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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

AF	or the	e 2009 calendar year, or tax year beginning and ending	
B	heck if	Please use IRS	D Employer identification number
	Addres	ss label or The August 11 August 12 GOOT THE	
	Name change	type	15-0527253
	Initial	See Number and street (or P.O. box if mail is not delivered to street address) Room/su	ite E Telephone number
	Termin ated	Specific 351 SOUTH WARREN STREET, 3RD FLR	(315) 422-8191
	Amend	ded tions City or town, state or country, and ZIP + 4	G Gross receipts \$ 3,202,623.
	Application	DIRACODE, NI 15202	H(a) Is this a group return
	pendin	F Name and address of principal officer. SUSAN R. HURN	for affiliates? Yes X No
		351 SOUTH WARREN STREET, SYRACUSE, NY 132	02 H(b) Are all affiliates included? Yes No
17	ax-exe	empt status X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527	If "No," attach a list (see instructions)
		te: ▶ WWW.HISCOCKLEGALAID.ORG	H(c) Group exemption number ▶
			ear of formation: 1949 M State of legal domicile: NY
Pa	art I	Summary	
ø		Briefly describe the organization's mission or most significant activities ${ m TO} { m PROMO}$	
Activities & Governance		OF EVERY PERSON TO EQUAL JUSTICE UNDER THE L	
i.	:	Check this box if the organization discontinued its operations or disposed of m	
Š	1	Number of voting members of the governing body (Part VI, line 1a)	3 23
ಶ		Number of independent voting members of the governing body (Part VI, line 1b)	4 22
ies		Total number of employees (Part V, line 2a)	5 49
Ĭ	1	Total number of volunteers (estimate if necessary)	6 10
Act	ì	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a 0.
	b	Net unrelated business taxable income from Form 990-T, line 34	76 0.
Revenue			Prior Year
		Contributions and grants (Part VIII, line 1h)	2,914,119. 3,201,318.
		Program service revenue (Part VIII, line 2g)	12,788. 1,305.
æ		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	12,788. 1,305.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,926,907. 3,202,623.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,920,907. 5,202,025.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
	i	Benefits paid to or for members (Part IX, column (A), line 4)	2,400,263. 2,640,400.
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e)	2,400,203. 2,040,400.
Expenses	10a	Total fundraising expenses (Part IX, column (D), line 25)	
ŭ	47 D	Other expenses (Part IX, column (A), lines 11a-11d 11f-24f)	377,267. 492,579.
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,777,530. 3,132,979.
		Revenue less expenses Subtract line 18 from line 18 AUG 0 4 2010	149,377. 69,644.
- S	19	April 1 4 2010 G	Beginning of Current Year End of Year
Net Assets or Fund Balances	20	Total assets (Dark V. Ivan 4.0)	912,082. 1,086,589.
Asse	20 21	Total liabilities (Part X, line 16) Total liabilities (Part X, line 26) OGDEN, UT	238,237. 343,100.
vet/	22	Net assets or fund balances Subtract line 21 from line 20	673,845. 743,489.
P	art II	Signature Block	0,0,0,010,0
		Under penaltities of perjury, I declare that I have examined this return, including accompanying schedules and stateme and complete the claretion of preparer (other than efficer) is based or all information of which preparer has any knowle	nts, and to the best of my knowledge and belief, it is true, correct,
		and complete Declaration of preparer (other than efficer) is based on all information of which preparer has any knowle	age
Sig	n	\$ 40000 K. 9/10 00	17-29-10
Hei		Signature of officer	Date
1101	•	SUSAN R. HORN, PRESIDENT/CEO	
		Type or print name and title	
		Preparer's JUL 2at 2010	Check If Preparer's identifying number (seg instructions)
Pai		signature / (For) / such that	employed \blacktriangleright \Box (see instructions)
	parer's	Trimsname / ZUESTONE MARSHALL & DISCENZA, LLP	EIN > 16-1076996
Use	Only	self-employed), THE FOUNDRY 432 NORTH FRANKLIN STR	
		address, and ZIP + 4 SYRACUSE, NY 13204	Phone no. $> 315-476-4004$
Ma	y the II	RS discuss this return with the preparer shown above? (see instructions)	X Yes No

OCAMMED AND 3 0 2010,

Form 990 (2009) (

	m 990 (2009) FRANK H. HISCOCK LEG		15-0527253 Page 2
Pa	art III Statement of Program Service Accomplishme	nts	
1	Briefly describe the organization's mission:		
	TO PROMOTE THE FUNDAMENTAL RIGHT	OF EVERY PERSON TO EO	UAL JUSTICE
	UNDER THE LAW BY PROVIDING HIGH Q		
	INDIVIDUALS AND FAMILIES IN NEED		
	SURROUNDING AREA.	IN ONONDRON COUNTY MA	
2	Did the organization undertake any significant program services du	ring 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 change	s in how it conducts, any program services	s?
	If "Yes," describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organi	zation's three largest program services by	expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(
	allocations to others, the total expenses, and revenue, if any, for each		· ·
	anocations to others, the total expenses, and forential, if any, for so	ion program control reported	
40	a (Code.) (Expenses \$ 2,734,006. inc	luding grants of \$	(Revenue \$
4a	a (Code.)(Expenses \$ 2,734,006.inc THE ORGANIZATION PROVIDED LEGAL R		•
	4-3-4-1-2-3-3-3		
	WHO COULD NOT AFFORD TO HIRE PRIV		
	2009 INCLUDING: 1,813 NEW CIVIL P		
	CASES; AND 96 NEW APPEALS. SEE AT	PACHED STATISTICAL RE	PORTS OF SERVICE.
	SEE ATTACHED STATISTICAL REPORT.		
			·
46	· /Code \/ \/ \(\(\) \/ \(\) \\ ino	luding grants of C	(Revenue \$
4b	o (Code) (Expenses \$ inc	uding grants of \$) ((Revenue \$
		<u> </u>	
		•	
4c	c (Code) (Expenses \$ inc	luding grants of \$)((Revenue \$
			
		· · · · · · · · · · · · · · · · · · ·	
		.	
4d	d Other program services. (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)
4e	e Total program service expenses ▶\$ 2,734,006	•	
			Form 990 (2009)

			Yes	No		
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?					
	If "Yes," complete Schedule A .	_1_	_X			
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	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		X		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Х			
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and					
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	_5_				
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		<u>X</u> _		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		İ			
	Schedule D, Part III .	8		X		
9	Did the organization report an amount in Part X, line 21; 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	ļ	<u>X</u>		
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?					
	If "Yes," complete Schedule D, Part V	10		X		
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X		٠,,			
	as applicable	11	X			
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,					
_	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					
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.					
•	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.					
	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.					
•	The state of the s					
•	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? If "Yes," complete Schedule D, Part X.					
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete					
	Schedule D, Parts XI, XII, and XIII.	12	Х			
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?					
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional					
13	ls the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>		
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X		
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,					
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization					
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X		
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals						
located outside the United States? If "Yes," complete Schedule F, Part III						
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-7		v		
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10		Х		
40	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	 	A		
19	complete Schedule G, Part III	19		х		
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X		
20	Signification operate one of more hospitals (ii 100, somplete contents (ii		990	2009)		
			,	/		

Form 990 (2009) FRANK H. HISCOCK LEGAL AID SOCIETY

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		_X_
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 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 25	24a		<u>X</u>
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) and 501(c)(4) 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	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete	İ		
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV	ŀ		1
	instructions for applicable filing thresholds, conditions, and exceptions)			ŀ
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	1		
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	l		٠,,
	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?	١		٠,,
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	is any related organization a controlled entity within the meaning of section 512(b)(13)?			۱,,
	If "Yes," complete Schedule R, Part V, line 2	35	ļ	<u>X</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	l		٠,
	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			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	-	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		.	
	Note. All Form 990 filers are required to complete Schedule O	38 Form	990	(2009)
		LOUIN	JJU (20091

Form 990 (2009) FRANK H. HISCOCK LEGAL AID SOCIETY 15-0527253 Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 6 U.S. Information Returns Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable 1h Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 49 2a filed for the calendar year ending with or within the year covered by this return X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? X 3a b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a b If "Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 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 services X provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7e benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **7**f q For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds.

a Did the organization make any taxable distributions under section 4966?

b Did the organization make a distribution to a donor, donor advisor, or related person?

Section 501(c)(7) organizations. Enter:

a 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

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

10a 10b 11a 11b 12a

9a

9b

Form 990 (2009)

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 in Schedule O See instructions.

Sec	tion A. Governing Body and Management									
		,		1		Yes	No			
1a	Enter the number of voting members of the governing body	<u>1a</u>		23						
b	Enter the number of voting members that are independent	1b	<u> </u>	22						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	ip with	any other							
	officer, director, trustee, or key employee?]	2		<u>X</u>			
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ct supervision							
	of officers, directors or trustees, or key employees to a management company or other person?			,	3_		<u>X</u>			
4	Did the organization make any significant changes to its organizational documents since the prior Fo	orm 99	0 was filed?	ļ	4		<u> </u>			
5	Did the organization become aware during the year of a material diversion of the organization's asset	ts?]	5_		X			
6	Does the organization have members or stockholders?			[6_		<u>X</u>			
7a	7a Does the organization have members, stockholders, or other persons who may elect one or more members of the									
	governing body?			,	7a		<u> </u>			
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	rsons	•		7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during	g the year	ĺ						
	by the following.									
а	The governing body?			[8a	<u>X</u>				
b	Each committee with authority to act on behalf of the governing body?			ļ	8b	X				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached	at the				:			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		<u>X</u>			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	Revenu	e Code)							
				г		Yes	No			
	Does the organization have local chapters, branches, or affiliates?			}	10a		<u>X</u>			
þ	If "Yes," does the organization have written policies and procedures governing the activities of such	chapt	ers, affiliates,		10b					
	and branches to ensure their operations are consistent with those of the organization?									
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?									
	A Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
	Does the organization have a written conflict of interest policy? If "No," go to line 13									
b	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise									
	to conflicts?									
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,"	describe			7.7				
40	In Schedule O how this is done			ŀ	12c	X				
13	Does the organization have a written whistleblower policy?			ŀ	13	Х	X			
14	Does the organization have a written document retention and destruction policy?			}	14	Δ				
15	Did the process for determining compensation of the following persons include a review and approve		webendent				1			
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•			45-	Х				
	The organization's CEO, Executive Director, or top management official			}	15a	X				
D	Other officers or key employees of the organization			}	15b	Δ_				
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange.	mont.	with a	1		'				
ıoa	taxable entity during the year?	incill \	viui a		16a		Х			
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva	aluate	ts narticination	,	IUa					
U	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org			.						
	exempt status with respect to such arrangements?	,au.	.0.1.0	ĺ	16b					
Sec	tion C. Disclosure		·		100					
17	List the states with which a copy of this Form 990 is required to be filed ▶NY									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1	T (501	c)(3)s only) ava	ulable	for	_				
	public inspection. Indicate how you make these available. Check all that apply.									
	Own website Another's website X Upon request									
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflic	of interest pol	ıcy, an	d fina	ncıal				
	statements available to the public									
20	State the name, physical address, and telephone number of the person who possesses the books a	ınd rec	ords of the org	anızatı	on 🕨	•				
	JOANNE P. SAWMILLER - (315) 218-0140		***							
	351 SOUTH WARREN STREET, SYRACUSE, NY 13202-2057									

