (add lines 1a, 1b, and 1c)	1d						
е	Discount claimed for blockage or other factors							
	(explain in detail in Part VI):							
2	Acquisition indebtedness applicable to non-exempt-use assets	2						
3	Subtract line 2 from line 1d.	3						
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,							
	see instructions).	4						
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
6	Multiply line 5 by 0.035.	6						
7	Recoveries of prior-year distributions	7						
8	Minimum Asset Amount (add line 7 to line 6)	8						
Sect	ion C - Distributable Amount			Current Year				
1	Adjusted net income for prior year (from Section A, line 8, column A)	1						
2	Enter 0.85 of line 1.	2						
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3						
4	Enter greater of line 2 or line 3.	4						
5	Income tax imposed in prior year	5						
6	Distributable Amount. Subtract line 5 from line 4, unless subject to							
	emergency temporary reduction (see instructions).	6						
7	Check here if the current year is the organization's first as a non-functional	ally integrated	d Type III supporting orga	inization (see				
	instructions).	-						

Schedule A (Form 990) 2024

Par	t V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	inizations _{(continu}	ıed)	
Secti	on D - Distributions		•	-	Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	S	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive	1		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2024 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2024	ıs	Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2024 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2024				
а	From 2019				
b	From 2020				
С	From 2021				
d	From 2022				
е	From 2023				
f	Total of lines 3a through 3e				
g	Applied to under distributions of prior years				
h	Applied to 2024 distributable amount				
i	Carryover from 2019 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2024 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2024 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
	Remaining underdistributions for years prior to 2024, 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 2024. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2025. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2020				
b	Excess from 2021				
С	Excess from 2022				
d	Excess from 2023				
	Excess from 2024				

Schedule A (Form 990) 2024

Part V	Supplem		Information p	Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
1 0.11		ction A	ines 1 2 3h 3c 4	Hb, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C,
	line 1; Part	IV, Secti	ion D, lines 2 and 3	3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V,
	Section D,	lines 5, 6	6, and 8; and Part	V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
	(See instruc			
		PART	II, LINE	10, EXPLANATION FOR OTHER INCOME:
	RINCOME			
	AMOUNT:		13,703.	
2023	AMOUNT:	\$	2,240.	
	AMOUNT:		58,901.	
			-	
_				

Schedule B (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization

NATIONAL LEGAL AID AND DEFENDER

ASSOCIATION

Employer identification number

36-2337880

Organization type (check one):							
Filers of:		Section:					
Form 990	or 990-EZ	$\overline{\mathbf{X}}$ 501(c)(3) (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 990)-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
		covered by the General Rule or a Special Rule . 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 F	Rules						
	X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
answer "l	No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify requirements of Schedule B (Form 990).					

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

Schedule B (Form 990) (Rev. 12-2024)

Name of organization
NATIONAL LEGAL AID AND DEFENDER
ASSOCIATION
S16-2337880

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>863,560.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4	* Total contributions	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b)	(c) Total contributions	(d) Type of contribution
3	Name, address, and ZIP + 4	\$\$	Person X Payroll
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	* 600,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d) Type of contribution
No. 5	Name, address, and ZIP + 4	* 257,853.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 6	Name, address, and ZIP + 4	\$ 100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
NATIONAL LEGAL AID AND DEFENDER
ASSOCIATION
S16-2337880

Part II	Noticasti Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		_					
		_					
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		_ _ .					
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		_					
		- .					
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		_					
		_					
		\$					

Page 4 Schedule B (Form 990) (Rev. 12-2024) Name of organization **Employer identification number** NATIONAL LEGAL AID AND DEFENDER ASSOCIATION 36-2337880 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities For Organizations Exempt From Income Tax Under Section 501(c) and Section 527 OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

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 I-B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and I-C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

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

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

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

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

Name of	f orgai	nization NATIONA: ASSOCIA	L LEGAL AID AND FION	DEFENDER	Emp	loyer identification number (EIN) 36–2337880
Part I	-A		anization is exempt und	der section 501(c)	or is a section 527 o	
2 Pol	litical		ation's direct and indirect politi ures gn activities			
Part I	-B	Complete if the org	anization is exempt und	der section 501(c)((3).	
			incurred by the organization un			
			incurred by organization mana			
			n 4955 tax, did it file Form 4720			
						Yes No
Part I	- 1	describe in Part IV. Complete if the org	anization is exempt und	der section 501(c)	except section 501	C)(3)
			by the filing organization for s			
			ization's funds contributed to c			Ψ
			zation o fando contributed to e	*		\$
			. Add lines 1 and 2. Enter here			
						\$
			1120-POL for this year?			
org pro	janizat mptly	tion listed, enter the amour	Ns of all section 527 political o It paid from the filing organizati separate political organization, de information in Part IV.	ion's funds. Also enter th	he amount of political cont	ributions received that were
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and
_						

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

Schedule C (Form 990) 2024

Schedule C (Form 990) 2024	ASSOCIATION		E04/a\/0\		33/880 Page 2		
Part II-A Complete if the organic section 501(h)).	ganization is exen	npt under section	i ou i (c)(3) and file	ea Form 5/68 (ele	ction under		
A Check if the filing organiz	ation belongs to an affi	liated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,		
expenses, and sha	expenses, and share of excess lobbying expenditures).						
B Check if the filing organiz	ation checked box A ar	nd "limited control" pro	visions apply.				
	nits on Lobbying Expenditures" means amou			(a) Filing organization's totals	(b) Affiliated group totals		
1a Total lobbying expenditures to inf	luence public opinion (g	grassroots lobbying)		6,635.			
b Total lobbying expenditures to inf	luence a legislative bod	ly (direct lobbying)		3,196.			
c Total lobbying expenditures (add	9,831.						
	d Other exempt purpose expenditures						
e Total exempt purpose expenditur				8,386,936.			
f Lobbying nontaxable amount. En	ter the amount from the			569,347.			
IF the amount on line 1e, column (a)	or (b), is: THEN t	he lobbying nontaxab	le amount is:				
not over \$500,000	20% of	the amount on line 1e.					
over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the exce	ess over \$500,000.				
over \$1,000,000 but not over \$1,5	500,000 \$175,00	00 plus 10% of the exce	ess over \$1,000,000.				
over \$1,500,000 but not over \$17							
over \$17,000,000	\$1,000,	000.					
g Grassroots nontaxable amount (e	nter 25% of line 1f)	er 25% of line 1f)					
h Subtract line 1g from line 1a. If ze	ero or less, enter -0-						
i Subtract line 1f from line 1c. If zer	ro or less, enter -0-			0.			
j If there is an amount other than z							
reporting section 4911 tax for this	•				Yes No		
	4-Year Ave	eraging Period Under	Section 501(h)				
(Some organizations	that made a section 50 See the separa	01(h) election do not l ate instructions for lir	•	of the five columns be	elow.		
	Lobbying Exper	nditures During 4-Yea	r Averaging Period		Ι		
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total		
2a Lobbying nontaxable amount	462,572.	448,580.	509,714.	569,347.	1,990,213.		
b Lobbying ceiling amount (150% of line 2a, column(e))					2,985,320.		
c Total lobbying expenditures	9,410.	20,822.	17,809.	9,831.	57,872.		
d Grassroots nontaxable amount	115,643.	112,145.	127,429.	142,337.	497,554.		
e Grassroots ceiling amount (150% of line 2d, column (e))					746,331.		
f Grassroots lobbying expenditures	4,262.	9,981.	7,660.	6,635.	28,538.		

