Form	990

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.



Department of the Treasury Internal Revenue Service

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

AF	or th	e 2020 calendar year, or tax year beginning $ { m JUL}1,2020$ and	ending J	UN 30, 2021						
B c	heck if pplicab	C Name of organization		D Employer identific	cation number					
Address CENTER FOR PROSECUTOR INTEGRITY, INC.										
	Name Chang		26-47559	72						
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number						
	Final return			301-801-0	0608					
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	342,576.					
	Amen	ROCKVILLE, MD 20055-2021		H(a) Is this a group re	eturn					
	Applic distance	F Name and address of principal officer: E • E • E • E • E • E • E • E		for subordinates	? Yes X No					
	pendi	P.0.BOX 1221, ROCKVILLE, MD 20855		H(b) Are all subordinates in	cluded? Yes No					
		empt status: 🚺 501(c)(3) 🚺 501(c) ()◀ (insert no.) 🗌 4947(a)(1) c	or 📃 527	If "No," attach a	list. See instructions					
		te: WWW.PROSECUTORINTEGRITY.ORG		H(c) Group exemption	•					
	_	f organization: 🚺 Corporation 🔄 Trust 🔄 Association 🔄 Other 🕨	L Year	of formation: 2008 N	I State of legal domicile: MD					
Pa	art I	Summary								
Ð	1	Briefly describe the organization's mission or most significant activities: WORK	TO ST	RENGTHEN PRO	DSECUTORIAL					
anc		ETHICS, CURB OVER-CRIMINALIZATION, AND BRI								
ernä	2	Check this box Image: Interpretent of the organization discontinued its operations or disposed of the organization discontinued its operations or disposed of the organization discontinued its operations.	sed of more							
20K	3				3					
ن ھ		Number of independent voting members of the governing body (Part VI, line 1b)		2						
ies		Total number of individuals employed in calendar year 2020 (Part V, line 2a)		0 20						
Activities & Governance		Total number of volunteers (estimate if necessary)			0.					
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.					
	d d	Net unrelated business taxable income from Form 990-T, Part I, line 11		Prior Year	Current Year					
	8	Contributions and grants (Part VIII, line 1h)		477,025.	<u>339,076.</u>					
anı	9			0.	0.					
Revenue		Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		8.	0.					
Be		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	3,500.					
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		477,033.	342,576.					
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		3,500.	0.					
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.					
ß	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.					
per	b	Total fundraising expenses (Part IX, column (D), line 25)	0.							
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		309,084.	426,673.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		312,584.	426,673.					
	19	Revenue less expenses. Subtract line 18 from line 12		164,449.	-84,097.					
OL				ginning of Current Year	End of Year					
Assets Balanc	20	Total assets (Part X, line 16)		228,922.	146,118.					
tAs	21	Total liabilities (Part X, line 26)		0.	0.					
-BR	22	Net assets or fund balances. Subtract line 21 from line 20		228,922.	146,118.					
Pa	art 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.

Sign Here	Signature of officer E.EVERETT BARTLETT, DII Type or print name and title	RECTOR	Date								
		Fieparer S Signature	Date Check If self-employed								
Preparer Use Only	Firm's name HSS CPA, PC Firm's address 1390 PICCARD DRI		Firm's EIN ► 5	2-1518885							
USE OIIIY	ROCKVILLE, MD 20		Phone no. 240	-499-3600							
May the IF	May the IRS discuss this return with the preparer shown above? See instructions										
032001 12-2	3-20 LHA For Paperwork Reduction Act Notic	e, see the separate instructions.		Form 990 (2020)							