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

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. Use Schedule J-2 if additional space is needed
- 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 See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not co	(B)				C)	<u></u>	-	(D)	(E)	(F)
Name and Title	Average	/		Pos			1. A	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated de employee	<u>, </u>	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
ADAMS, BERTHA A.										
DIRECTOR	1.00	X		_	<u> </u>			0.	0.	0.
BALDWIN, DENNIS R., ESQ										_
DIRECTOR	1.00	X			<u></u>	ļ	_	0,	0.	0.
COTTRELL, ANITA					ŀ					
DIRECTOR	1.00	X			_			0.	0.	0.
DANCKS, THERESE WILEY, ES	1 00	37								•
DIRECTOR	1.00	A				┢	-	0.	0.	0.
DAR DAR, KIRBY D.	1 00	.					i	0.	0.	_
DIRECTOR DEVORE, WYNETTA	1.00	^	-				_	U•	· · · · · · · · · · · · · · · · · · ·	0.
DIRECTOR	1.00	v						0.	0.	0.
ENGEL, RICHARD C.	1.00	^							0.	<u>.</u>
DIRECTOR	1.00	\mathbf{x}						0.	0.	0.
HARDICK, JOSEPH A.										
SECRETARY-TREASURER	1.00	X		Х		į		0.	0.	0.
HANCOCK, HON. STEWART F.										
DIRECTOR	1.00	X						0.	0.	0.
HORN, SUSAN R.					1			İ		
PRESIDENT/CEO	40.00	X		X	X	ļ		104,111.	0.	10,674.
HUBERT, H.J., ESQ								_	_	_
DIRECTOR	1.00	X					<u>L</u> .	0.	0.	0.
MALAVENDA, ANTHONY J.	4 00		1		Ì					
CHAIR	1.00	X		X		<u> </u>		0.	0.	0.
MARTY, FREDERICK S., ESQ	1 00	,,				ŀ				0
DIRECTOR REPORT OF FIGURE	1.00	X			_			0.	0.	0.
MURPHY, KEVIN C., ESQ. CHAIR-ELECT	1.00	v		x		1		0.	0.	_
NORTHRUP, THEODORE H.	1.00	^	_	Λ				<u>.</u>	<u></u>	0,
DIRECTOR	1.00	x						0.	0.	0.
PARRY, MATTHEW L.					-	I		†		
DIRECTOR	1.00	x	l					0.	0.	0.
PERRY, STANFORT J.		† <u>-</u> -	\vdash							
DIRECTOR	1.00	X						0.	0.	0.
022007 00 04 10										Form 990 (2009)

Part VII Section A. Officers, Directors, Tru	stees, Key E	mple	yee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average			Pos	ition	1		Reportable	Reportable		Esti	mate	b
	hours	(cl	heck	c all t	that	app	ly)	compensation	compensation			ount c)f
	per	į						from	from related			ther	
	week	를				20		the	organizations (W-2/1099-MISC)		comp	ensat m the	
		teeo	ustee			ensa		organization (W-2/1099-MISC)	(88-271099-181130)	'		nizatio	
		altus	nalt		loyee	e comp	l	(11 2/ 1000 1/1100)			_	relate	
		individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				organ	ızatıo	ns
77070 0171		=	_	-	Ľ	Ξē	T.			\dashv	-		
PESKO, CARL	1 00	- V						0.	,	,			0.
VICE CHAIR	1.00	X	┝		-	 		<u> </u>		' 			<u> </u>
ROSBROOK, JANICE T. DIRECTOR	1.00	x				İ		0.	,).			0.
RUDOLPH, CLAIRE, PH.D.	1.00	┢				\vdash	-	0.		' ' 			<u> </u>
DIRECTOR	1.00	X	ļ					0.	().			0.
SNYDER, JAMES T., ESQ	1.00	1	<u> </u>		\vdash	├─	 		`	~			••
DIRECTOR	1.00	X						0.	().			0.
RUSSELL, RICHARD						T							
DIRECTOR OF DEVELOPMENT	1.00	$ _{\mathbf{X}}$						0.	(۱. ر			0.
WALLACE, JOANN C.						1							
DIRECTOR	1.00	X						0.	() . l			0.
YOUNG, SAMUEL C., ESQ													
DIRECTOR	1.00	X						0.	().			0.
SMITH, ROBERT J.													
DIRECTOR	1.00	<u> </u>	<u> </u>	L	<u> </u>	ļ		0. 0).			0.
		ļ	 		<u> </u>	ļ							
		ļ											
1b Total	<u> </u>	L	J	l]	┢		104,111.	(5.	10	, 6	74.
Total number of individuals (including but n	ot limited to th	nose	liste	ed al	bov	e) wi	no r						
compensation from the organization						•							1
											,	/es	No
3 Did the organization list any former officer,	director or tru	stee	, ke	y en	olqn	yee,	or h	nighest compensated er	nployee on		İ		
line 1a? If "Yes," complete Schedule J for s										Ļ	3		<u>X</u>
4 For any individual listed on line 1a, is the su									the organization				
and related organizations greater than \$15										-	4		<u> </u>
5 Did any person listed on line 1a receive or a	•			trom	any	/ unr	elat	ted organization for serv	ices rendered to		_		v
the organization? If "Yes," complete Sched	uie J for sucn	pers	son				-				5		<u>X</u>
Complete this table for your five highest co	mpensated in	dan	ande	ant c	ont	racto	ore f	that received more than	\$100,000 of comp		tion fro	m	
the organization.	mpensated m	аср	onac	,,,,	,0111	aon	,,,,	mat received more than	Ψ100,000 01 00mp	,,,,,,,		,,,,	
(A)								(B)			(C)		
Name and business								Description of s	ervices	C	ompen	sation	<u> </u>
EXCELLUS BLUECROSS BLUES						_						_	
344 S. WARREN STREET, SY		N	Y :	13.	20.	2		INSURANCE			248	,76	<u> </u>
UNITED PARTNERS MANAGEMENT								D FINTER			100	1 (20
351 WARREN STREET, SYRAC	<u>. L</u>	321	<u>U Z</u>			\dashv	RENT		123,188.			<u> </u>	
				-									
	····												
2 Total number of independent contractors (i	ncluding but r	not li	mıte	d to	tho	se la	stec	d above) who received m	nore than				
\$100,000 in compensation from the organization 2													

Form 990 (2009) FRANK H. HISCOCK LEGAL AID SOCIETY 15-0527253 Page 9 Part VIII Statement of Revenue (D) Revenue (A) (B) (C) Related or Unrelated Total revenue excluded from business exempt function tax under sections 512, 513, or 514 revenue revenue Contributions, gifts, grants and other similar amounts <u>96,500.</u> 1 a Federated campaigns 1a 1b 55,946. **b** Membership dues 1c c Fundraising events d Related organizations 1d 1e 2,946,409. e Government grants (contributions) All other contributions, gifts, grants, and 102,463. similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 201,318 h Total. Add lines 1a-1f **Business Code** Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 1,305. 1,305. other similar amounts) Income from investment of tax-exempt bond proceeds 4 Royalties 5 (i) Real (ii) Personal 6 a Gross Rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (ii) Other 7 a Gross amount from sales of (i) Securities assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ _____ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances а b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d 3,202,623. 0. 0. 1,305. Total revenue See instructions.

Form 990 (2009)

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) but are not required to complete columns (B), (C), and (D).

	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 governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				-
5	Compensation of current officers, directors,				
	trustees, and key employees	214,278.	107,139.	107,139.	
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	1,877,063.	1,663,620.	213,443.	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	77,143.	70,076.	7,067.	
9	Other employee benefits	319,158.	299,486.	19,672.	
10	Payroll taxes	152,758.	130,017.	22,741.	
11	Fees for services (non-employees).				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	21,669.	20,586.	1,083.	
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	147,378.	140,009.	7,369.	
17	Travel	1,291.	1,291.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	26,404.	24,556.	1,848.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	31,937.	30,339.	1,598.	
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	PROF FEES AND CONTRACT	89,105.	79,303.	9,802.	
b	EQUIPMENT RENTAL & MAIN	48,570.	46,142.	2,428.	
С	CLIENT ASSISTANCE	26,632.	26,632.		
d	SUPPLIES	25,726.	24,866.	860.	
e	PUBLICATIONS	24,440.	23,218.	1,222.	
f	All other expenses	49,427.	46,726.	2,701.	
25	Total functional expenses. Add lines 1 through 24f	3,132,979.	2,734,006.	398,973.	0
<u> </u>	Joint costs. Check here I if following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

Par	tΧ	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		150.	1	151.
	2	Savings and temporary cash investments		735,162.	2	888,111.
	3	Pledges and grants receivable, net		58,149.	3	65,245.
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, di	ectors, trustees, key		.	
		employees, and highest compensated employee	es Complete Part II			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as	defined under section			
		4958(f)(1)) and persons described in section 495	8(c)(3)(B). Complete			
		Part II of Schedule L			6	
Assets	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		8		
	9	Prepaid expenses and deferred charges		10,026.	9	<u>22,897.</u>
	10 a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a 592,711			110 105
	b	Less accumulated depreciation	10b 482,526	. 108,595.		110,185.
	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	012 002	15	1 006 500	
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	912,082.	16	1,086,589.
	17	Accounts payable and accrued expenses	10,244.	17	3,192.	
	18	Grants payable		36,010.	18 19	111,783.
	19	Deferred revenue		30,010.	20	111,700.
	20	Tax-exempt bond liabilities	Part IV of Schodulo D		21	
Liabilities	21	Escrow or custodial account liability. Complete li Payables to current and former officers, director			21	
) E	22	highest compensated employees, and disqualifi				
Lia		of Schedule L	ed persons complete rate in		22	
	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelated			24	-
	25	Other liabilities Complete Part X of Schedule D	s time parties	191,983.	25	228,125.
	26	Total liabilities. Add lines 17 through 25		238,237.	26	343,100.
		Organizations that follow SFAS 117, check he	ere X and complete			
ģ		lines 27 through 29, and lines 33 and 34.	,			
2	27	Unrestricted net assets		673,845.	27	743,489.
ala	28	Temporarily restricted net assets			28	
g B	29	Permanently restricted net assets			29	
Ë		Organizations that do not follow SFAS 117, c	heck here 🕨 🔲 and			
ě		complete lines 30 through 34.				
şţ	30	Capital stock or trust principal, or current funds			30	
SSE	31	Paid-in or capital surplus, or land, building, or ed	juipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come, or other funds		32	
ž	33	Total net assets or fund balances	673,845.	33	743,489.	
	34	Total liabilities and net assets/fund balances		912,082.	34	1,086,589.