Schedule C (Form 990) 2024

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)).

the lobbying activity. During the year, did the filing organization attempt to influence foreign, national, state, or	- 1			
During the year, did the filing organization attempt to influence foreign, national, state, or	Yes	No	А	mount
Duffid the year, did the filling organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
art III-A Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)	(5), or s	ection	
501(c)(6).		. ,,		
			Yes	N
Were substantially all (90% or more) dues received nondeductible by members?		-	1	
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?			1 2	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	1 2 3	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	the prior year	r? (5), or s	2 3 section	no 3 ir
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from	the prior year	r? (5), or s	2 3 section	ne 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art 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	the prior year on 501(c)(I "No;" OF	r? ; (5), or s	2 3 section	ne 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art 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."	the prior year on 501(c)(I "No;" OF	r? ; (5), or s	gection art III-A, li	ne 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art 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." Dues, assessments, and similar amounts from members	the prior year on 501(c)(I "No;" OF	r? ; (5), or s	gection art III-A, li	ne 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art 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." Dues, assessments, and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid):	the prior year on 501(c)(I "No;" OF	r? ; (5), or s	gection art III-A, li	ne 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art 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." Dues, assessments, and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid): a Current year	the prior year on 501(c)(I "No;" OF	(5), or s	gection art III-A, li	ne 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art 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." Dues, assessments, and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid): a Current year b Carryover from last year	the prior year on 501(c)(I "No;" OF	r? (5), or s (b) Pa	ection art III-A, li	ne 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art 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." Dues, assessments, and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid): a Current year b Carryover from last year c Total	the prior year on 501(c)(I "No;" OF	r? ; (5), or s (b) Pa	ection art III-A, li	ne 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art 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." Dues, assessments, and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid): a Current year b Carryover from last year c Total	the prior year on 501(c)(I "No;" OF	r? ; (5), or s (b) Pa	gection art III-A, li	ne 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art 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." Dues, assessments, and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid): a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses is a contraction of the expense of the section of the se	the prior year on 501(c)(I "No;" OF	r? ; (5), or s (b) Pa	gection art III-A, li	ne 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments, and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid): a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expense of the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	the prior year on 501(c)(I "No;" OF tical	2 (5), or s (b) Pa	gection art III-A, li	ne 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art 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." Dues, assessments, and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid): a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses is a contraction of the expense of the section of the se	the prior year on 501(c)(I "No;" OF tical	2 (5), or s (b) Pa	gection art III-A, li	ne 3, is

SCHEDULE D (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

NATIONAL LEGAL AID AND DEFENDER ASSOCIATION

Employer identification number 36-2337880

Par	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, lin.		Similar Fu	ınds or Ad	ccounts. Complete if the	
	organization anowored Tee City of 1000, Factor, in	(a) Donor advis	sed funds		(b) Funds and other accounts	
1	Total number at end of year	. , ,				
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in v	writing that the assets I	neld in donor	advised fund	ds	
	are the organization's property, subject to the organization's					No
6	Did the organization inform all grantees, donors, and donor a					
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for a	any other pur	pose conferr	ring	
	impermissible private benefit?					No
Par	t II Conservation Easements. Complete if the org	ganization answered "Y	'es" on Form	990, Part IV	, line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)			
	Preservation of land for public use (for example, recreated	tion or education)	Preservat	ion of a histo	orically important land area	
	Protection of natural habitat		Preservat	ion of a cert	ified historic structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contri	bution in the	form of a co		
	day of the tax year.				Held at the End of the Tax	x Year
а	Total number of conservation easements				2a	
b	-				2b	
С	Number of conservation easements on a certified historic stru				2c	
d	Number of conservation easements included on line 2c acqui					
	on a historic structure listed in the National Register				2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or	r terminated l	by the organi	ization during the tax	
	year					
4	Number of states where property subject to conservation eas					
5	Does the organization have a written policy regarding the per					٦
	violations, and enforcement of the conservation easements it					_ No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations,	and enforcing	conservatio	on easements during the year	
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and e	enforcina con	servation ea	sements during the vear	
		,	J		Ů,	
8	Does each conservation easement reported on line 2d above	satisfy the requiremen	ts of section	170(h)(4)(B)(i	i)	_
	and section 170(h)(4)(B)(ii)?					No
9	In Part XIII, describe how the organization reports conservation	on easements in its rev	enue and exp	ense statem	nent and	
	balance sheet, and include, if applicable, the text of the footn	ote to the organization	's financial st	atements th	at describes the	
Da	organization's accounting for conservation easements.	Aut Historical To		0415 5 0	Nacion Assats	
Par	t III Organizations Maintaining Collections of		easures, c	or Other S	Similar Assets.	
	Complete if the organization answered "Yes" on Form					
1a	If the organization elected, as permitted under FASB ASC 95	· ·				
	of art, historical treasures, or other similar assets held for pub	·	•		nce of public	
	service, provide in Part XIII the text of the footnote to its finan					
р	If the organization elected, as permitted under FASB ASC 95					
	art, historical treasures, or other similar assets held for public	exhibition, education,	or research II	n furtherance	e of public service,	
	provide the following amounts relating to these items.				•	
	(i) Revenue included on Form 990, Part VIII, line 1					
•						
2	If the organization received or held works of art, historical treating for the fall surface are surfaced to the fall surface and the fall surface are surfaced to the fall surfac			ancial gain,	provide	
_	the following amounts required to be reported under FASB A				ф	
a	Revenue included on Form 990, Part VIII, line 1					
D	Assets included in Form 990, Part X				Þ	

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

Schedule D (Form 990) (Rev. 12-2024)

432051 01-02-25

Pai	t III Organizations Maintaining Coll	ections of Ar	t, Histo	rical Tre	asures, o	r Other	Similar	Assets	(continu	ıed)
3	Using the organization's acquisition, accession,	and other records	s, check	any of the f	ollowing that	make sig	nificant u	se of its		
	collection items (check all that apply).									
а	Public exhibition	d	ı 🔲 L	oan or exc	hange progra	am				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's collection	ctions and explair	n how the	y further th	e organizatio	n's exem	ot purpos	e in Part	XIII.	
5	During the year, did the organization solicit or re	ceive donations o	of art, his	torical treas	sures, or othe	er similar a	ssets			
	to be sold to raise funds rather than to be maint								Yes	No
Pai	t IV Escrow and Custodial Arrange		te if the c	organization	answered "	Yes" on Fo	orm 990,	Part IV, li	ne 9, or	
	reported an amount on Form 990, Part X	, line 21.								
1a	Is the organization an agent, trustee, custodian,	or other intermed	diary for c	ontribution	s or other as	sets not ir	cluded		_	
	on Form 990, Part X?							L	Yes	No
b	If "Yes," explain the arrangement in Part XIII and									
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
	Did the organization include an amount on Form					-	/?	L	Yes	└─ No
	If "Yes," explain the arrangement in Part XIII. Ch									
Pai	T V Endowment Funds Complete if the									
		a) Current year	(b) Pr	ior year	(c) Two year	rs back (d) Three ye	ears back	(e) Four y	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the current		e (line 1g,	column (a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Term endowment%									
	The percentages on lines 2a, 2b, and 2c should	•								
3a	Are there endowment funds not in the possession	on of the organiza	tion that	are held ar	nd administer	ed for the				Yes No
	organization by:									Yes No
	(i) Unrelated organizations?								3a(i)	+
	(ii) Related organizations?								3a(ii)	-
	If "Yes" on line 3a(ii), are the related organization								3b	
4 Pai	Describe in Part XIII the intended uses of the org		wment tu	nas.						
ı uı	Complete if the organization answered ") Part IV	line 11a S	ee Form 990	Part X lii	ne 10			
								-1	(al) Da ali	
	Description of property	(a) Cost or o basis (investr		` '	or other (other)	` '	cumulate eciation	a	(d) Book	value
4-	Land	Dasis (iiivestii	i i ci i i j	Daoio	(Garior)	чері	COIGHOIT			
_	Land		+							
b	Buildings		+	6.6	5,560.	6	65,56	0.		0.
q			+		7,220.		88,74		2.8	,477.
d	Equipment Other				3,857.		83,85			<u>, = , , .</u>
	L. Add lines 1a through 1e. (Column (d) must equa	J Form 000 Do	V line 10						2.8	,477.
. Ju	arras mico ia micagni ic. [Columni lai must edua	arı onu 330. Faft.	7. IIIE 10	c. colullill	(<i>U)</i>					,