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2020) CENTER FOR PROSECUTOR INTEGRITY, INC. 26-4755972 Page 2
	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	WORKING TO STRENGTHEN PROSECUTORIAL ETHICS, CURB OVER-CRIMINALIZATION,
	AND BRING AN END TO WRONGFUL CONVICTIONS.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?Yes X No
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$190,623. including grants of \$) (Revenue \$)
	PRESUMPTION OF INNOCENCE PROJECT: ANALYZE THE CAUSES AND CORRELATIONS OF
	WRONGFUL CONVICTIONS FOR CRIMINAL OFFENSES: IDENTIFY POLICY APPROACHES
	TO REMEDY THE EROSION OF THE PRESUMPTION OF INNOCENCE.
4b	(Code:) (Expenses \$172,865. including grants of \$) (Revenue \$)
	CAMPUS SEXUAL ASSUALT PROJECT: PROMOTE POLICY REFORMS TO INVOLVE
	CRIMINAL JUSTICE AUTHORITIES IN SEXUAL ASSAULT CASES, ASSURE MEANINGFUL
	SANCTIONS ARE IMPOSED ON THE GUILTY, AND ASSURE DUE PROCESS PROTECTIONS
	ARE OBSERVED FOR ALL.
	10.011
4c	(Code:) (Expenses \$19,211. including grants of \$) (Revenue \$) (Revenue \$)
	REGISTRY OF PROSECUTORIAL MISCONDUCT: IDENTIFY AND SUMMARIZE DOCUMENTED
	CASES OF PROSECUTORIAL MISCONDUCT ACROSS THE COUNTRY.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 382,699.

Form 990 (2				PROSECUTOR	INTEGRITY,	INC
Part IV	Checklist of R	equired Sc	hedule	es		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		x
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		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		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
	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			v
45	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	45		v
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10		x
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		x
10	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10		x
10	1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"	18		- 11
19	,	10		x
20-	complete Schedule G, Part III	19 202		X
20а ь	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a 20b		<u> </u>
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21	domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21		x
	domosto government entration, column (-), me 1: II res, complete Schedule I, Parts I and II	 21		<u> </u>

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes, " complete			
	Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
Ŭ	any tax-exempt bonds?	24c		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2.70		<u> </u>
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	254		
U	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
		25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		- 23
20				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	20		- 23
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	07		x
~~	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
-	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>	000		x
h	"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		
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	000		x
~~	"Yes," complete Schedule L, Part IV	28c 29		X
29 20	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
~	contributions? If "Yes," complete Schedule M	30		X X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
~ ~	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			v
~ -	Part V, line 1	34		X X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	0.51		
~~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			x
07	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
37		07		x
20	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		х	
Pa	Note: All Form 990 filers are required to complete Schedule O Tt V Statements Regarding Other IRS Filings and Tax Compliance Check if Oxford the Oxford the Oxford the Detail of the Det	38	17	L
			Yes	No
10	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 13		162	
ia b		-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

(gambling) winnings to prize winners?

1c

Form 990 (2020)			PROSECUTOR		
Part V Statements	Regarding C	ther I	RS Filings and Ta	x Compliance	(continued)

					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions	s)				
3a				3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	Ο		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		•			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccour	nt)?	4a		X
b	If "Yes," enter the name of the foreign country		(
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ad			_		v
				5a		X X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact			5b		
C Fo	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			<u>5c</u>		
0a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the any contributions that were not tax deductible as charitable contributions?			6a		х
h	any contributions that were not tax deductible as charitable contributions?			Ua		
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
·a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices c	rovided to the pavor?	7a		Х
b				7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa					
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontrac	t?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 88	99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion fil	e a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by th	e			
				8		
9	Sponsoring organizations maintaining donor advised funds.					
a				9a		
b				9b		
10	Section 501(c)(7) organizations. Enter:	100	I			
a h	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	10a 10b		1		
ь 11	Section 501(c)(12) organizations. Enter:			1		
'' a		11a				
b	Gross income from members or snarenoiders Gross income from other sources (Do not net amounts due or paid to other sources against					
-	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1	1			
	organization is licensed to issue qualified health plans	13b		-		
	Enter the amount of reserves on hand	13c				
				14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner			4-		х
	excess parachute payment(s) during the year?			15		
16	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment	incor	ne?	16		Х
10	If "Yes," complete Form 4720, Schedule O.					- 23

Form **990** (2020)

CENTER FOR PROSECUTOR INTEGRITY, INC.