	1990 (2009) FRANK H. HISCOCK LEGAL AID SOCIETY 15-U52	<u> 1253</u>	Pa	ge 12
Pa	rt XI Financial Statements and Reporting			
			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 O	ļ ļ		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X_	
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	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			ĺ
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			ĺ
	consolidated basis, separate basis, or both:		ľ	
	X Separate basis Consolidated basis Both consolidated and separate basis	1		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Form	990 (2009

SCHEDULE A

Department of the Treasury Internal Revenue Service

(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.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number 15-0527253

		FRANK H	. HISCOCK LE	GAL A	ID SO	CIETY	•		15	5-0527	253		
Part I	Reason		ity Status (All organiz					ructions.					
he organ	zation is not a	private foundation	because it is. (For lines 1	through 1	11, check	only one b	ox)						
1 🔲	A church, cor	nvention of churches	s, or association of churc	ches desci	ribed in <mark>se</mark>	ction 170	(b)(1)(A)(i)						
2	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sci	hedule E)									
з 🗀	A hospital or	a cooperative hospi	tal service organization o	described	n section	170(b)(1)	(A)(iii).						
4 🔲	A medical res	earch organization of	operated in conjunction	with a hos	pıtal descr	nbed in se	ction 170	(b)(1)(A)(ii	i). Enter t	he hospital	's name,		
	city, and state	e:											
5 🔲	An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	erated by	a governr	mental uni	t describe	ed in			
	section 170	(b)(1)(A)(iv). (Comple	ete Part II)										
6	A federal, sta	te, or local governm	ent or governmental unit	t described	d in sectio	n 170(b)(1	I)(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). (Complete Part II.)												
8 🖳	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)								
9 🗀	An organizati	on that normally rec	eives: (1) more than 33 1	1/3% of its	support f	rom contri	butions, m	nembershi	p fees, ar	nd gross re	ceipts from		
	activities rela	ted to its exempt fur	nctions - subject to certa	un excepti	ons, and (2	2) no more	than 33 1	/3% of its	support	from gross	investment		
	income and u	inrelated business t	axable income (less sect	ion 511 ta	x) from bu	sinesses a	acquired b	y the orga	inization a	after June 3	30, 1975		
		509(a)(2). (Complete	•										
10													
11 📖													
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that												
	describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III · Functionally integrated d Type III · Other												
_ [a Type I		」 rype ii it the organization is not	• .		-	-	r moro disi	u Logifica				
e			han one or more publicly										
f		-	ten determination from t						λ(α)(1) Οι .	36011011 300	/(α/(Σ)		
•	_	rganization, check th			10 11 13 ta 1 y	pc 1, 13pc	11, OI 13PC	,					
a		•	organization accepted ar	ny aift or co	ontribution	from any	of the follo	owina pers	sons?				
g	-		rectly controls, either al								Yes No		
	••	·	upported organization?			•		• • • • • • • • • • • • • • • • • • • •	,	11g(i)			
	-	• •	n described in (i) above?							11g(ii)			
	(iii) A 35% d	controlled entity of a	person described in (i) o	or (II) above	∍?					11g(iii)			
h			about the supported or										
(i) Name	of supported	(ii) EIN	(iii) Type of		rganization		(vi) ls	the	(viı) An	nount of			
	inization	` .	organization (described on lines 1-9		sted in your		ion in col.	(i) organiz	ed in the	sup	port		
			above or IRC section	1	document?	,,	,	U.S	.7				
			(see instructions))	Yes	No	Yes	No	Yes	No				
-		-		<u> </u>									
					į	_							
				 									
Cotal			İ	1	1		I	1					

 $\mbox{\sc LHA}$ For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 F					15-052	7253 Page 2			
Part II Support Schedule for	•		Sections 170	(b)(1)(A)(iv) an	d 170(b)(1)(A)(/i)			
(Complete only if you checke	d the box on line 5	, 7, or 8 of Part I.)							
Section A. Public Support									
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total			
1 Gifts, grants, contributions, and									
membership fees received. (Do not									
include any "unusual grants.")	2259144.	2311401.	2478280.	2893343.	3277092.	13219260.			
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	2259144.	2311401.	2478280.	2893343.	3277092.	13219260.			
5 The portion of total contributions									
by each person (other than a									
governmental unit or publicly									
supported organization) included									
on line 1 that exceeds 2% of the									
amount shown on line 11,									
column (f)									
6 Public support. Subtract line 5 from line 4						13219260.			
Section B. Total Support									
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total			
7 Amounts from line 4	2259144.	2311401.	2478280.	2893343.		13219260.			
8 Gross income from interest,									
dividends, payments received on									
securities loans, rents, royalties									
and income from similar sources	8,702.	17,630.	22,187.	12,788.	1,305.	62,612.			
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 IV.)									
11 Total support. Add lines 7 through 10						13281872.			
12 Gross receipts from related activities	, etc (see instruction	ons)			12				
13 First five years. If the Form 990 is fo	r the organization's	first, second, thir	d, fourth, or fifth ta	ıx year as a sectio	n 501(c)(3)				
organization, check this box and sto						▶□			
Section C. Computation of Pub	lic Support Per	rcentage							
14 Public support percentage for 2009 (line 6, column (f) di	ivided by line 11, c	olumn (f))		14	99.53 %			
15 Public support percentage from 2008	3 Schedule A, Part	II, line 14			15	99.48 %			
16a 33 1/3% support test - 2009.if the c	organization did not	t check the box on	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 supp	orted organization				▶ X			
b 33 1/3% support test - 2008. If the o	organization did not	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 qua	lifies as a publicly s	supported organiza	ation			▶□			
17a 10% -facts-and-circumstances tes	t - 2009. If the orga	anization did not ch	neck a box on line	13, 16a, or 16b, a	nd line 14 is 10%	or more,			
and if the organization meets the "fac	cts-and-circumstan	ces" test, check th	ns box and stop h	ere. Explaın ın Pai	t IV how the organ	nization			
meets the "facts-and-circumstances"			-			ightharpoons			
b 10% -facts-and-circumstances tes	t - 2008.If the orga	anization did not ch	neck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or			
more, and if the organization meets t	-								
organization meets the "facts-and-cir						ightharpoons			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions									

Schedule A	(Carea	000 00	OOO E	7) 2000
scriedule A	(Form	990 or	990-6	Z) 2009

Page 3

Sch	edule A (Form 990 or 990-EZ) 2009		6	01: 500(-)	V(0)		Page 3
	rt III Support Schedule for C	rganizations	Described in	Section 509(a)	(Complete only	If you checked the bo	ox on line 9 of Part I
	ction A. Public Support		1				
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	1					
	include any "unusual grants.")						
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 bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to						
_	or expended on its behalf					 	<u> </u>
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						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	: Add lines 7a and 7b				Ī		
8	Public support (Subtract line 7c from line 6)						
Sec	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	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						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
	Total support (Add lines 9, 10c, 11, and 12)	<u> </u>	<u> </u>		<u> </u>	<u> </u>	
14	First five years. If the Form 990 is for	the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	ation,
	check this box and stop here						<u>▶</u> ∟
Se	ction C. Computation of Publ	<u>ic Support Pe</u>	rcentage			, , ,	
15	Public support percentage for 2009 (I	ine 8, column (f) d	livided by line 13,	column (f))		15	%
16	Public support percentage from 2008					16	<u>%</u>
Se	ction D. Computation of Inves	stment Incom	e Percentage)	 .		
17	Investment income percentage for 20	109 (line 10c, colur	mn (f) dıvided by lı	ne 13, column (f))		17	%
18	Investment income percentage from 2					18	%
198	a 33 1/3% support tests - 2009. If the	organization did r	not check the box	on line 14, and line	e 15 is more than :	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a	-	_				
ł	33 1/3% support tests - 2008. If the						and
	line 18 is not more than 33 1/3%, che		•				
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check to	his box and see in	structions	>

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ. See separate instructions.