Schedule D (Form 990) (Rev. 12-2024)

	EGAL AID AND		26 2227000 - 2
Schedule D (Form 990) (Rev. 12-2024) ASSOCIATION Part VIII Investments - Other Securities	N		36-2337880 Page 3
Complete if the organization answered "Yes"	on Form 900 Part IV line	11h Soo Form 900 Part V line 12	
(a) Description of Security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or	and of year market value
70 E	(b) Dook value	(c) Welfied of Valuation. Cost of	end-or-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(G) (H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) 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-vear market value
	(b) Book value	(c) Wellied of Valuation. Cost of	ond of your market value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5) (6)			
<u>(6)</u> (7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11d. See Form 990. Part X. line 15.	
	Description		(b) Book value
(1) OPERATING RIGHT-OF-USE AS	<u> </u>		868,568.
(2) DEPOSIT			31,563.
(3)			32,3333
(4)			
(6)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, co	ol (R))		900,131.
Part X Other Liabilities	n. (D))		2007=0=-
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line	e 25.
1. (a) Description of liability	· · · · · · · · · · · · · · · · · · ·		(b) Book value
(1) Federal income taxes			
(2) OPERATING LEASE LIABILITY			1,000,099.
(3) ACCRUED INCOME TAXES AND		ries	72,543.
(4)			, ,
(5)			
\-/			-

1. (a) Description of hability	(b) Dook value
(1) Federal income taxes	
(2) OPERATING LEASE LIABILITY	1,000,099.
(3) ACCRUED INCOME TAXES AND OTHER LIABILITIES	72,543.
(4)	
(5)	
(6)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	1,072,642.

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

Schedule D (Form 990) (Rev. 12-2024)

	t XI Reconciliation of Revenue per Audited Financial State	ements With Revei	iue per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line		·	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)	4b		
С				
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.)	tomonto With Evne	5	
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta		enses per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12 a .		
1			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities			
b	Prior year adjustments	1 2 1		
C	Other losses			
d	, , , , , , , , , , , , , , , , , , , ,		20	
е 3				
3 4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
т а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)			
	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. line 18			
Pa	rt XIII Supplemental Information	,	, - ,	
Prov	ide 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.		
PAI	RT X, LINE 2:			
	E ASSOCIATION EVALUATED ITS UNCERTAINTY	THE THEOME THE	AEG EUD WAE AEYD	
ENI				
	DED DECEMBER 31, 2024, AND DETERMINED TH			
JOW	JLD REQUIRE RECOGNITION IN THE CONSOLIDA	AT THERE WER TED FINANCIA	E NO MATTERS THAT	ΛΤ
JOW		AT THERE WER TED FINANCIA	E NO MATTERS THAT	ΔT
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JOW	JLD REQUIRE RECOGNITION IN THE CONSOLIDA	AT THERE WER TED FINANCIA	E NO MATTERS THAT	ΛT
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JOW	JLD REQUIRE RECOGNITION IN THE CONSOLIDA	AT THERE WER TED FINANCIA	E NO MATTERS THAT	ΛT
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JOW	JLD REQUIRE RECOGNITION IN THE CONSOLIDA	AT THERE WER TED FINANCIA	E NO MATTERS THAT	ΛT
JOW	JLD REQUIRE RECOGNITION IN THE CONSOLIDA	AT THERE WER TED FINANCIA	E NO MATTERS THAT	ΛT
JOW	JLD REQUIRE RECOGNITION IN THE CONSOLIDA	AT THERE WER TED FINANCIA	E NO MATTERS THAT	ΛT
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JOW	JLD REQUIRE RECOGNITION IN THE CONSOLIDA	AT THERE WER TED FINANCIA	E NO MATTERS THAT	ΛT
JOW	JLD REQUIRE RECOGNITION IN THE CONSOLIDA	AT THERE WER TED FINANCIA	E NO MATTERS THAT	ΛT
JOW	JLD REQUIRE RECOGNITION IN THE CONSOLIDA	AT THERE WER TED FINANCIA	E NO MATTERS THAT	ΛT
JOW	JLD REQUIRE RECOGNITION IN THE CONSOLIDA	AT THERE WER TED FINANCIA	E NO MATTERS THAT	AT
TOW	JLD REQUIRE RECOGNITION IN THE CONSOLIDA	AT THERE WER TED FINANCIA	E NO MATTERS THAT	ΛT
TOW	JLD REQUIRE RECOGNITION IN THE CONSOLIDA	AT THERE WER TED FINANCIA	E NO MATTERS THAT	ΛT
TOW	JLD REQUIRE RECOGNITION IN THE CONSOLIDA	AT THERE WER TED FINANCIA	E NO MATTERS THAT	AT
JOW	JLD REQUIRE RECOGNITION IN THE CONSOLIDA	AT THERE WER TED FINANCIA	E NO MATTERS THAT	AT

SCHEDULE G (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization NATIONA ASSOCIA	L LEGAL AID AND DE: TION	FENI	DER			Employer ide 36-2337	ntification number 880
Part I Fundraising Activities.	- Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not
required to complete this par 1 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the 10 highest paid indivicompensated at least \$5,000 by the	sed funds through any of the followin e Solicita f Solicita g Special or oral agreement with any individual cart VII) or entity in connection with providuals or entities (fundraisers) pursu	tion of tion of fundra (includ	nongo gover aising ding of onal fo	overnment grants nment grants events ificers, directors, trus undraising services?		Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	have o	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser red in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Total							
3 List all states in which the organization or licensing.				or has been notified	it is e	exempt from re	gistration
For Paperwork Reduction Act Notice, se	ee the Instructions for Form 990 or	990-E	Z.		Sche	edule G (Form	990) (Rev. 12-2024)

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

		of fundraising event contributions and gro	oss income on Form 990-	EZ, lines 1 and 6b. List e	vents with gross receipt	s greater than \$5,000.
			(a) Event #1 ANNUAL DINNER & AUC	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	- col. (c))
Revenue	1	Gross receipts	718,939.			718,939.
	2	Less: Contributions	662,172.			662,172.
	3	Gross income (line 1 minus line 2)	56,767.			56,767.
	4	Cash prizes	20,000.			20,000.
"	5	Noncash prizes	1,109.	1,109.		1,109.
penses	6	Rent/facility costs	10,150.			10,150.
Direct Expenses	7	Food and beverages	66,610.			66,610.
	8	Entertainment	1,850.			1,850.
		Other direct expenses				67,312.
	10	Direct expense summary. Add lines 4 through	9 in column (d)			167,031.
Pa	11	Net income summary. Subtract line 10 from line				-110,264.
Га	ונו	Gaming. Complete if the organization a \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	990, Part IV, line 19, or i	reported more than	
Revenue		\$10,000 diff diff 600 EE, file oa.	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Ř						
	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direc	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % 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	En	ter the state(s) in which the organization condu	cts gaming activities:			
а	ls t	the organization licensed to conduct gaming ac No," explain:	tivities in each of these s	states?		Yes No
		ere any of the organization's gaming licenses re			rear?	Yes No

Schedule G (Form 990) (Rev. 12-2024)