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.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 3			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
-	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
Ũ	of officers, directors, trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5		5		X
6		6		X
0 7a	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
14		7a		x
b	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<u>1</u> a		- 23
D		7b		x
0	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7.0		
8		80	Х	
a h	The governing body? Each committee with authority to act on behalf of the governing body?	8a 8b	42	x
9	Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	uo		- 23
9		9		x
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9		- 21
	(This Section B requests information about policies not required by the internal Revenue Code.)		Yes	No
10-2	Did the organization have local chapters, branches, or affiliates?	10a	163	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	110		
- 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		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
-	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		x
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		х
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3):	s only)	availa	ble
	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)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	CENTER FOR PROSECUTOR INTEGRITY - 301-801-0608			
	P.O.BOX 1221, ROCKVILLE, MD 20849			

Check if Schedule O contains a respo	onse or note to	any	/ line	in t	his l	Part	VII			
Section A. Officers, Directors, Trustees, Key	Employees, a	nd H	ligh	est (Con	nper	isat	ed Employees		
1a Complete this table for all persons required to	be listed. Rep	ort	com	pens	satio	on fo	r the	e calendar year ending v	vith or within the orgar	nization's tax year.
• List all of the organization's current officers Enter -0- in columns (D), (E), and (F) if no compens			es (w	hetl	her i	ndiv	idua	lls or organizations), reg	ardless of amount of c	ompensation.
 List all of the organization's current key em 	ployees, if any	. Se	e in	stru	ctior	ns fo	r de	finition of "key employe	e."	
• List the organization's five current highest c able compensation (Box 5 of Form W-2 and/or Bo										
• List all of the organization's former officers reportable compensation from the organization and						comp	oens	ated employees who re	ceived more than \$100),000 of
• List all of the organization's former directo more than \$10,000 of reportable compensation fr	om the organiz	zatio							or or trustee of the org	anization,
See instructions for the order in which to list the p	persons above.									
X Check this box if neither the organization n	or any related o	orga	niza	tion	con	nper	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos heck			one	Reportable	Reportable	Estimated
	hours per	box	, unle cer ar	ss pe	rson i	s both	n an	compensation	compensation	amount of
	week					1/11/13		from	from related	other
	(list any hours for	director						the	organizations (W-2/1099-MISC)	compensation from the
	related	e or d	tee			sated		organization (W-2/1099-MISC)	(00-2/1099-00130)	organization
	organizations	ruste	al trus		yee	mpen				and related
	below	Individual trustee or	Institutional trustee	-	Key employee	st co	Ŀ			organizations
	line)	Indivi	Instit	Officer	Key e	Highest compensated employee	Former			0
(1) E. EVERETT BARTLETT	30.00									
PRESIDENT		Х						0.	0.	0.
(2) ERIC ROSENBERG, ESQ.	2.00									
VICE PRESIDENT		Х						0.	0.	0.
(3) CYNTHIA GARRETT	2.00									
SECRETARY		Х						0.	0.	0.
(4) JESSE BINNALL	2.00									
BOARD MEMBER		Х						0.	0.	0.
							<u> </u>			