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

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

If the organization answered "Yes," to 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," to Form 990, Part IV, line 5 (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organiza	tions. Complete Part III.				
Nar	ne of organization			1	Emplo	yer identification number
	FRANK H	. HISCOCK LEGAL	AID SOCIETY	7		15-0527253
Ĕ	art I-A Complete if the org	ganization is exempt un	der section 501(c	or is a section 5	27 or	ganization.
1	Provide a description of the organiz	zation's direct and indirect politi	cal campaign activities	in Part IV		
2	Political expenditures				▶\$	
3	Volunteer hours					
Pa	art I-B Complete if the org	ganization is exempt un	der section 501(c)(3).		
1	Enter the amount of any excise tax	incurred by the organization ur	ider section 4955		▶\$	
	Enter the amount of any excise tax	, ,	-	5	▶\$	
	If the organization incurred a section	on 4955 tax, did it file Form 4720	O for this year?			Yes No
	Was a correction made?					L Yes No
	of If "Yes," describe in Part IV.		don costion FO1/s	\ avaant aaction	<u> </u>	N(3)
Ь—	`	ganization is exempt un	<u>`</u>	`		<i>3)</i> (3).
	Enter the amount directly expende				▶\$	
2	Enter the amount of the filing organ	nization's funds contributed to c	ther organizations for s	section 527	•	
_	exempt function activities	Add 4 10 Fabru			▶\$	
3	Total exempt function expenditures line 17b	s Add lines I and 2 Enter here	and on Form 1120-POI	_ ,	C	
4	Did the filing organization file Form	1100 DOL for this year?			•	Yes No
	Enter the names, addresses and er	·	FINI) of all section 527 n	olitical organizations to	which	
J	For each organization listed, enter			•		
	that were promptly and directly del					
	(PAC). If additional space is needed			. 5 5		•
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fr	rom	(e) Amount of political
	(2) (13.110	(5), 100.000	(0) 2	filing organization		contributions received and
		}		funds. If none, ente	er -0	promptly and directly
						delivered to a separate political organization
						If none, enter -0-
						<u> </u>
]	
					j	
						
_						
		1	i i	i i	,	

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

Schedule C (Form 990 or 990-EZ) 2009

LHA

Schedule C (Form 990 or 990 EZ) 2009 Part II-A Complete if the org	FRANI	CH. H	ISCOCK LEGA	L AID SOCIET	<u>FY 15-0</u> ed Form 5768)527253 Page 2
(election under sec			inprantaci cootie	00 1(0)(0) a		
A Check if the filing organizat			liated group			
			nd "limited control" pr	ovisions apply		
		ying Exper eans amou	nditures ints paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence publ	ıc opınıon (grass roots lobbying)			
b Total lobbying expenditures to influ	ence a leg	islative boo	dy (direct lobbying)			
c Total lobbying expenditures (add lii	nes 1a and	i 1b)		_		
d Other exempt purpose expenditure	s			-		
e Total exempt purpose expenditures						
f Lobbying nontaxable amount. Ente	r the amou	unt from the	e following table in bo	th columns		
If the amount on line 1e, column (a) o	r (b) is:	The lob	bying nontaxable am	ount is:		
Not over \$500,000		20% of	the amount on line 1e	·]
Over \$500,000 but not over \$1,000	,000		00 plus 15% of the ex			
Over \$1,000,000 but not over \$1,5	000,000		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,	000,000		00 plus 5% of the exce	ess over \$1,500,000		
Over \$17,000,000		\$1,000,	000			
g Grassroots nontaxable amount (en				-	·-	
h Subtract line 1g from line 1a If zero						
 i Subtract line 1f from line 1c. If zero j If there is an amount other than zero 			line 1, did the organia	ration file Form 4720		
reporting section 4911 tax for this		1 11116 111 01	ine ii, did the organiz	ation life i offit 4720		Yes No
reporting section 4311 tax for this		4-Vear Ave	eraging Period Under	Section 501(h)		<u> </u>
	ations tha	it made a s	ection 501(h) electio	n do not have to comp es 2a through 2f on pa		
	Lobb	ying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures			ļ			
d Grassroots nontaxable amount					_~ ~	+
e Grassroots ceiling amount (150% of line 2d, column (e))						
(100% of life 2d, coldifier (e))						1
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 FRANK H. HISCOCK LEGAL AID SOCIETY 15-0527253 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		1	<u> </u>	- 11-	,
			a)	(b	"
		Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?		х		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Х		
c			Х		
c	Mailings to members, legislators, or the public?		Х		
e			Х	_	
f	Grants to other organizations for lobbying purposes?	Х		1	,528.
ç	Direct contact with legislators, their staffs, government officials, or a legislative body?		Х		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		
i	Other activities? If "Yes," describe in Part IV		Х		
j	Total. Add lines 1c through 1i			1	.,528.
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	*			
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c)	(5), or sec	ction	•
	501(c)(6).				
		•		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		3		
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c)	(5), or sec	ction	
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa				
	"Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ical			
	expenses for which the section 527(f) tax was paid).				
a	Current year		2a		
b	Carryover from last year		2b		
c	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
	expenditure next year?	•	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Pa	rt IV Supplemental Information				
Con	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; a	ind Part II-B,	line 1ı. Also,	complete	this part
	ny additional information			•	·
	<u>. </u>				
				_	

Schedule D

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

FRANK H. HISCOCK LEGAL AID SOCIETY 15-0527253 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) □ Preservation of land for public use (e.g., recreation or pleasure). Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2¢ d Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of □No Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

		. HISCOCK						<u> 15-05</u>			
Par	t III Organizations Maintaining C	collections of A	rt, His	torical Tr	easures,	or Othe	er Simila	<u>ar Asse</u>	ts (cont	nued)	<u> </u>
3	Using the organization's acquisition, accessi	on, and other record	is, checl	k any of the	following that	at are a s	ignificant i	use of its	collection	n item	S
	(check all that apply):										
а	Public exhibition	d		Loan or exc	hange progr	ams					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	ney further t	he organizat	on's exe	mpt purpo	se in Par	t XIV.		
5	During the year, did the organization solicit of	r receive donations	of art, hi	storical trea	sures, or oth	er sımılaı	rassets				
	to be sold to raise funds rather than to be mi	aintained as part of t	the orga	nization's co	ollection?				Yes		No_
Par	t IV Escrow and Custodial Arran	gements. Compl	ete if org	ganization a	nswered "Ye	s" to For	m 990, Pa	rt IV, line	9, or		
	reported an amount on Form 990, Pa	rt X, line 21.		-							
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	ns or other as	sets not	ıncluded				
	on Form 990, Part X?		-						Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	table [.]							
	, ,	•	·						Amount	 t	
С	Beginning balance						1c				
d	Additions during the year						1d				
	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21?		·		<u> </u>		Yes		No
	If "Yes," explain the arrangement in Part XIV								-		
Par			swered	"Yes" to Fo	rm 990, Part	IV, line 1	0.				
	<u> </u>	(a) Current year	(b) P	rior year	(c) Two year	rs back	(d) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance		, ,							-	
b	Contributions										
G	Net investment earnings, gains, and losses										
ď	Grants or scholarships										
e	Other expenditures for facilities										
•	and programs										
f	Administrative expenses										
g	End of year balance		i								
2	Provide the estimated percentage of the year	r end balance held a	1 1S.		· · · · · · · · · · · · · · · · · · ·				<u>. </u>		
a	Board designated or quasi-endowment		%								
h	Permanent endowment ▶	%									
c											
3a	Are there endowment funds not in the posse		ation tha	at are held a	and administe	ered for t	he organiz	ation			
-	by.						3		[Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
h	If "Yes" to 3a(ii), are the related organization:	s listed as required o	on Sched	dule R?					3b		
4	Describe in Part XIV the intended uses of the	•									
Pai	t VI Investments - Land, Building), Part X, line	10.		•		-	
	Description of investment	(a) Cost or o			t or other		ccumulate	d	(d) Bool	k valu	<u></u>
	2000 page of arroadment	basis (investi			(other)		preciation	_	,_,		-
12	Land	, ,			• •				-		
	Buildings			<u> </u>							
	Leasehold improvements	-		<u> </u>							
	Equipment			<u> </u>							
	Other			5.0	2,711.	,	482,5	26.	11	0.1	85.
	I. Add lines 1a through 1e (Column (d) must e	gual Form 990 Part	X. colur					D			85.
. v.a	in the miles in the control to the control to the control to	and	, 50.01	1-// 11/10	17//						<u> </u>

Schedule D (Form 990) 2009

		AID SOCIETY	15-0	1527253 Page 3
Part VII Investments - Other Securities.	See Form 990, Part X, III	ne 12	(c) Method of valuation	
(a) Description of security or category (including name of security)	(b) Book value	Cos	st or end-of-year market	
Financial derivatives				
Closely-held equity interests				
Other				
			* *:-	
			4.4.00	
				
	<u> </u>			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)			_	
Part VIII Investments - Program Related.	See Form 990, Part X,	line 13		
(a) Description of investment type	(b) Book value		(c) Method of valuation	
(a) Description of investment type	(b) Book value	Cos	st or end-of-year market	value
				
	-			
				
				····
Total (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, In		<u> </u>		
	a) Description			(b) Book value
	· ·· ·			· · · · · · · · · · · · · · · · · · ·
Table (Column (b) much a wal Form 2000, Part V, and (D)				
Total. (Column (b) must equal Form 990, Part X, col (B) li Part X Other Liabilities. See Form 990, Part				
1 (a) Description of liability	7, 1110 20.	(b) Amount		
Federal income taxes		······································		
ACCRUED PAYROLL AND COMPENSA	TED			
ABSENCES		145,434.	1	
ACCRUED RETIREMENT PLAN EXPE	NSES	73,649.		
ACCRUED OTHER		9,042.		
		· · · · · · · · · · · · · · · · · · ·		
Total. (Column (b) must equal Form 990, Part X, col (B) I	ine 25)	228,125.		

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 932053 02-01-10

	dule'D (Form 990) 2009 FRANK H. HISCOCK LEGAL AID	SOCIETY				527253	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Finan	cial S	Stater	nents		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1			3,202	<u>,623.</u>
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			3,132	<u>,979.</u>
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3			69	,644.
4	Net unrealized gains (losses) on investments		4				
5	Donated services and use of facilities		5				
6	Investment expenses		6				
7	Prior period adjustments		7				
8	Other (Describe in Part XIV.)		8				
9	Total adjustments (net) Add lines 4 through 8		9				0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		10			69	<u>,644.</u>
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Rever	nue p	er Re	turn		
1	Total revenue, gains, and other support per audited financial statements			L	1_	3,202	<u>,623.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains on investments	2a					
b	Donated services and use of facilities	2b					
С	Recoveries of prior year grants	2c					
d	Other (Describe in Part XIV.)	2d			}		
e	Add lines 2a through 2d		•		2e		0.
3	Subtract line 2e from line 1				3	3,202	,623.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV)	4b					
c	Add lines 4a and 4b				4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				5	3,202	,623.
Pa	t XIII Reconciliation of Expenses per Audited Financial Statement	ents With Expe	enses	per l	Retur		
1	Total expenses and losses per audited financial statements				1	3,132	<u>,979.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.						
а	Donated services and use of facilities	2a					
b	Prior year adjustments	2b					
С	Other losses	2c					
d	Other (Describe in Part XIV.)	2d					
е	Add lines 2a through 2d			L	2e		0.
3	Subtract line 2e from line 1				3	3,132	<u>,979.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV.)	4b					
С	Add lines 4a and 4b				4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)				5	3,132	<u>,979.</u>
Pa	rt XIV Supplemental Information						
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	i, lines 1a and 4, Pa	art IV, I	ınes 1b	and 2	b; Part V, line	4, Part
X, lın	e 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also comp	lete this part to pro	vide a	ny addi	tionali	information	