432082 01-14-25

NATIONAL LEGAL AID AND DEFENDER

Schedule G (Form 990) (Rev. 12-2024) ASSOCIATION	36-233/880 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other en	
to administer charitable gaming?	
13 Indicate the percentage of gaming activity conducted in:	
a The organization's facility	13a %
b An outside facility	
14 Enter the name and address of the person who prepares the organization's gaming/special events boo	
The Enter the Hame and address of the person who property the organization organization of	site and records.
Name	
Address	
Address	
15a Does the organization have a contract with a third party from whom the organization receives gaming	revenue? Yes No
b If "Yes," enter the amount of gaming revenue received by the organization \$	and the amount
of gaming revenue retained by the third party \$ c If "Yes," enter the name and address of the third party:	
C ii Tes, enter the hame and address of the third party.	
News	
Name	
Address	
Address	
40.0	
16 Gaming manager information:	
Name	
Gaming manager compensation \$	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds	s to
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizati	ions or spent in the
organization's own exempt activities during the tax year \$	•
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, column	nns (iii) and (v); and Part III, lines 9, 9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	

NATIONAL LEGAL AID AND DEFENDER

Schedule G	i (Form 990) ASSOC	IATION	36-2337880	Page 4
Part IV	(Form 990) ASSOC Supplemental Information	(continued)		
	- сарриония пистинанон	(Continued)		
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SCHEDULE I (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization NATIONAL ASSOCIATION		AND DEFEND	ER				Employer identification number $36-2337880$
Part I General Information on Grants a							30 233,000
 Does the organization maintain records t criteria used to award the grants or assis Describe in Part IV the organization's pro 	stance?						
Part II Grants and Other Assistance to I recipient that received more than \$\frac{1}{2}\$	•				anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
603 LEGAL AID 93 N STATE STREET, SUITE 200 CONCORD, NH 03301	02-0484379	501(C)(3)	72,086.	0.			NLADA RECEIVED FUNDING FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT
BAY AREA LEGAL AID 1735 TELEGRAPH AVENUE OAKLAND, CA 94612	94-1631316	501(C)(3)	70,905.	0.			NLADA RECEIVED FUNDING FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT
REGIONAL HOUSING LEGAL SERVICES 123 S BROAD STREET, SUITE 1330 PHILADELPHIA, PA 19109	23-1901416	501(C)(3)	66,641.	0.			NLADA RECEIVED FUNDING FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT
TULALIP FOUNDATION 8825 34TH AVE NE L-242 TULALIP, WA 98271	26-0807036	501(C)(3)	59,087.	0.			NLADA RECEIVED FUNDING FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT
MID-MINNESOTA LEGAL ASSISTANCE INCORPORATED - 111 N. 5TH STREET, SUITE 100 - MINNEAPOLIS, MN 55403-1633	41-1412710	501(C)(3)	57,201.	0.			NLADA RECEIVED FUNDING FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT
LEGAL AID OF WESTERN MISSOURI 4001 BLUE PARKWAY, SUITE 300 KANSA CITY, MO 64130	43-0824638	501(C)(3)	53,769.	0.			NLADA RECEIVED FUNDING FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT
2 Enter total number of section 501(c)(3) at 3 Enter total number of other organizations	s listed in the line	1 table					

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (Rev. 12-2024)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							NLADA RECEIVED FUNDING
AMBA LEGAL SERVICES, INC.							FOR THE NATIONAL
1720 CHURCH AVENUE, 2ND FLOOR							TELEPHONE ABUSE
BROOKLYN, NY 11226	11-3153831	501(C)(3)	52,962.	0.			PREVENTION PROJECT
							NLADA RECEIVED FUNDING
PRAIRIE STATE LEGAL SERVICES, INC.							FOR THE NATIONAL
03 N MAIN STREET, SUITE 600							TELEPHONE ABUSE
ROCKFORD, IL 61101	37-1030764	501(C)(3)	49,315.	0.			PREVENTION PROJECT
							NLADA RECEIVED FUNDING
ORTH CAROLINA JUSTICE CENTER							FOR THE NATIONAL
224 SOUTH DAWSON STREET							TELEPHONE ABUSE
RALEIGH, NC 27601	56-1348186	501(C)(3)	48,497.	0.			PREVENTION PROJECT
·			·				NLADA RECEIVED FUNDING
PPALACHIAN RESEARCH AND DEFENSE							FOR THE NATIONAL
FUND OF KENTUCKY - 120 NORTH FRONT							TELEPHONE ABUSE
AVENUE - PRESTONBURG, KY 41653	61-0848948	GOVT ENTITY	46,775.	0.			PREVENTION PROJECT
,			, ,	-			NLADA RECEIVED FUNDING
INDIANA LEGAL SERVICES, INC.							FOR THE NATIONAL
L200 MADISON AVENUE, SUITE 300							TELEPHONE ABUSE
INDIANAPOLIS, IN 46225	35-6059654	501(C)(3)	45,300.	0.			PREVENTION PROJECT
			12,222				NLADA RECEIVED FUNDING
DAHO LEGAL AID SERVICES							FOR THE NATIONAL
447 TYRELL LANE							TELEPHONE ABUSE
BOISE ID 83706	82-0293641	501(C)(3)	45,080.	0.			PREVENTION PROJECT
, 12 CS / CC	02 0233011	301(0)(3)	13,000.	•			NLADA RECEIVED FUNDING
EGAL SERVICES FOR MAINE ELDERS,							FOR THE NATIONAL
INC 5 WABON STREET - AUGUSTA,							TELEPHONE ABUSE
ME 04330	01-0359131	501(C)(3)	42,149.	0.			PREVENTION PROJECT
II 04000	01 0339131	P01(C)(3)	42,143.	0.			NLADA RECEIVED FUNDING
MONTANA LEGAL SERVICES ASSOCIATION							FOR THE NATIONAL
16 HELENA AVENUE, SUITE 100	01 0200262	E01/G\/2\	41 064	•			TELEPHONE ABUSE
IELENA, MT 59601-3612	81-0298262	DOT(C)(2)	41,964.	0.			PREVENTION PROJECT
							NLADA RECEIVED FUNDING
LEGAL AID JUSTICE CENTER							FOR THE NATIONAL
1000 PRESTON AVENUE, SUITE A.							TELEPHONE ABUSE
CHARLOTTESVILLE, VA 22903	54-0884513	501(C)(3)	41,472.	0.			PREVENTION PROJECT