 Form 990 (2020)
 CENTER FOR PROSECUTOR INTEGRITY, INC.
 26-4

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

Employees, and Independent Contractors

26-4755972 Page 7

	OR PROSE	CU	то	R	IN	TE	GR	RITY, INC.	26-47	<u>5597</u>	2	Page 8
Part VII Section A. Officers, Directors, Trus		oloye	ees,			hes	t C		· ,			
(A) Name and title	(B) Average hours per week	box,	not cł unles	(C Posi heck n ss pers d a dir	tion nore t son is	han o both	an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estima amour othe	ated nt of
	(list any hours for related organizations below line)	In dividual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	C) (ompens from organiz and rel organiza	the ation ated
										_		
										_		
1b Subtotal c Total from continuation sheets to Part VI	I, Section A))	•	0.		0.		0.
 d Total (add lines 1b and 1c) 2 Total number of individuals (including but n) who	► o re	0.		0.		0.
compensation from the organization					,							0
3 Did the organization list any former officer,	,		,	•		<i>'</i>	0	, i i	,		Yes	
 line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su and related acception grants than \$150 	m of reportabl	e co	mpe	ensat	tion	and	oth	her compensation from t	ne organization		3 4	X
 and related organizations greater than \$150 Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes." com</i> 	iccrue compen	satio	on fr	om a	any i	unre	late	ed organization or individ	lual for services		5	X
Section B. Independent Contractors												•
1 Complete this table for your five highest con the organization. Report compensation for t								n the organization's tax y		nsation		
(A) Name and business	address	NC	ONE	2				(B) Description of s	ervices	Com	(C) npensat	ion
2 Total number of independent contractors (in \$100.000 of compensation from the organized strength of the organized streng	•	ot lin	nited	to t	hose: 0		ed	l above) who received mo	ore than			

	n 990					PR	OSECUTOR	INTEGRITY	, INC.	26-4755	972 Page 9
Pa	rt VI		Statement of Re	ven	ue						
			Check if Schedule O	conta	ins a resp	onse	or note to any line	e in this Part VIII			
								(A)	(B)	(C)	(D) Revenue excluded
								Total revenue	Related or exempt function revenue	Unrelated business revenue	from tax under
							lanction revenue		sections 512 - 514		
2 0	1 a	а	Federated campaigns		1a						
ant			Membership dues								
٦ġ			Fundraising events								
Contributions, Gifts, Grants and Other Similar Amounts			Related organizations								
ig i											
Sirs			Government grants (contributions, gifte								
erio	Т	r	All other contributions, gifts,				220 076				
-iế Đ			similar amounts not included			•	339,076.				
o tr	9	-	Noncash contributions included in								
<u>ų č</u>	ł	h	Total. Add lines 1a-1f					339,076.			
							Business Code				
e	2 8	а									
e Či	k	b									
Se	6	с									
eve	6	d									
Program Service Revenue		е									
Ā	f	f	All other program service	rever	nue						
			Total. Add lines 2a-2f								
	3		Investment income (inclue								
	-			-							
	4		other similar amounts) Income from investment of tax-exempt bond pro								
	5 Royalties										
	5	6 a Gross rents		(ii) Personal							
			Less: rental expenses	6b							
			Rental income or (loss)	6c							
			Net rental income or (loss	;) <u></u>							
	7 8	а	Gross amount from sales of		(i) Secur	ties	(ii) Other				
			assets other than inventory	7a							
	k	b	Less: cost or other basis								
iue			and sales expenses								
venue		С	Gain or (loss)	7c							
		d	Net gain or (loss)			<u></u>	►				
Other Re	8 8	а	Gross income from fundraisi	ng eve	ents (not						
₫			including \$		of						
			contributions reported on	line 1	Ic). See						
			Part IV, line 18			8a					
	k	b	Less: direct expenses								
			Net income or (loss) from								
			Gross income from gamir								
		-	Part IV, line 19								
		h	Less: direct expenses								
			Net income or (loss) from								
						~ <u></u>					
	10 8	a	Gross sales of inventory,			10					
			and allowances								
			Less: cost of goods sold			-					
		С	Net income or (loss) from	sales	ot invento	ory					
S				n -			Business Code	2 5 4 4	2 500		
eou	11 a	а	REGISTRATION	KE	UND		900099	3,500.	3,500.		
Miscellaneous Revenue	k	b									
tevi	6	С									
Ais,	6		All other revenue								
2	e	e	Total. Add lines 11a-11d				►	3,500.			
	12		Total revenue. See instructi	ons			►	342,576.	3,500.	0.	0.