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Employer identification number Name of the organization 15-0527253 FRANK H. HISCOCK LEGAL AID SOCIETY FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: OUALITY LEGAL ASSISTANCE TO INDIVIDUALS AND FAMILIES IN NEED IN ONONDAGA COUNTY AND THE SURROUNDING REGION. FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE DRAFT FORM 990 IS RECIEVED BY THE ORGANIZATION FOR REVIEW BY MANAGEMENT AND THE BOARD AT THE SAME TIME THE ORGANIZATION IS PRESENTED WITH A DRAFT OF THEIR FINANCIAL STATEMENTS. FORM 990, PART VI, SECTION B, LINE 12C: THERE ARE TWO DIFFERENT CONFLICT OF INTEREST POLICIES. THERE IS A CLIENT CONFLICT OF INTEREST POLICY AND A SEPARATE BOARD CONFLICT OF INTEREST POLICY. THE BOARD CONFLICT OF INTEREST POLICY IS GIVEN TO THE MEMBER WHEN THEY JOIN THE BOARD. THE PRESIDENT/CEO AND ASSISTANT SECRETARY/TREASURER BOTH REVIEW THESE ANNUALLY. FORM 990, PART VI, SECTION B, LINE 15: THE COMPENSATION FOR THE ORGANIZATION'S PRESIDENT/CEO, OFFICERS, KEY EMPLOYEES, ETC. ARE INCLUDED IN THE ANNUAL BUDGET WITH STANDARD INCREASES. ANYTHING ABOVE A STANDARD ACROSS THE BOARD INCREASE WOULD BE INITIATED BY THE BOARD. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTERST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

PART XI, LINE 2C

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization	FRANK	н.	HISCOCK	LEGAL	AID SO	CIETY		Employer identification numbe 15-0527253	r
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FRANK H. HISCOCK LEGAL AID SOCIETY APPEALS STATISTICAL REPORT OF SERVICE December 2009

New Cases	Cases Carried Forward			220
COURT APPEALED FROM CIDY	New Cases		9	96
COURT APPEALED FROM	Closed Cases		19	125
COURT APPEALED FROM 1	Cases Pending			191
City		COMPOSITION OF CASE		
Defense 0	City County Family Supreme Town/Village		7 0 1 0	46 26 19 2
Other 0 31 Plea 4 29 Trial 5 29 VOP 0 2 SORA 0 3 Affirmed With Opinion Affirmed Without Opinion On 0 8 Affirmed Without Opinion Conviction Modified 0 0 Reversed and Dismissed 1 1 Reversed and Remanded 1 6 Sentence Modified 6 6 Total Cases Decided 17 94 Relief Granted 8 14 Dismissed 2 14 Relieved 0 13 Withdrawn 0 4 CASES FILED BRIEFS Appellate Division 3 75 County 0 1 County 0 1 No Merit Briefs 0 0 Leave Applications 5 60 Motions/Other Proceedings 7 8 Appellate Division 7 8		APPEALS CASE TYPE		
Affirmed With Opinion Affirmed Without Opinion Conviction Modified Reversed and Dismissed Reversed and Remanded Sentence Modified Sentence Modified Total Cases Decided Total Cases Decided Relief Granted Relief Granted Relief Granted Sentence Modified Relief Granted Relief Granted Relief Granted Relief Granted Relieved Relieved Relief Granted Relief Granted Relieved Relief Granted Relief Granted Relief Granted Relief Granted Relief Granted Relief Granted Relieved Relief Granted her Plea Trial VOP		0 4 5 0	31 29 29 2	
Affirmed Without Opinion Conviction Modified Reversed and Dismissed Reversed and Remanded Sentence Modified Total Cases Decided Relief Granted Relief Granted Relief Granted Relieved Dismissed Relieved Withdrawn CASES FILED BRIEFS Appellate Division County Count of Appeals Administrative No Merit Briefs Leave Applications Motions/Other Proceedings Appellate Division ORAL ARGUMENTS Appellate Division ORAL ARGUMENTS Appellate Division ORAL ARGUMENTS Appellate Division ORAL ARGUMENTS Appellate Division ORAL ARGUMENTS Appellate Division ORAL ARGUMENTS Appellate Division ORAL ARGUMENTS Appellate Division ORAL ARGUMENTS Appellate Division ORAL ARGUMENTS Appellate Division ORAL ARGUMENTS		DISPOSITION OF CLOSED CAS	<u>SES</u>	
Relief Granted 8 14 Dismissed 2 14 Relieved 0 13 Withdrawn 0 4 CASES FILED BRIEFS Appellate Division 3 75 County 0 1 Court of Appeals 0 1 Administrative 0 0 0 No Merit Briefs 0 0 Leave Applications 5 60 Motions/Other Proceedings 1 6 Appellate Division 7 8 County Court 0 0 0 County Court 0 0 0 County Court 0 0 0 County Court 0 0 0 County Court 0 0 0 County Court 0 0 0	Affirmed Without Opinion Conviction Modified Reversed and Dismissed Reversed and Remanded		0 0 1 1	8 0 1 6
Dismissed 2	Total Cases Decided		17	94
Relieved 0 13 Withdrawn 0 4 CASES FILED BRIEFS Appellate Division 3 75 County 0 1 Court of Appeals 0 1 Administrative 0 0 0 No Merit Briefs 0 0 0 Leave Applications 5 60 Motions/Other Proceedings 1 6 Appellate Division 7 8 County Court 0 0 0	Relief Granted		8	14
BRIEFS Appellate Division 3 75 County 0 1 Court of Appeals 0 1 Administrative 0 0 No Merit Briefs 0 0 Leave Applications 5 60 Motions/Other Proceedings 1 6 ORAL ARGUMENTS Appellate Division 7 8 County Court 0 0	Relieved		0	13
Appellate Division 3 75		CASES FILED		
Appellate Division 7 8 County Court 0 0	Appellate Division County Court of Appeals Administrative No Merit Briefs Leave Applications		0 0 0 0 5	1 1 0 0 60
• •	County Court	<u>ORAL ARGUMENTS</u>	0	0

FRANK H. HISCOCK LEGAL AID SOCIETY CANCER LEGAL ADVOCACY SERVICES PROJECT (CLASP) December 2009

	<u>MONTH</u>	<u>YEAR</u>
Cases Carried Forward:		23
New Cases:	1	28
Cases Closed:	3	36
Cases Pending:		15
SERVICES PROVIDED	_	
Administrative Agency Decision	0	2
Advice/Brief Service/Referral	0	18
Brief Service	0	8
Advice	0	9
Referral	0	1
Court Decision	1 2	1
Negotiated Settlement With Litigation	0	0
Negotiated Settlement Without Litigation	0	9
Other	V	,
COURT APPEARANCES	^	
City	0	3
County	0	0
Family	2	4
Federal	0	0
Immigration	0 0	0
Justice	0	2
Supreme	0	2
Unemployment Insurance Hearings	V	2
LEGAL PROBLEM		
Consumer/Finance	0	1
Bankruptcy/Debtor Relief	0	0
Divorce/Separation/Annulment	0	2
Divorce Uncontested	0	2
Divorce Contested	0	0
Divorce Defense	0	0
Separation Agreement	0	0
Education	0	0
Employment	0	t t

December 2009 Closed Cases (cont'd)

Closed Cases (contra)	MONTH	YEAR
Family	3	8
Adoption	0	0
Custody/Visitation	3	3
Guardianship/Conservatorship	0	3
Name Change	ŏ	0
Parental Rights Termination	Ŏ	Ö
Paternity	Ŏ	Ŏ
Domestic Violence	Ö	Ō
Support	0	1
Other Family	0	1
Neglect/Abuse	0	0
Health	0	4
Housing	0	8
Unemployment Insurance Benefits	0	2
Individual Rights	0	1
Immigration	0	0
Prisoners' Rights	0	0
Juvenile	0	0
Miscellaneous	0	9
License (Auto & Others)	0	0
Torts	0	0
Other Miscellaneous	0	9
SOURCE		
Court	0	0
Employment	0	1
Jail/OCCF	0	0
JOBSPlus	0	0
Legal	0	11
LSCNY	1	7
OCBA	0	0
Other	0	4
Other Client	1	1
Other Domestic Violence Service	0	0
Other Human Services Agency	0	1
Phone Book	0	0
Previously Served	1	3
Publicity	0	0
Referred by Friend/Relative	0	2
Social	0	6
Vera House	0	0
Volunteer Lawyers Project	0	0
Welfare to Work	U	U

December 2009 Closed Cases (cont'd)

		<u>MONTH</u>	YEAR
AGE GROUP			
16 – 18		0	0
19 – 29		0	0
30 – 64		3	20
65+		0	4
unknown		0	12
RACE			
African American		0	1
Asian		0	0
Latino		0	0
Native American		0	0
Other		0	0
White		3	16
unknown		0	19
CHARACTER OF CASES			
Female		3	26
Male		0	10
Public Assistance		0	2
City Residents		0	19
Domestic Violence		0	0
Total Persons Benefited		7	64
Matrimonial Actions Pending At End o	f Period		
Divorce Uncontested	0		
_			
Divorce Contested	0 0		
Divorce Defense	0		
Separation Agreement	U		
Total Interviews		1	20

FRANK H. HISCOCK LEGAL AID SOCIETY CIVIL STATISTICAL REPORT OF SERVICE December 2009

	MONTH	YEAR
Cases Carried Forward:	_	499
New Cases:	113	1,813
Cases Closed:	156	1,696
Cases Pending:		616
SERVICES PROVIDED		
Administrative Agency Decision	18	130
Advice/Brief Service/Referral	67	976
Brief Service	19	291
Advice	38	490
Referral	10	195
Court Decision	20	197 283
Negotiated Settlement With Litigation	39 3	203
Negotiated Settlement Without Litigation	9	90
Other	,	70
COURT APPEARANCES		
City	8	124
County	0	0
Family	25	503
Federal	0	0
Immigration	0	3
Justice	0	0
Supreme	34	374
Unemployment Insurance Hearings	19	144
LEGAL PROBLEM		
Consumer/Finance	1	1
Bankruptcy/Debtor Relief	0	0
Divorce/Separation/Annulment	52	492
Divorce Uncontested	38	413
Divorce Contested	5	30
Divorce Defense	6	35
Separation Agreement	3	14
Education	0	1
Employment	0	2

December 2009 Closed Cases (cont'd)