JACKSONVILLE AREA LEGAL AID, INC. 126 WEST ADARS STREE JACKSONVILLE, FL 32202 59-0696291 501(C)(3) 40,817. 0. RECEIVED FUND FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT PREVENTION PROJECT PREVENTION PROJECT PREVENTION PROJECT AUGUST A	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
126 MEST ADAMS STREE								NLADA RECEIVED FUNDING
ACKSONVILLE, FL 32202 59-0696291 501(C)(3) 40,817. 0. PREVENTION PROJECT NIADA RECEIVED FUNI FOR THE NATIONAL FELEPHONE ABUSE PRILADELPHIA, FA 19102 23-1671562 501(C)(3) 40,298. 0. PREVENTION PROJECT NIADA RECEIVED FUNI FOR THE NATIONAL FELEPHONE ABUSE PRILADELPHIA, FA 19102 23-1671562 501(C)(3) 39,982. 0. PREVENTION PROJECT NIADA RECEIVED FUNI FOR THE NATIONAL FELEPHONE ABUSE PREVENTION PROJECT NIADA RECEIVED FUNI FOR THE NATIONAL FELEPHONE ABUSE PREVENTION PROJECT NIADA RECEIVED FUNI FOR THE NATIONAL FELEPHONE ABUSE PREVENTION PROJECT NIADA RECEIVED FUNI FOR THE NATIONAL FELEPHONE ABUSE PREVENTION PROJECT NIADA RECEIVED FUNI FOR THE NATIONAL FELEPHONE ABUSE NIADAR RECEIVED FUNI FOR THE NAT	JACKSONVILLE AREA LEGAL AID, INC.							FOR THE NATIONAL
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COMMUNITY LEGAL SERVICES, INC.	JACKSONVILLE, FL 32202	59-0696291	501(C)(3)	40,817.	0.			PREVENTION PROJECT
1424 CHESTNUT STREET								NLADA RECEIVED FUNDING
HILADELPHIA, PA 19102 23-1671562 501(C)(3) 40,298. 0. PREVENTION PROJECT NLADA RECEIVED FUND FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT STREET STRE	COMMUNITY LEGAL SERVICES, INC.							FOR THE NATIONAL
NLADA RECEIVED FUNI FOR THE NATIONAL FILEPHONE ABUSE FREVENTION PROJECT	424 CHESTNUT STREET							TELEPHONE ABUSE
COUNTAIN STATE JUSTICE, INC. FOR THE NATIONAL FELEPHONE ABUSE FREWENTION PROJECT	PHILADELPHIA, PA 19102	23-1671562	501(C)(3)	40,298.	0.			PREVENTION PROJECT
######################################								NLADA RECEIVED FUNDING
TELEPHONE ABUSE PREVENTION PROJECT TELEPHONE ABUSE PREVENTION PROJECT TELEPHONE ABUSE PREVENTION PROJECT TELEPHONE ABUSE PREVENTION PROJECT TELEPHONE ABUSE	OUNTAIN STATE JUSTICE, INC.							FOR THE NATIONAL
NLADA RECEIVED FUNI	217 QUARRIER STREET							TELEPHONE ABUSE
NADA RECEIVED FUNITION SEGULATION SURPRISED	CHARLESTON WV 25301	55-0748332	501(C)(3)	39,982.	0.			PREVENTION PROJECT
RECOUNTY CLASSEN BLVD, SUITE 230 TELEPHONE ABUSE PREVENTION FROJECT	•			,				NLADA RECEIVED FUNDING
### RELEPHONE ABUSE ####################################	EGAL AID SERVICES OF OKLAHOMA							FOR THE NATIONAL
EGAL AID OF NEBRESKA LEGAL ACTION OF WISCONSIN, INC. LEGAL ACTION OF WISCONSIN, AVENUE, SUITE 2000 LILWAUKEE, WI 53203-1918 39-1077192 501(C)(3) 37,422. 0. PREVENTION PROJECT NLADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE LEGAL ACTION OF WISCONSIN, INC. LEGAL ACTION OF WISCO								TELEPHONE ABUSE
NLADA RECEIVED FUNI JEGAL AID OF NEBRESKA LEGAL AID OF NEBRESKA LOP S. 19TH STREET, SUITE 200 MAHA, NE 68102 47-0483506 MAHA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE MILWAUKEE, WI 53203-1918 MEIGHBORHOOD LEGAL SERVICES OF LOS MALADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE HASE COUNTY - 1102 EAST CHEVY HASE DRIVE - GLENDALE, CA 91205 MESTERN NEW YORK LAW CENTER FOR THE NATIONAL TELEPHONE ABUSE MESTERN NEW YORK LAW CENTER FOR THE NATIONAL TELEPHONE ABUSE TELEPHONE ABUSE TELEPHONE ABUSE TELEPHONE ABUSE MILADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE	•	73-1022203	501(C)(3)	39,392.	0.			PREVENTION PROJECT
### PROPRIES OF THE NATIONAL FOR THE NATIONAL FOR THE NATIONAL FELEPHONE ABUSE PREVENTION PROJECT ###################################	•			,				NLADA RECEIVED FUNDING
AMAHA, NE 68102 47-0483506 501(C)(3) 37,422. 0. PREVENTION PROJECT LEGAL ACTION OF WISCONSIN, INC. LEGAL ACTION OF WISCONSIN, INC. AND WISCONSIN AVENUE, SUITE 2000 ALLWAUKEE, WI 53203-1918 39-1077192 501(C)(3) 37,422. 0. PREVENTION PROJECT MEIGHBORHOOD LEGAL SERVICES OF LOS ANGELES COUNTY - 1102 EAST CHEVY CHASE DRIVE - GLENDALE, CA 91205 95-2408642 501(C)(3) 36,280. 0. PREVENTION PROJECT WESTERN NEW YORK LAW CENTER ANGELES COUNTY SUITE 210, 3RD BUFFALO, NY 14202 16-1497552 501(C)(3) 35,452. 0. PREVENTION PROJECT LAKESHORE LEGAL AID BOSTO VAN DYKE AVENUE	LEGAL AID OF NEBRESKA							FOR THE NATIONAL
MAHA, NE 68102 47-0483506 501(C)(3) 37,422. 0. PREVENTION PROJECT MAHA, NE 68102 47-0483506 501(C)(3) 37,422. 0. NLADA RECEIVED FUNI MAHA, NE 68102 50. NLADA RECEIVED FUNI MADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE REIGHBORHOOD LEGAL SERVICES OF LOS MEIGHBORHOOD LEGAL SERVICES OF LOS MERCEIVE OF THE NATIONAL TELEPHONE ABUSE THASE DRIVE - GLENDALE, CA 91205 95-2408642 501(C)(3) 36,280. 0. PREVENTION PROJECT MESTERN NEW YORK LAW CENTER MESTERN NEW YORK LAW CENTER MESTERN SUFFALO, NY 14202 16-1497552 501(C)(3) 35,452. 0. PREVENTION PROJECT MAKESHORE LEGAL AID MAKESHORE LEGAL AID MADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE MILADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE	209 S. 19TH STREET SUITE 200							TELEPHONE ABUSE
NLADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT NEIGHBORHOOD LEGAL SERVICES OF LOS ANGELES COUNTY - 1102 EAST CHEVY CHASE DRIVE - GLENDALE, CA 91205 NESTERN NEW YORK LAW CENTER ATT FRANKLIN STREET, SUITE 210, 3RD BUSTPALO, NY 14202 LAKESHORE LEGAL AID BOSOO VAN DYKE AVENUE NILADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE O. NAME ARCEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE O. NAME ARCEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE O. NAME ARCEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE O. NAME ARCEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE O. NAME ARCEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE O. NAME ARCEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE	•	47-0483506	501(C)(3)	37,422.	0.			
TELEPHONE ABUSE ALLWAUKEE, WI 53203-1918 39-1077192 501(C)(3) 37,422. 0. TELEPHONE ABUSE PREVENTION PROJECT NLADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT AUGELES COUNTY - 1102 EAST CHEVY CHASE DRIVE - GLENDALE, CA 91205 PREVENTION PROJECT NLADA RECEIVED FUNI PROFESSER NLADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE	,			, ,	-			NLADA RECEIVED FUNDING
TELEPHONE ABUSE ALLWAUKEE, WI 53203-1918 39-1077192 501(C)(3) 37,422. 0. TELEPHONE ABUSE PREVENTION PROJECT NLADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT AUGELES COUNTY - 1102 EAST CHEVY CHASE DRIVE - GLENDALE, CA 91205 PREVENTION PROJECT NLADA RECEIVED FUNI PROFESSER NLADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE	LEGAL ACTION OF WISCONSIN INC.							
ALLWAUKEE, WI 53203-1918 39-1077192 501(C)(3) 37,422. 0. PREVENTION PROJECT NLADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT NLADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT NLADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE	,							
NLADA RECEIVED FUNI REIGHBORHOOD LEGAL SERVICES OF LOS ANGELES COUNTY - 1102 EAST CHEVY CHASE DRIVE - GLENDALE, CA 91205 95-2408642 501(C)(3) 36,280. 0. PREVENTION PROJECT RESTERN NEW YORK LAW CENTER OF FRANKLIN STREET, SUITE 210, 3RD SUFFALO, NY 14202 16-1497552 501(C)(3) 35,452. 0. PREVENTION PROJECT LAKESHORE LEGAL AID SUSSIDER AND SUFFALO AND SUSSESSION OF THE NATIONAL FOR		39-1077192	501(C)(3)	37 422.	0.			
FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT ANGELES COUNTY - 1102 EAST CHEVY CHASE DRIVE - GLENDALE, CA 91205 PREVENTION PROJECT NLADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE FOR THE NATIONAL TELEPHONE ABUSE SUFFALO, NY 14202 16-1497552 501(C)(3) 35,452. 0. FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT NLADA RECEIVED FUNI ALKESHORE LEGAL AID 10500 VAN DYKE AVENUE				11,122				NLADA RECEIVED FUNDING
TELEPHONE ABUSE CHASE DRIVE - GLENDALE, CA 91205 95-2408642 501(C)(3) 36,280. 0. PREVENTION PROJECT NLADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE SUFFALO, NY 14202 16-1497552 501(C)(3) 35,452. 0. PREVENTION PROJECT TELEPHONE ABUSE PREVENTION PROJECT NLADA RECEIVED FUNI AKESHORE LEGAL AID TO THE NATIONAL TELEPHONE ABUSE TELEPHONE ABUSE TELEPHONE ABUSE	JETGHBORHOOD LEGAL SERVICES OF LOS							
CHASE DRIVE - GLENDALE, CA 91205 95-2408642 501(C)(3) 36,280. 0. PREVENTION PROJECT WIND RESTERN NEW YORK LAW CENTER FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT OUT OF THE NATIONAL TO THE NATIONAL TELEPHONE ABUSE								
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FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT SUITE 210, 3RD ALKESHORE LEGAL AID TELEPHONE ABUSE POR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT PROJECT FOR THE NATIONAL TELEPHONE ABUSE PROJECT FOR THE NATIONAL TELEPHONE ABUSE	EMISE BRIVE CHENDRES, CR 91203	J3 2400042	501(0)(3)	30,200.	٠.			
TELEPHONE ABUSE PREVENTION PROJECT AKESHORE LEGAL AID SOUTH OF THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT NAME AVENUE TELEPHONE ABUSE PREVENTION PROJECT NAME AVENUE	JESTERN NEW YORK LAW CENTER							
SUFFALO, NY 14202 16-1497552 501(C)(3) 35,452. 0. PREVENTION PROJECT NLADA RECEIVED FUNI ALKESHORE LEGAL AID 10500 VAN DYKE AVENUE TELEPHONE ABUSE								
NLADA RECEIVED FUNI LAKESHORE LEGAL AID SO TO VAN DYKE AVENUE NLADA RECEIVED FUNI FOR THE NATIONAL TELEPHONE ABUSE	·	16_1/07552	501(C)(3)	35 452	0			
AKESHORE LEGAL AID SO SO VAN DYKE AVENUE FOR THE NATIONAL TELEPHONE ABUSE	DOLLUTO, MI 14707	10-145/332	DOT(C)(3)	35,452.	٥.			
0500 VAN DYKE AVENUE TELEPHONE ABUSE	AVECTORE LEGAL ATD							
WARREN, MI 48093 38-1850908 501(C)(3) 34,911. 0. PREVENTION PROJECT		20 1050000	E01/G)/2)	34,911.	0.			PREVENTION PROJECT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EGAL AID SOCIETY OF MIDDLE							NLADA RECEIVED FUNDING
TENNESSEE AND THE CUMBERLANDS -							FOR THE NATIONAL
1321 MURFREESBORO PIKE, SUITE 400							TELEPHONE ABUSE
- NASHVILLE, TN 37217-2665	62-0800756	501(C)(3)	33,778.	0.			PREVENTION PROJECT
							NLADA RECEIVED FUNDING
ATLANTA LEGAL AID SOCIETY, INC.							FOR THE NATIONAL
4 ELLIS STREET NORTHEAST							TELEPHONE ABUSE
ATLANTA, GA 30303	58-0568691	501(C)(3)	27,771.	0.			PREVENTION PROJECT
,			,				NLADA RECEIVED FUNDING
SANTA CLARA UNIVERSITY							FOR THE NATIONAL
500 EL CAMINO REAL							TELEPHONE ABUSE
SANTA CLARA, CA 95053	94-1156617	501(C)(3)	27,574.	0.			PREVENTION PROJECT
,							NLADA RECEIVED FUNDING
MISSISSIPPI CENTER FOR JUSTICE							FOR THE NATIONAL
210 EAST CAPITOL STREET, SUITE 1800							TELEPHONE ABUSE
JACKSON, MS 39201	13-4203234	501(C)(3)	25,604.	0.			PREVENTION PROJECT
21012011, 112 07201	10 1200201		20,002.	-			111211111111111111111111111111111111111