Sect	ion 501(c)(3) and 501(c)(4) organizations must comple	ete all columns. All othe	r organizations must con	nplete column (A).	
	Check if Schedule O contains a respons				X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management	47 221	47 221		
b	Legal	47,331.	47,331.	20 100	
С	Accounting	20,100.	E0 001	20,100.	
d	Lobbying	52,231.	52,231.		
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	4,307.		4,307.	
13	Office expenses	4,507.		4,507.	
14	Information technology				
15 16	Royalties				
16 17	Occupancy Travel				
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,016.	1,016.		
20	Interest	_,010.	,010.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	CITIZEN OUTREACH	147,774.	147,774.		
b	CONTRACTORS	56,985.	56,985.		
с	DIRECT MAIL	28,581.	28,581.		
d	SOCIAL MEDIA	16,080.	16,080.		
е	All other expensesSEE_SCH_O	52,268.	32,701.	19,567.	
25	Total functional expenses. Add lines 1 through 24e	426,673.	382,699.	43,974.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here Figure if following SOP 98-2 (ASC 958-720)				990 (2000)

 Form 990 (2020)
 CENTER FOR PROSECUTOR INTEGRITY, INC.

 Part IX
 Statement of Functional Expenses

_	CENTER	FOR	PROSECUTOR	INTEGRITY,	INC.	

26-4755972 Page 11

		Check if Schedule O contains a response or note		(A) Beginning of year	Ī	(B) End of year
	1	Cash - non-interest-bearing		223,654.	1	139,556.
	2	Savings and temporary cash investments	5,268.	2	6,562.	
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		4		
	5	Loans and other receivables from any current or f				
		trustee, key employee, creator or founder, substa				
		controlled entity or family member of any of these	persons		5	
	6	Loans and other receivables from other disqualifie				
		under section 4958(f)(1)), and persons described i	n section 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
As	9	B			9	
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a			
	ь	Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11		12		
	13	Investments - program-related. See Part IV, line 1		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal		228,922.	16	146,118.
	17	Accounts payable and accrued expenses			17	
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Pa			21	
	22	Loans and other payables to any current or forme				
Liabilities		trustee, key employee, creator or founder, substa				
bili		controlled entity or family member of any of these			22	
Lia	23	Secured mortgages and notes payable to unrelate	and the band as a state of		23	
	24	Unsecured notes and loans payable to unrelated			24	
	25	Other liabilities (including federal income tax, paya				
	20	parties, and other liabilities not included on lines				
			<i>,</i> .		25	
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
	20	Organizations that follow FASB ASC 958, chec	k here 🕨 🗴		20	
Se		and complete lines 27, 28, 32, and 33.				
č	27			228,922.	27	146,118.
ala	28	Net assets with donor restrictions		220,9221	28	
Б	20	Organizations that do not follow FASB ASC 95			20	
E.		and complete lines 29 through 33.				
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds			29	
ets	29 30	Paid-in or capital surplus, or land, building, or equ			30	
SS	30 31	Retained earnings, endowment, accumulated inco	and a state of the state		30	
et ⊿	32			228,922.	31	146,118.
Ž	32	Total net assets or fund balances		228,922.	32	146,118.
	00					

Form **990** (2020)

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Form 990 (2020)
Part X Balance Sheet

	990 (2020) CENTER FOR PROSECUTOR INTEGRITY, INC.	26-475	5972	Pag	_{je} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	342		
2	Total expenses (must equal Part IX, column (A), line 25)	2	426	<u> </u>	
3	Revenue less expenses. Subtract line 2 from line 1	3	-84		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	228		
5	Net unrealized gains (losses) on investments	5	1	, 29	93.
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	146	,11	<u>18.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				

Form **990** (2020)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No. 1545-0047
2020
Open to Public Inspection