,	MONTH	<u>YEAR</u>
Family	33	444
Adoption	0	0
Custody/Visitation	13	161
Guardianship/Conservatorship	0	3
Name Change	0	2
Parental Rights Termination	0	0
Paternity	1	10
Order of Protection	5	55
Support	11	207
Other Family	3	6
Neglect/Abuse	0	0
Health	2	4
Housing	24	357
Unemployment Insurance Benefits	29	223
Individual Rights	15	140
Immigration	12	100
Prisoners' Rights	3	38
Juvenile .	0	0
Miscellaneous	3 2	32
License (Auto & Others)		19
Torts	0	1
Other Miscellaneous	1	12
SOURCE		
Court	2	15
Employment	11	84
Jail/OCCF	3	11
JOBSPlus	0	0
Legal	14	110
LSCNY	1	13
OCBA	0	0
Other	13	281
Other Client	3	12
Other Domestic Violence Service	0	0
Other Human Services Agency	0	5
Parent Success Initiative	7	119
Phone Book	! 60	26 607
Previously Served	58 6	51
Publicity Prince 100 stations	17	180
Referred by Friend/Relative	17	118
Social Van Hause	5	61
Vera House	0	3
Volunteer Lawyers Project	U	3

December 2009 Closed Cases (cont'd)

	MONTH	YEAR
AGE GROUP		
16 – 18	0	6
19 – 29	32	381
30 – 64	114	1,228
65 +	0	22
unknown	10	59
RACE		
African American	44	572
Asian	1	15
Latino	11	112
Native American	0	7
Other	10	21
White	86	799
unknown	4	170
CHARACTER OF CASES		
Female	103	1,064
Male	53	632
Public Assistance	26	221
City Residents	97	1,122
Domestic Violence	45	374
Total Persons Benefited	304	3,414
Matrimonial Actions Pending At End of Period		
Divorce Uncontested 260		
Divorce Contested 18		
Divorce Defense 30		
Separation Agreement 1		
Total Interviews	156	2,314

FRANK H. HISCOCK LEGAL AID SOCIETY COMMUNITY DEVELOPMENT STATISTICAL REPORT OF SERVICE December 2009

	<u>MONTH</u>	YEAR .
Cases Carried Forward:		. 0
		-
New Cases:	. 5	84
Cases Closed:	5	81
Cases Pending:		3
AGE GROUP		
16 – 18	0	0
19 – 29	1 4	27 50
30 – 64 65+	0	2
CHARACTER OF CASES	3	37
Public Assistance Head of Household	4	48
Head of Household	•	
GENDER	1	12
Male, Single	1 0	12 1
Male, Separated	0	4
Male, Married Female, Single	4	47
Female, Separated	0	3
Female, Married	0	13
RACE		
African American	5	46
Asian	0	0
Latino	0	1 0
Native American	Ö	Ŏ
Other White	0	33
SOURCE OF CASE	4	69
Other Other Agency Referral	i	11
Urban League Postcard	0	0
Urban League Referral	0	0
COURT APPEARANCE	2	42
Calendar	0	3
Hearings Trials	ŏ	0
Order Granted	0	4

December 2009 Closed cases (cont'd)

Remained in/Restored to Possession

Rent Abatement

Repairs Ordered

TYPE OF CASE Eviction		
Non-Eviction	0	7
Eviction	5	73
<u>Grounds</u>		
Holdover	0	6
Nonpayment	4	55
Other	1	12
<u>Issues</u>		
Substandard Housing	5	77
Illegal Lockout	0	6
DISPOSITION		
Favorable	0	18

0

1

0

20

20

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FRANK H. HISCOCK LEGAL AID SOCIETY DOMESTIC VIOLENCE PROJECT REPORT OF SERVICE December 2009

	MONTH	YEAR
Cases Carried Forward:		110
New Cases:	19	320
Cases Closed:	29	279
Cases Pending:		151
SERVICES PROVIDED		
Administrative Agency Decision	1	5
Advice/Brief Service/Referral	3	88
Brief Service	1	12
Advice	2	68
Referral	0	8
Court Decision	8	54
Negotiated Settlement With Litigation	12	92
Negotiated Settlement Without Litigation	1	4
Other	4	36
COURT APPEARANCES		
City	0	2
County	0	0
Family	19	240
Federal	0	0
Immigration	0	1
Justice	0	0
Supreme	17	204
Unemployment Insurance Hearings	0	0
LEGAL PROBLEM	•	
Consumer/Finance	0	0
Bankruptcy/Debtor Relief	0	0
Divorce/Separation/Annulment	14	123
Divorce Uncontested	9	97
Divorce Contested	3 2	13
Divorce Defense		11
Separation Agreement	0	2
Education	0	0
Employment	0	0

December 2009 Closed Cases (cont'd)

Family	13	123
Adoption	0	0
Custody/Visitation	5	49
Guardianship/Conservatorship	0	0
Name Change	0	0
Parental Rights Termination	0	0
Paternity	0	0
Order of Protection	4	45
Support	1	25
Neglect/Abuse	0	0
Other Family	3	4
Health	0	0
Housing	0	1
Unemployment Insurance Benefits	0	0
Individual Rights	2	30
Immigration	2	30
Prisoners' Rights	0	0
Juvenile	0	0
Miscellaneous	0	1
License (Auto & Others)	0	0
Torts	0	0
Other Miscellaneous	0	1
SOURCE OF CASE		
Court	0	8
Employment	. 0	0
Jail/OCCF	0	0
Legal	2	21
LSCNY	0	0
OCBA	0	0
Other	1	22
Other Client	1	2
Other Domestic Violence Service Provider	0	0
Other Human Services Agency	0	0
Phone Book	0	3
Previously Served	16	129
Publicity	0	1
Referred by Friend/Relative	3	31
Social	1	6
Vera House	5	56
Volunteer Lawyers Project	0	0

AGE GROUP		
16 – 18	0	3
19 – 29	10	78
30 – 64	19	170
65+	0	1
RACIAL/ETHNIC GROUP		
African American	2	32
Asian	0	2
Latino	3	37
Native American	0	0
Other	0	2
White	22	135
unknown	2	41
CHARACTER OF CASES		
Female	29	268
Male	0	11
Public Assistance	2	23
City Residents	14	150
Domestic Violence	29	279
Total Persons Benefited	56	601
Matrimonial Actions Pending at End of Period		
Divorce Uncontested 89		
Divorce Contested 8		
Divorce Defense 7		
Separation Agreement 0		
Total Interviews	38	502

FRANK H. HISCOCK LEGAL AID SOCIETY EXTRADITION PROCEEDINGS STATISTICAL REPORT OF SERVICE December 2009

	<u>Month</u>	<u>Year</u>
Cases Carried Forward		13
New Cases:	6	48
Cases Closed:	1	47
Cases Pending:		14
COURT APPEARANCES		
First Appearance of Counsel	5	35
Reports	6	72
Return of Habeas Corpus Petition	0	0
Hearings	0	0
Dispositions	0	2
Other	2	4
CLOSED CASE DATA		
RELEASE STATUS		
Released, ROR	0	7
Released, Bail	0	0
Released to Pre-Trial Release	0	0
Not Released, Bail Set	0	0
Not Released, No Bail Set	1	40
PRE-DISPOSITION CASE STATUS		
Extradition Proceedings Waived	1	36
Extradition Proceedings Not Waived	0	11
Governor's Warrant Obtained Habeas Corpus Petition Filed	0 0	1 0
·	U	J
DISPOSITIONS		
Client removed by demanding state	0	30
Client voluntarily surrendered to demanding state	0	0
Demanding state failed to take custody of defendant	0	3
Demanding state withdrew warrant	0	3
Demanding state withdrew extradition request	0	3
Client sentenced to state incarceration	0	1
Habeas Corpus relief granted	0	0
Bench Warrant	0	0
Other	1	4
Relieved:	0	3
Conflict of Interest Not eligible	0 0	1 0
Retained Attorney	0	2
Other	0	0

December 2009 Extradition Statistical Report cont'd

GENDER Female Male	0 1	3 44
AGE GROUPS		
16 – 18	0	0
19 – 29	0	20
30 – 64	1	26
65+	0	0
RACE		
African American	0	23
Asian	0	1
Latino	0	2
Native American	1	2
Other	0	1
White	0	16

FRANK H. HISCOCK LEGAL AID SOCIETY FAMILY COURT STATISTICAL REPORT OF SERVICE December 2009

	<u>MONTH</u>	YEAR
Cases Carried Forward		870
New Cases	128	1,989
New Unduplicated Docket Numbers	164	2,756
New Unduplicated Family File Numbers	117	1,525
Cases Closed	163	2,056
Unduplicated Docket Numbers Closed	168	2,859
Unduplicated Family File Numbers Closed	119	1,582
Cases Pending		803
Unduplicated Docket Numbers Pending		1,192
Unduplicated Family File Numbers Pending		636
COURT APPEARANCES		
First Appearance of Attorney	34	451
Preliminary Conference	0	115
Pre-trial Conference	64	756
Continuance/Report	130	1,839
Compliance Conference Motions	0 1	0 31
Hearing	21	309
Order to Show Cause	0	0
Fact Finding Hearing	0	0
Dispositional Hearing	0	1
Permanency Planning Hearing	30	359
Trial	38	634
Decision Disposition/Sentencing	0 5	3 52
Disposition contending	,	J2
CLOSED CASE DATA		
NATURE OF CASE		
Abuse	0	20
Adoption	1	9
Adoption Surrender	1	14
Approval of Foster Care Placement	1	6
Custody/Visitation Family Offense	61 32	795 220
Family Offense Neglect	32 21	330 291
Paternity	0	16
Support Violation	45	552
Termination of Parental Rights	0	21
Other	1	2

December 2009 Family Court Statistical Report cont'd	<u>MONTH</u>	<u>YEAR</u>
LEVEL OF SERVICES PROVIDED		
Court Decision	18	291
Negotiated Settlement	83 62	963 802
Other	~2	
DISPOSITION		
CUSTODY/VISITATION		
Obtained or maintained custody of children	20	269
Obtained or preserved right to visitation	12 0	150 3
Relief Denied	U	3
NEGLECT/ABUSE		
Adjournment in Contemplation of Dismissal	0	31
No Finding of Neglect/Abuse	0	3
Finding of Neglect/Abuse Children Removed (Fester Core)	8 2	89 6
Child(ren) Removed (Foster Care) Child(ren) Removed (Other)	0	17
Child(ren) Not Removed	6	66
Extension of Foster Care Placement Granted	Ŏ	1
Extension of Non-Foster Care Placement Granted	0	5
Extension of Supervision Granted—Child(ren) Returned to Parent	3	21
Extension of Supervision Denied	0	1
Order Vacated	1	11
SUPPORT VIOLATION		
No Finding of Violation	8	23
Non-willful Finding	9	160
Willful finding	13	168
Probation	5	65
Incarceration	1	39
Conditional Discharge	0	7
Other	7	57
FAMILY OFFENSE		
Order of Protection Granted	10	113
Order of Protection Denied	1	4
PATERNITY		
No Order of Filiation	0	0
Order of Filiation With Support Order	0	1
Order of Filiation Without Support Order	0	3