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Schedule I (Form 990) (Rev. 12-2024) ASSOCIATION

Part III can be duplicated if additional space is needed.										
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance					
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.						
PART I, LINE 2: EACH GRANT IS GIVEN A UNIQUE CODE I	TOD MD A CV	TNO DIIDDOC	TEC AND CDE	NIII DACED ON						
THE TERMS OF THE GRANT AGREEMENT.	OR TRACK	ING PURPUS	ES AND SPE	NT BASED ON						
THE TERMS OF THE GRANT AGREEMENT.										
PART II, LINE 1, COLUMN (H):										
NAME OF ORGANIZATION OR GOVERNMENT	: 603 LEG	AL AID								
(H) PURPOSE OF GRANT OR ASSISTANCE			NDING FOR	THE						
NATIONAL TELEPHONE ABUSE PREVENTION										
IN KRAKAUER (O/B/O A CLASS OF PERSO										
SUPPORTS CONSUMER PROTECTION WORK										
UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,										
COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH										
TRAINING AND RESOURCES FROM THE NAT										
NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED										
	LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY									
EDUCATION AND ADVOCACY.			•							
NAME OF ORGANIZATION OR GOVERNMENT	BAY ARE	A LEGAL AI	D							

Schedule I (Form 990) ASSOCIATION 36-2337880 Page 2

Part IV | Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS, COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH TRAINING AND RESOURCES FROM THE NATIONAL CONSUMER LAW CENTER (NCLC). NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: REGIONAL HOUSING LEGAL SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD

IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP

SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE

UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,

COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH

TRAINING AND RESOURCES FROM THE NATIONAL CONSUMER LAW CENTER (NCLC).

NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED

LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY

EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: TULALIP FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD

IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP

SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE

UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,

COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH

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NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED

LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY

EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT:

MID-MINNESOTA LEGAL ASSISTANCE INCORPORATED

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS, COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH TRAINING AND RESOURCES FROM THE NATIONAL CONSUMER LAW CENTER (NCLC). NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: LEGAL AID OF WESTERN MISSOURI

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD

IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP

SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE

UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,

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Schedule I (Form 990) ASSOCIATION 36-2337880 Page 2

Part IV | Supplemental Information

NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: CAMBA LEGAL SERVICES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE
NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD
IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP
SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE
UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,
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TRAINING AND RESOURCES FROM THE NATIONAL CONSUMER LAW CENTER (NCLC).
NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED
LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY
EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: PRAIRIE STATE LEGAL SERVICES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD
IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP
SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE
UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,
COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH
TRAINING AND RESOURCES FROM THE NATIONAL CONSUMER LAW CENTER (NCLC).
NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED
LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY
EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: NORTH CAROLINA JUSTICE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD

IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP

SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE

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LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY

EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT:

APPALACHIAN RESEARCH AND DEFENSE FUND OF KENTUCKY

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS, COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH TRAINING AND RESOURCES FROM THE NATIONAL CONSUMER LAW CENTER (NCLC). NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: INDIANA LEGAL SERVICES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE
NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD

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IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP
SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE
UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,
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NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED
LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY
EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: IDAHO LEGAL AID SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD

IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP

SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE

UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,

COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH

TRAINING AND RESOURCES FROM THE NATIONAL CONSUMER LAW CENTER (NCLC).

NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED

LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY

EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: LEGAL SERVICES FOR MAINE ELDERS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD

IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP

SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE

UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,

COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH

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NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED

LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY

EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: MONTANA LEGAL SERVICES ASSOCIATION

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD

IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP

SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE

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NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED

LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY

EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: LEGAL AID JUSTICE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD

IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP

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UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,

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NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED

LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY

EDUCATION AND ADVOCACY.

Part IV | Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: JACKSONVILLE AREA LEGAL AID, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD

IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP

SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE

UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,

COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH

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NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED

LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY

EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY LEGAL SERVICES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD
IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP
SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE
UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,
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TRAINING AND RESOURCES FROM THE NATIONAL CONSUMER LAW CENTER (NCLC).
NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED
LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY
EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: MOUNTAIN STATE JUSTICE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD
IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP
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UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,
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NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED
LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY
EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: LEGAL AID SERVICES OF OKLAHOMA

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD

IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP

SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE

UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,

COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH

TRAINING AND RESOURCES FROM THE NATIONAL CONSUMER LAW CENTER (NCLC).

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LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY

EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: LEGAL AID OF NEBRESKA

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD

IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP

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Part IV | Supplemental Information

TRAINING AND RESOURCES FROM THE NATIONAL CONSUMER LAW CENTER (NCLC). NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: LEGAL ACTION OF WISCONSIN, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE
NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD
IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP
SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE
UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,
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NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED
LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY
EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT:

NEIGHBORHOOD LEGAL SERVICES OF LOS ANGELES COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS, COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH TRAINING AND RESOURCES FROM THE NATIONAL CONSUMER LAW CENTER (NCLC). NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: WESTERN NEW YORK LAW CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD

IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP

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NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED

LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY

EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: LAKESHORE LEGAL AID

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD
IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP
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NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED
LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY
EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT:

LEGAL AID SOCIETY OF MIDDLE TENNESSEE AND THE CUMBERLANDS

Part IV | Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS, COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH TRAINING AND RESOURCES FROM THE NATIONAL CONSUMER LAW CENTER (NCLC). NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: ATLANTA LEGAL AID SOCIETY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE
NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD
IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP
SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE
UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,
COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH
TRAINING AND RESOURCES FROM THE NATIONAL CONSUMER LAW CENTER (NCLC).
NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED
LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY
EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: SANTA CLARA UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD

IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP

SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE

UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,

COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH

TRAINING AND RESOURCES FROM THE NATIONAL CONSUMER LAW CENTER (NCLC).

NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED

LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY

EDUCATION AND ADVOCACY.

NAME OF ORGANIZATION OR GOVERNMENT: MISSISSIPPI CENTER FOR JUSTICE

(H) PURPOSE OF GRANT OR ASSISTANCE: NLADA RECEIVED FUNDING FOR THE

NATIONAL TELEPHONE ABUSE PREVENTION PROJECT (NTAPP) FROM A CY PRES AWARD

IN KRAKAUER (O/B/O A CLASS OF PERSONS) V. DISH NETWORK, LLC. NTAPP

SUPPORTS CONSUMER PROTECTION WORK AT LEGAL SERVICES PROGRAMS ACROSS THE

UNITED STATES, SPECIFICALLY CLIENT REPRESENTATION IN ELIGIBLE MATTERS,

COMMUNITY EDUCATION, AND ATTORNEY PROFESSIONAL DEVELOPMENT THROUGH

TRAINING AND RESOURCES FROM THE NATIONAL CONSUMER LAW CENTER (NCLC).

NTAPP INCLUDES NLADA AS THE FUNDER AND CONVENER, ALONG WITH SELECTED

LEGAL SERVICES PROGRAMS THAT WILL PROVIDE DIRECT SERVICES, COMMUNITY

EDUCATION AND ADVOCACY.

SCHEDULE J (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Part I Questions Regarding Compensation

NATIONAL LEGAL AID AND DEFENDER ASSOCIATION

 $Employer\ identification\ number\\ 36-2337880$

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		X
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		X
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		<u>X</u>
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	The organization?	6a		<u>X</u>
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		<u> X</u>
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		<u>X</u>
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) (Rev. 12-2024)

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

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

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

		B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) JO-ANN WALLACE	i) _	0.	0.	0.	0.	0.	0.	0.
	ii)	341,028.	0.	0.	12,039.	37,730.		0.
(2) APRIL CAMARA FRAZIER	i)	249,704.	0.	0.	7,763.	23,969.	281,436.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
(3) ALISON BLOOMQUIST	i)	178,238.	0.	0.	5,507.	26,074.	209,819.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
(4) MARIA SOTO	i)	180,893.	0.	0.	5,429.	21,359.	207,681.	0.
SR. VP OF OPERATIONS/SECRETARY	ii)	0.	0.	0.	0.	0.	0.	0.
(5) AILEEN MOFFATT	i)	173,077.	0.	0.	5,286.	21,359.	199,722.	0.
 	ii)	0.	0.	0.	0.	0.	0.	0.
(6) RADHIKA SINGH	i)	167,113.	0.	0.	5,015.	9,389.	181,517.	0.
VP, CIVIL LEGAL AID INITIATIVES (i	ii)	0.	0.	0.	0.	0.	0.	0.
(7) RABIAH BURKS	i) _	151,215.	0.	0.	4,589.	8,552.	164,356.	0.
VP, COMMUNICATIONS (i	ii)	0.	0.	0.	0.	0.	0.	0.
(8) PATRICIA FOXEN	i) _	138,201.	0.	0.	4,099.	16,461.	158,761.	0.
DIRECTOR, COMMUNITY RESEARCH	ii)	0.	0.	0.	0.	0.	0.	0.
(i) L							
(i	ii)							
(i) L							
(i	ii)							
(i) L							
(i	ii)							
(i) L							
(i	ii)							
(i) _							
(i	ii)							
(i) _							
(i	ii)							
(i) _							
(i	ii)							
(i) _							
(i	ii)							

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. PART I, LINE 1A:
DURING THE YEAR ENDED DECEMBER 31, 2024, ROSITA STANLEY, VICE CHAIRPERSON,
RECEIVED A BENEFIT FOR TRAVEL WITH COMPANIONS. THIS TRAVEL WITH COMPANIONS
IS NOT INCLUDED IN TAXABLE COMPENSATION.

SCHEDULE O (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

Open to Public Inspection

NATIONAL LEGAL AID AND DEFENDER Name of the organization

ASSOCIATION

Employer identification number 36-2337880

DESCRIPTION OF ORGANIZATION FORM 990 PART III MISSION: LINE ENCOURAGING THE FORMATION OF NEW LEGAL AID AND DEFENDER ORGANIZATIONS THROUGHOUT THE COUNTRY WHOSE PURPOSE IT TO PROVIDE FREE IS ASSISTANCE TO LOW INCOME INDIVIDUALS.

FORM 990, PART III, LINE 4D OTHER PROGRAM SERVICES:

COMMUNICATIONS

EXPENSES \$ 453,023. INCLUDING GRANTS OF \$ 0. REVENUE 0.

ANNUAL CONFERENCE

INCLUDING GRANTS OF EXPENSES \$ 249,845. REVENUE \$ 365,770.

DEFENDER DIVISION

575,143. EXPENSES \$ 209,707. INCLUDING GRANTS REVENUE OF

GOVERNMENT RELATIONS

EXPENSES \$ 44,675. INCLUDING GRANTS OF \$ 0. REVENUE \$

FORM 990 PART VI SECTION A LINE

DURING THE YEAR ENDED DECEMBER 31, 2024, ALAINA BLOODWORTH, CONTRACTOR EXECUTIVE DIRECTOR OF NLADA'S BPDA PROGRAM. DURING CALENDAR SERVED AS THE2024 NLADA PAID \$125,000 TO ALAINA BLOODWORTH FOR HER SERVICES.