٦

		of the Treasury enue Service Go to www.irs.gov/Form990 for instructions and the latest information.			Open to Public Inspection					
Nam	e of t	the organizati	on						Employe	r identification number
					SECUTOR INTE					6-4755972
Pa	rt I	Reason	for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructior	าร.	
The	organ	ization is not a	private found	ation because it is: (For lines 1 through 12, c	heck only	one box.)			
1		A church, co	nvention of chi	urches, or associatio	on of churches described	l in sectio	on 170(b)([.]	1)(A)(i).		
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)								
3					anization described in s			ii).		
4		A medical res	search organiz	ation operated in co	njunction with a hospital	described	l in sectio	on 170(b)(1)(A	(iii). Enter	the hospital's name,
		city, and stat	e:							
5		An organizati	on operated fo	or the benefit of a co	llege or university owned	l or operat	ed by a go	overnmental u	init describ	ed in
		section 170(b)(1)(A)(iv). (Complete Part II.)								
6		A federal, sta	te, or local gov	vernment or governn	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	X	An organizati	on that norma	lly receives a substa	ntial part of its support fi	rom a gove	ernmental	unit or from t	he 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 agricultur	al research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a	land-grant	college
		or university	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	e or
		university:								
10		An organizati	on that norma	lly receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	nip fees, an	d gross receipts from
		activities rela	ted to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of it	ts support f	rom gross investment
		income and u	inrelated busir	ness taxable income	(less section 511 tax) fro	om busines	sses acqui	red by the or	ganization a	after June 30, 1975.
		See section	509(a)(2). (Cor	mplete Part III.)						
11		-	-	-	ively to test for public sa	-				
12		An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or								
				-	ed in section 509(a)(1) o					Check the box in
		7	-	• •	f supporting organization				-	
а					upervised, or controlled	• • • •	-			
			-		gularly appoint or elect a	majority c	of the direc	ctors or truste	es of the su	upporting
		¬ -		complete Part IV, Se						
b				-	l or controlled in connect			-		-
			-		anization vested in the sa	ame perso	ns that co	ntroi or mana	ge the sup	ported
		¬ -		t complete Part IV,	g organization operated	in connoci	tion with	and functions	lly intograte	od with
С			-	• • • •). You must complete l				iny integrate	eu witti,
d		¬ ··	0	. , .	orting organization oper			-	rtod organi	zation(c)
u			-		ation generally must sat				-	
					nplete Part IV, Sections					1000
е		- ·			written determination fro				II Type III	
			•		nally integrated supporti			1900, 1900	n, 19po m	
f	Ente	er the number								
q				about the supporte						
		i) Name of supp		(ii) EIN	(iii) Type of organization	(iv) Is the organized (iv) is the organized (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv)	anization listed ing document?	(v) Amount o	f monetary	(vi) Amount of other
		organizatior	ı		(described on lines 1-10 above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions)
Tota										

Schedule A (Form 990 or 990-EZ) 2020 CENTER FOR PROSECUTOR INTEGRITY, INC. 26-4755972 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	294,478.	243,088.	316,546.	476,353.	339,076.	1669541.
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	294,478.	243,088.	316,546.	476,353.	339,076.	1669541.
	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)						
~							1669541.
	Public support. Subtract line 5 from line 4.						1009541.
		(-) 0010	(1-) 0017	(-) 0010	(4) 0010	(-) 0000	
	ndar year (or fiscal year beginning in)	(a) 2016 294,478.	(b) 2017 243,088.	(c) 2018 316,546.	(d) 2019 476,353.	(e) 2020 339,076.	(f) Total 1669541.
	Amounts from line 4	294,470.	243,000.	510,540.	470,333.	555,070.	1009541.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						1669541.
12	Gross receipts from related activities,	etc. (see instructio	ons)			12	
13	First 5 years. If the Form 990 is for th	e organization's fir	rst, second, third, f	fourth, or fifth tax y	/ear as a section 5	01(c)(3)	
	organization, check this box and stor	here					
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2020 (I	ine 6, column (f), d	ivided by line 11, c	olumn (f))		14	100.00 %
15	Public support percentage from 2019	Schedule A, Part	II, line 14			15	100.00 %
	33 1/3% support test - 2020. If the o					ore, check this bo>	and
	stop here. The organization qualifies						
b	33 1/3% support test - 2019. If the o		-				
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances te			-		-	
h	10% -facts-and-circumstances test	-		• • • •	-	7a and line 15 is 1	····· •
U.	more, and if the organization meets th	-					
	· · ·						
40	organization meets the facts-and-circu				••••		
18	Private foundation. If the organizatio	n dia not check a l	box on line 13, 16a	a, 160, 17a, or 17b	, check this box a	iu see instructions	