December 2009 Family Court Statistical Report cont'

•	<u>MONTH</u>	YEAR
TERMINATION OF PARENTAL RIGHTS Termination of Parental Rights Granted with Contact Termination of Parental Rights Granted	0	0 5
Termination of Parental Rights Denied	0	0
ADOPTION		
Adoption Granted	0	0
Adoption Denied	0	1
ADOPTION SURRENDER		
Child Surrendered	0	8
Child Not Surrendered	0	0
Conditional Surrender	1	10
MISCELLANEOUS		
Petition Withdrawn by Client	18	139
Petition Withdrawn by Opposing Party	6	127
Petition Dismissed for Failure to Prosecute	5	67
Petition Dismissed as Insufficient	1	26
Petition Dismissed, Other	6	53
Bench Warrant	0	0
Relieved	35	456
Conflict of Interest	9	202
Not Eligible Other	8 3	79 51
Non-cooperation/No Show	3 15	122
Transferred to Other County	0	2
Other	6	103
Other	O	103
GENDER		
Female	62	1,016
Male	75	877
AGE GROUP	^	
16 – 20 21 – 29	0	10
30 – 64	54 95	701 1.076
65+	93 1	1,076 2
	•	2
RACE African American	36	2.49
American American Asian	26	347
Latino	0 3	4
Native American	0	36 4
White	36	466
Other	2	18
- -	~	10

FRANK H. HISCOCK LEGAL AID SOCIETY FORECLOSURE PREVENTION PROJECT REPORT OF SERVICE December 2009

	MONTH	<u>YEAR</u>
Cases Carried Forward:		0
New Cases:	3	36
Cases Closed:	4	13
Cases Pending:		23
SERVICES PROVIDED		
Administrative Agency Decision	0	0
Advice/Brief Service/Referral	3	, 10
Brief Service	0	1
Advice	3	9
Referral	0	0
Court Decision	0	0
Negotiated Settlement With Litigation	0	2
Negotiated Settlement Without Litigation	0	0
Other	1	1
COURT APPEARANCES		
City	0	1
County	0	0
Family	0	0
Federal	0	0
Immigration	0	0
Justice	0	0
Supreme	2	.13
Unemployment Insurance Hearings	0	0
LEGAL PROBLEM		
Bankruptcy	0	0
Homeownership/Real Property	4	13
Miscellaneous	Õ	0
License (Auto & Others)	Ö	Ö
Torts	ő	0
Other Miscellaneous	ő	0
	•	•

1 1		
December 2009		
Closed Cases (cont'd)	. (O) WILL	SZEAD
	<u>MONTH</u>	<u>YEAR</u>
COVIDE		
SOURCE Court	0	0
Employment	0	1
Jail/OCCF	0	0
JOBSPlus	0	0
Legal	0	1
LSCNY	0	0
OCBA	0	0
Other	1	1
Other Client	0	0
Other Domestic Violence Service	0	0
Other Human Services Agency	0	0
Parent Success Initiative	0	0
Phone Book	0	0
Previously Served	1	3
Publicity	1	3
Referred by Friend/Relative	1	1
Social	1	3
Vera House	0	0
Volunteer Lawyers Project	0	0
4.67.67.67.77		
AGE GROUP	^	^
16 – 18	0	0
19 – 29	0	0
30 – 64	2	10
65 +	0 2	0
unknown	2	3
RACE		
African American	0	5
Asian	0	0
Latino	0	0
Native American	0	0
Other	0	0
White	4	6
unknown	0	2
CHADACTED OF CASES		
CHARACTER OF CASES Female	2	7
Male	2	6
Public Assistance	0	3
	•	
City Residents	1	7
Domestic Violence	0	0
Total Persons Benefited	6	28
		•

Total Interviews

FRANK H. HISCOCK LEGAL AID SOCIETY HOMELESSNESS PREVENTION AND RAPID RE-HOUSING REPORT OF SERVICE December 2009

	<u>MONTH</u>	<u>YEAR</u>
Cases Carried Forward:		0
New Cases:	0	0
Cases Closed:	0	0
Cases Pending:		0
SERVICES PROVIDED		
Administrative Agency Decision	0	0
Advice/Brief Service/Referral	0	0
Brief Service	0	0
Advice	0	0
Referral	0	0
Court Decision	0	0
Negotiated Settlement With Litigation	0	0
Negotiated Settlement Without Litigation	0	0
Other	0	0
COURT APPEARANCES		
City	0	0
County	0	0
Family	0	0
Federal	0	0
Immigration	0	0
Justice	0	0
Supreme	0	0
Unemployment Insurance Hearings	0	0
LEGAL PROBLEM		
Bankruptcy	0	0
Homeownership/Real Property	0	0
Miscellaneous	0	0
License (Auto & Others)	Ŏ	0
Torts	ŏ	0
Other Miscellaneous	Ö	0
Cuter Miscontanous	· ·	v
SOURCE		
Social (DSS)		
	0	0

December 2009

Closed Cases (cont'd)		
,	<u>MONTH</u>	<u>YEAR</u>
AGE GROUP		
16 – 18	0	0
19 – 29	0	0
30 – 64	0	0
65 +	0	0
unknown	0	0
RACE		
African American	0	0
Asian	0	0
Latino	0	0
Native American	0	0
Other	0	0
White	0	0
unknown	0	0
CHARACTER OF CASES		
Female	0	0
Male	0	0
Public Assistance	0	0
City Residents	0	0
Domestic Violence	0	0
Total Persons Benefited	0	0
Total Interviews	0	0
	•	J

FRANK H. HISCOCK LEGAL AID SOCIETY IMMIGRATION STATISTICAL REPORT OF SERVICE December 2009

Cases Carried Forward:	<u>MONTH</u>	<u>YEAR</u> 38
New Cases:	10	85
Cases Closed:	10	70
Cases Pending:		53
SERVICES PROVIDED		
Administrative Agency Decision	1	11
Advice/Brief Service/Referral	8	54
Brief Service	0	1
Advice	8	50
Referral	0	3
Court Decision	0	0
Negotiated Settlement With Litigation	0,	0
Negotiated Settlement Without Litigation	0	0
Other	1	5
COURT APPEARANCES		
Federal	0	0
Immigration	0	4
SOURCE		
Court	0	0
Employment	0	0
Jail/OCCF	0	0
JOBSPlus	0	0
Legal	0	11
LSCNY	0	0
OCBA	0	0
Other	I	6
Other Client	0	0
Other Domestic Violence Service	0	0
Other Human Services Agency	0	1
Parent Success Initiative	0	0
Phone Book	0	0
Previously Served	0	6
Publicity Professed by Friend/Polesing	0	2
Referred by Friend/Relative	4	12
Social Vera House	5	32
	0	0
Volunteer Lawyers Project	0	0

	MONTH	<u>YEAR</u>
AGE GROUP		
16 – 18	0	2
19 – 29	2	14
30 – 64	6	48
65 +	0	3
RACE		
African American	2	20
Asian	1	6
Latino	5	31
Native American	0	0
Other	1	2 9
White	1	9
CHARACTER OF CASES		
Female	4	30
Male	6	40
Public Assistance	3	9
City Residents	7	42
Domestic Violence	0	3
Total Persons Benefited	21	157
Total Interviews	16	122

FRANK H. HISCOCK LEGAL AID SOCIETY INTERNATIONAL VICTIMS PROJECT REPORT OF SERVICE December 2009

	MONTH	YEAR	GRANT PERIOD 10/1/08 – 9/30/10
Cases Carried Forward:		7	0
¥ = 2 · · · · · ·	_		
New Cases:	5	59	66
Cases Closed:	5	36	36
Cases Pending:			30
SERVICES PROVIDED			
Administrative Agency Decision	1	3	3
Advice/Brief Service/Referral	1	18	18
Brief Service	0	5	5
Advice	1	11	11
Referral	0	2	2
Court Decision	0	2	2
Negotiated Settlement With Litigation	3	3	3
Negotiated Settlement Without Litigation	0	0	0
Other	0	10	10
COURT APPEARANCES			
City	0	0	0
County	0	0	0
Family	2	25	26
Federal	0	0	0
Immigration	0	1	1
Justice	0	0	0
Supreme	0	3	3
Unemployment Insurance Hearings	0	0	0
LEGAL PROBLEM			
Consumer/Finance	0	0	0
Bankruptcy/Debtor Relief	0	0	0
Divorce/Separation/Annulment	1	1	1
Divorce Uncontested	1	1	1
Divorce Contested	0	0	0
Divorce Defense	0	0	0
Separation Agreement	0	0	0
Education	0	0	0
Employment	0	0	0

(,	MONTH	<u>YEAR</u>	GRANT PERIOD 10/1/08 – 9/30/10
Family	2	6	6
Adoption	0	1	1
Custody/Visitation	0	2	2
Guardianship/Conservatorship	0	0	0
Name Change	0	0	0
Parental Rights Termination	0	0	0
Paternity	0	0	0
Domestic Violence	2	2	2
Support	0	0	0
Neglect/Abuse	0	0	0
Other Family	0	1	1
Health	0	0	0
Housing	0	0	0
Unemployment Insurance Benefits	0	0	0
Individual Rights	2	28	28
Immigration	2	28	28
Prisoners' Rights	0	0	0
Juvenile	0	0	0
Miscellaneous	0	1	1
License (Auto & Others)	0	0	0
Torts	0	0	0
Other Miscellaneous	0	1	1
SOURCE OF CASE			
Court	0	0	0
Employment	0	0	0
Jail/OCCF	0	0	0
Legal	0	0	0
LSCNY	0	0	0
OCBA	0	0	0
Other	0	0	0
Other Client	0	0	0
Other Domestic Violence Service Provider	0	0	0
Other Human Services Agency	0	0	0
Phone Book	0	0	0
Previously Served	2	4	4
Publicity	0	0	0
Referred by Friend/Relative	0	0	0
Social	1	1	1
Vera House	2	31	31
Volunteer Lawyers Project	0	0	0