FORM 990, PART VI SECTION A 6: LINE

THERE SHALL BE TWO (2)CLASSES OF MEMBERSHIP IN NLADA (VOTING AND NON-VOTING). THE FIRST CLASS OF MEMBERS SHALL BE DENOMINATED AS VOTING INDIVIDUALS OR ORGANIZATIONS MEMBERS. EACH OF THESHALL BE ENTITLED TO THE RIGHTS AND BENEFITS OF SUCH MEMBERSHIP, INCLUDING THE RIGHT TO VOTE. **EACH** SHALL BE DENOMINATED AS EITHER VOTING MEMBER PROGRAM MEMBER INDIVIDUAL MEMBER OR CLIENT MEMBER.

FORM 990, PART VI, SECTION A, LINE

FOR PURPOSES OF VOTING AND ELECTIONS UNDER THE BYLAWS, INDIVIDUAL MEMBERS THEY ARE PUBLIC, CIVIL, SHALL DECLARE WHETHER CLIENT DEFENDER DEFENDER CLIENT OR CIVIL CLIENT INDIVIDUAL MEMBERS. ANY MEMBER WHO FAILS SO DECLARE SHALL BE DEEMED A PUBLIC INDIVIDUAL MEMBER.

INDIVIDUAL MEMBERS, PROGRAM MEMBERS AND CLIENT MEMBERS OF NLADASHALL VOTE SEPARATELY ON ANY MATTER COMING BEFORE SUCH MEETINGS. NO ACTION SHALL BE TAKEN OR RESOLUTION APPROVED UNLESS ADOPTED BY SEPARATE MAJORITY OF THOSE BY PROXY. INDIVIDUAL, CLIENT AND PROGRAM MEMBERS PRESENT OR REPRESENTED

PART VI, SECTION A, FORM 990, LINE

THE MEMBERSHIP OF NLADA ON SHALL HAVE THE POWER TO REVIEW AND OVERRULE ANY DECISION OF THE BOARD OF DIRECTORS.

FORM 990 PART VI SECTION B, LINE 11B:

THE FEDERAL FORM 990 IS PROVIDED FOR REVIEW TO THE FULL BOARD BEFORE FILING WITH THE INTERNAL REVENUE SERVICE.

FORM 990 PART VI SECTION B LINE 12C:

MEMBERS DIRECTORS OF THE BOARD OF ARE GIVEN THE MOST RECENT VERSION

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

Schedule O (Form 990) (Rev. 12-2024)

432211 01-15-25

Schedule O (Form 990) 2024 Page 2

Name of the organization NATIONAL LEGAL AID AND DEFENDER
ASSOCIATION

Employer identification number 36-2337880

THE CONFLICT OF INTEREST POLICY EACH YEAR, ALONG WITH A DISCLOSURE FORM.
WHEN POTENTIAL CONFLICTS OF INTEREST ARISE, BOARD MEMBERS SHALL IDENTIFY
THE POTENTIAL CONFLICT TO NLADA'S PRESIDENT & CEO, BOARD CHAIR, FULL BOARD
OF DIRECTORS OR COMMITTEE WHICH SHALL DETERMINE WHETHER A CONFLICT EXISTS
AND WHAT STEPS SHALL BE TAKEN TO AVOID AN APPEARANCE OF IMPROPRIETY BY THE
ORGANIZATION.

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

THE BOARD OF DIRECTORS DETERMINES THE PRESIDENT & CEO'S COMPENSATION. THE PRESIDENT & CEO, SR. VP FOR OPERATIONS, AND HUMAN RESOURCES STAFF SET SALARIES OF ALL OTHER EMPLOYEES INCLUDING KEY EMPLOYEES.

THE METHODS/RESOURCES FOR DETERMINING SALARIES ARE THE SAME FOR EMPLOYEES AS THEY ARE FOR THE CEO:

A. A MARKET ANALYSIS SURVEY

B. HUMAN RESOURCES STAFF, IN CONJUNCTION WITH OUTSIDE CONSULTANTS AND DATA, REVIEW, UPDATE AND MAINTAIN A SALARY SPREADSHEET THAT CONSISTS OF MARKET TRENDS AND PROVIDES THE BASIS FOR COMPENSATION DECISIONS. ALL COMPENSATION IS APPROVED BY THE PRESIDENT & CEO.

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

THE FEDERAL FORM 990, FORM 1023, GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM	990	PART	ΤX	LINE:	11ദ	OTHER	FEES.
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CONSIII.TING	GEBACEG.

COMPORTING PRICED.	
PROGRAM SERVICE EXPENSES	604,950.
MANAGEMENT AND GENERAL EXPENSES	248,326.
FUNDRAISING EXPENSES	144,471.
TOTAL EXPENSES	997,747.

TEMPORARY SERVICES:

PROGRAM SERVICE EXPENSES	130,133.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	130,133.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,127,880.

SCHEDULE R (Form 990)

(Rev. January 2025)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

NATIONAL LEGAL AID AND DEFENDER **Employer identification number** Name of the organization ASSOCIATION 36-2337880 Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) (f) (a) (b) (c) (e) Name, address, and EIN (if applicable) Primary activity Legal domicile (state or Total income End-of-year assets Direct controlling of disregarded entity entity foreign country) Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt Part II organizations during the tax year. (a) (b) (c) (d) (e) (f) **(g)** Section 512(b)(13) **Exempt Code** Name, address, and EIN Legal domicile (state or Public charity Direct controlling Primary activity controlled of related organization section status (if section entity entity? foreign country) 501(c)(3)) Yes No

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

Schedule R (Form 990) (Rev. 1-2025)

Page 2

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disproportionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gener mana partr	ral or Figing ner?	Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	tion b)(13) rolled tity?
WIND GERVING GODDONITON FO 1060103	THEFT	country)		ŕ				Yes	No
NLADA SERVICE CORPORATION - 52-1862193	INSURANCE								
1901 PENNSYLVANIA AVE., NW, # 500	ADMINISTRATION								
WASHINGTON, DC 20006	SERVICE	VA	NLADA	C CORP	1,861,740.	2,220,554.	100%	X	

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

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

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

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

b Gift, grant, or capital contribution to related organization(s)				1b		X		
c Gift, grant, or capital contribution from related organization(s)				1c		X		
d Loans or loan guarantees to or for related organization(s)				1d		X		
e Loans or loan guarantees by related organization(s)				1e		X		
f Dividends from related organization(s)				1f		_X_		
g Sale of assets to related organization(s)				1g		X		
h Purchase of assets from related organization(s)				1h		X		
i Exchange of assets with related organization(s)				1i		X		
j Lease of facilities, equipment, or other assets to related organization(s)				1j		X		
k Lease of facilities, equipment, or other assets from related organization(s)				1k		X		
Performance of services or membership or fundraising solicitations for related organ				11	Х			
				1m		X		
 m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) 								
o Sharing of paid employees with related organization(s)								
3 ()								
p Reimbursement paid to related organization(s) for expenses								
q Reimbursement paid by related organization(s) for expenses				1p 1q		<u>X</u>		
r Other transfer of cash or property to related organization(s)				1r		X		
s Other transfer of cash or property from related organization(s)				1s		X		
2 If the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on which is "Yes," see the instruction of the above is "Yes," see the above is "Y				·				
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount in	volved				
(1) NLADA SERVICE CORPORATION	L	208,100.FM	īV					
(2)								
(3)								
Ψ,								
(4)								
\ ' <i>!</i>								
(5)								
N-1								
(6)								
H32163 10-23-24		•	Schedule R (Form	990) (F	Rev. 1-	2025)		
			•					

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionat	Code V-UBI amount in box 2 of Schedule K-	General managir partner Yes N	(k) Percentage ownership