Schedule A (Form 990 or 990-EZ) 2020 CENTER FOR PROSECUTOR INTEGRITY, INC. 26-Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6	(a) 2010	(b) 2017	(0) 2010	(0) 2013	(e) 2020	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	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				I
14	First 5 years. If the Form 990 is for th	•		•			·
<u> </u>	check this box and stop here						P
	ction C. Computation of Public	••				1 1	
	Public support percentage for 2020 (li			.,,		15	%
	Public support percentage from 2019					16	%
	ction D. Computation of Inves		•				
	Investment income percentage for 20			ne 13, column (f))		17	%
	Investment income percentage from 2					18	%
19a	33 1/3% support tests - 2020. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and li	ne 17 is not
b	more than 33 1/3%, check this box an 33 1/3% support tests - 2019. If the	-	•				▶∟
	line 18 is not more than 33 1/3%, chec	-					
20	Private foundation. If the organization						
		and not one on a	227 21 1110 14, 19		10 00% and 300 IIIS		

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

Section A. All Supporting Organizations

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

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Schedule A (Form 9	90 or 99	ю-ЕZ)	2020

Yes

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2

3a

3b

3c

No

Schedule A (Form 990 or 990-EZ) 2020 CENTER FOR PROSECUTOR INTEGRITY, INC. 26-4755972 Page 5 Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
с	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization</i> (s) <i>effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i>	
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	
2	Did the organization operate for the benefit of any supported organization other than the supported	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised, or controlled the supporting organization.	
Section C. Type II Supporting Organizations	

Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 1 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 1 the supported organization(s).

Section D. All Type III Supporting Organizations	

			163	NU
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- The organization satisfied the Activities Test. *Complete* line 2 *below*. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. b

с		The organization supported a governmental entity.	Describe in Part VI how	you supported a	governmental entity	(see instruction <u>s).</u>
---	--	---	-------------------------	-----------------	---------------------	-----------------------------

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

2a

2b

3a

3b

2

Voc No

No

Yes

Sche	dule A (Form 990 or 990-EZ) 2020 CENTER FOR PROSECUTOR			26-4755972 Page 6
Pa				
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on I	Nov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete	Sections A through E.	-
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrate	d Type III supporting org	anization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2020 CENTER FOR PROSECUTOR INTEGRITY, INC. 26-4755972 Page 7

Par	t V Type III Non-Functionally Integrated 509	a)(3) Supporting Orga	inizations _{(continu}	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe		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 (<i>describe in Part VI</i>). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive	•		
	(provide details in Part VI). See instructions.	-		8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2020	າຣ	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
b	From 2016				
C	From 2017				
d	From 2018				
e	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2016				
b	Excess from 2017				
	Excess from 2018				
d	Excess from 2019				
е	Excess from 2020				

Schedule A	(Form 990 or 990-EZ) 202	CENTER	FOR P	ROSECUTOR	INTEGRI	TY, IN	īC.	26-475	5972	Page 8
Part VI	Supplemental Infor	mation. Prov	de the ex c, 5a, 6, 9	planations require 9a, 9b, 9c, 11a, 11	d by Part II, line b, and 11c; Parl	10; Part II, I t IV, Section	ine 17a or 1 n B, lines 1 a	7b; Part III, I Ind 2; Part IV	ine 12; /, Section	C,
	line 1; Part IV, Section D, Section D, lines 5, 6, and (See instructions.)	lines 2 and 3; P 8; and Part V, S	art IV, Sec ection E,	ction E, lines 1c, 2a lines 2, 5, and 6. A	a, 2b, 3a, and 3t Iso complete th	o; Part V, lin is part for a	e 1; Part V, ny additiona	Section B, li al information	ne 1e; Par 1.	t V,