	MONTH	YEAR	GRANT PERIOD 10/1/08 – 9/30/10
AGE GROUP			
16 – 18	0	1	1
19 – 29	3	18	18
30 – 64	2	16	16
65+	0	0	0
unknown	0	1	1
RACIAL/ETHNIC GROUP			
African American	0	5	5
Asian	0	1	1
Latino	2	24	24
Native American	0	0	0
Other	0	0	0
White	3	4	4
unknown	0	2	2
CHARACTER OF CASES			
Female	5	28	28
Male	0	8	8
Public Assistance	0	0	0
City Residents	4	31	31
Domestic Violence	5	36	36
Total Persons Benefited	7	50	50
Matrimonial Actions Pending at End of Period			
Divorce Uncontested 5			
Divorce Contested 0			
Divorce Defense 0			
Separation Agreement 0			
Total Interviews	8	51	63

FRANK H. HISCOCK LEGAL AID SOCIETY INDIGENT CIVIL LEGAL ASSISTANCE PROGRAM STATISTICAL REPORT OF SERVICE FOR OCTOBER 1, 2009 THROUGH DECEMBER 31, 2009

	4th Quarter	Year
Cases Carried Forward:		14
New Cases:	34	148
Cases Closed:	41	140
Cases Pending:		22
SERVICES PROVIDED		
Advice/Brief Service/Referral	30	98
Advice	26	73 7
Brief Service Referral	1 3	18
Negotiated Settlement – With Litigation	7	21
Negotiated Settlement - Without Litigation	ó	1
Administrative Agency Decision	3	11
Court Decision	0	7
Other	1	2
COURT ARREAD ANCES		
COURT APPEARANCES Supreme	16	48
City	5	21
Family	0	1
County	0	0
Unemployment Insurance Hearings	6	17
LEGAL PROBLEM		
Consumer/Finance	0	0
Bankruptcy/Debtor Relief	0	0
Divorce/Separation/Annulment	12	38
Uncontested	5	15
Contested	0	2
Defense	5	14
Separation Agreement	2	7
Education	0	0
Employment	0	0
Family	0	3
Adoption	0	0
Custody/Visitation	0 0	1 0
Guardianship/Conservatorship Name Change	0	0
Parental Rights Termination (Neglect/Abuse)	0	0
Paternity	Ŏ	Ŏ
Spouse Abuse (Order of Protection)	Ŏ	Ŏ
Support	0	2
Other	0	0
Juvenile	0	0
Health	0	0

October 1, 2009 - December 31, 2009 Closed Cases (cont'd)

Housing		14	54
	nemployment Insurance Benefits)	15	45
Individual Rights	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0	0
Miscellaneous		Ō	0
License (Auto, etc.)		Ö	0
Torts		Ö	0
Other (Traffic, Genera	al Criminal)	Ŏ	0
Other (Traine, Cener		•	-
SOURCE			
Referred by Friend/Rela	tive	4	20
Phone Book		2	2
Legal		5	14
Employment		5	10
Other Client		0	0
Previously Served		9 '	40
Publicity		1	1
Social		4	9
Volunteer Lawyers Proje	ect	0	1
Other		11	43
AGE GROUP			
16 – 18		0	0
19 – 18		9	22
19 – 29 30 – 64		32	113
65+		0	2
Unknown		0	3
Ulikilowii		v	3
RACE			
White		21	77
Black		12	50
Latino		2	5
Native American		0	Ö
Asian		Ö	i
Other		4	4
Ouloi		•	•
CHARACTER OF CA	<u>SES</u>	20	60
Male		20	52
Female		21	88
Public Assistance		9	18
City Residents		26	90
Domestic Violence		5	9
TOTAL PERSONS BE	NEFITED	91	334
			- - ·
MATRIMONIAL ACT	TIONS PENDING AT END OF	PERIOD	
Contested: 4	Separation Agreement:	0	
Uncontested: 8	Divorce Defense:	6	
Jiminoted, U	2110100 20101100	•	
TOTAL INTERVIEWS		40	246

FRANK H. HISCOCK LEGAL AID SOCIETY PARENT SUCCESS INITIATIVE (PSI) December 2009

	MONTH	YEAR
Cases Carried Forward:		59
New Cases:	1	97
Cases Closed:	8	121
Cases Pending:		35
SERVICES PROVIDED		
Administrative Agency Decision	0	0
Advice/Brief Service/Referral	3	56
Brief Service	2	28
Advice	1	11
Referral	0	17
Court Decision	0	13
Negotiated Settlement With Litigation	3	36
Negotiated Settlement Without Litigation	1	1
Other	1	15
COURT APPEARANCES		
City	0	1
County	0	0
Family	0	76
Federal	0	0
Immigration	0	0
Justice	0	0
Supreme	0	2
Unemployment Insurance Hearings	0	0
LEGAL PROBLEM		
Consumer/Finance	0	0
Bankruptcy/Debtor Relief	0	0
Divorce/Separation/Annulment	0	1
Divorce Uncontested	0	0
Divorce Contested	0	0
Divorce Defense	0	0
Separation Agreement	0	1
Education	0	0
Employment	0	0

Closed Cases (contd)	<u>MONTH</u>	<u>YEAR</u>
Family	6	101
Adoption	0	0
Custody/Visitation	0	6
Guardianship/Conservatorship	0	0
Name Change	0	0
Parental Rights Termination	0	0
Paternity	0	4
Domestic Violence	0	0
Support	6	91
Other Family	0	0
Neglect/Abuse	0	0
Health	0	0
Housing	0	1
Unemployment Insurance Benefits	0	0
Individual Rights	0	0
Immigration	0	0
Prisoners' Rights	0	0
Juvenile	0	0
Miscellaneous	2	18
License (Auto & Others)	2	18
Torts	0	0
Other Miscellaneous	0	0
AGE GROUP		
16-18	0	0
19 – 29	2	23
30 – 64	6	73
65+	0	0
RACE		61
African American	6	61
Asian	0	1 2
Latino	1	0
Native American Other	0	1
White	Ŏ	19
Unknown	1	37
Ciriowii	•	3 ,
CHARACTER OF CASES Female	0	11
Male	8	110
	•	
Public Assistance	l -	4
City Residents	8	106
Domestic Violence	0	0
Total Persons Benefited	7	105

Closed Cases (cont'd)		<u>MONTH</u>	YEAR
Matrimonial Actions Pending	At End of Period		
Divorce Uncontested	2		
Divorce Contested	0		
Divorce Defense	0		
Separation Agreement	0		
Total Interviews		3	96

FRANK H. HISCOCK LEGAL AID SOCIETY PAROLE STATISTICAL REPORT OF SERVICE December 2009

Cases Carried Forward:	<u>Month</u>	<u>Year</u> 96
New Cases:	37	538
Cases Closed:	50	546
	50	88
Cases Pending:		88
COURT APPEARANCES		
Preliminary Revocation Hearing	0	0
Final Revocation Hearing	86	830
Habeas Corpus	0	0
Article 78 Proceeding	0 0	0
Other	U	U
LEVEL OF SERVICES PROVIDED		
Advice and Negotiations With Parole Division	12	136
Preliminary Revocation Hearing Held Final Revocation Hearing/Negotiated Settlement	0 36	0 389
Final Revocation Hearing/Contested	2	21
Tillar (Groads) (Galling) Galliage		
DISPOSITIONS	10	80
Parole Revocation Proceeding Withdrawn Client Released to Willard	7	85
Client Restored to Parole	5	44
Client Held	26	280
Relieved:	2	57
Conflict of Interest	2 0	28 29
Other Attorney	U	29
OTHER		
Referred to CCA	0	15
GENDER		
Female	3	34
Male	47	512
AGE GROUPS		
16 - 20	1	4
21 – 29	15 34	212 316
30 - 64 65+	0	1
RACE	14	166
White African American	30	289
Latino	6	37
Native American	0	3
Asian	0	1
Other	0	0

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

990

OMB No 1545-0172

Attachment Sequence No 67

▶ See separate instructions. Name(s) shown on return

► Attach to your tax return. Business or activity to which this form relates

Identifying number

FRANK	H. HISCOCK LEGAL	AID SOC	IETY	FORM	1 990 I	PAGE 10		15-0527253
Part I	Election To Expense Certain Property	Under Section 17	9 Note: If you I	nave any liste	ed property,	complete Part	V before y	ou complete Part I.
	im amount. See the instructions f						1	250,000.
	ost of section 179 property placed	2						
	old cost of section 179 property b	3	800,000.					
	ion in limitation. Subtract line 3 fro			D-			4	
	tation for tax year Subtract line 4 from line 1				nstructions		5	
6	(a) Description of prop			(b) Cost (busines		(c) Elected	cost	
•								
			Ī.					
7 Listed r	property Enter the amount from I	ne 29			7			
•	ected cost of section 179 propert		ın column (c),	lines 6 and 7	,		8	
	ve deduction. Enter the smaller o		, , ,				9	
-	er of disallowed deduction from I		008 Form 4562				10	
-	ss income limitation. Enter the sm) or line 5		11	
	179 expense deduction. Add line		•		-		12	
	ver of disallowed deduction to 201				▶ 13			-
	ot use Part II or Part III below for I							
Part II	Special Depreciation Allowand	ce and Other De	epreciation (D	o not includ	e listed prop	perty)		
14 Special	depreciation allowance for qualif	ed property (oth	er than listed p	roperty) pla	ced in service	ce during		
the tax	·						14	
	y subject to section 168(f)(1) elec	tion					15	
•	epreciation (including ACRS)						16	23,765.
Part III	MACRS Depreciation (Do not	include listed pr	operty.) (See ır	structions)				
				ion A		-		
	S deductions for assets placed in	service in tax ye	Sect	ion A			17	2,387.
17 MACRS	S deductions for assets placed in	•	Sect ars beginning	ion A before 2009	unts, check here	>	17	2,387.
17 MACRS		e during the tax year	Sect ars beginning into one or more get	ion A before 2009 neral asset accor				
17 MACRS	6 deductions for assets placed in electing to group any assets placed in service	e during the tax year	Sect ars beginning into one or more get	before 2009 meral asset accor Tax Year U		eneral Deprecia		
17 MACRS	S deductions for assets placed in electing to group any assets placed in service Section B - Assets F	Placed in Servic (b) Month and year placed	Sect ears beginning into one or more get e During 2009 (c) Basis for de (business/inve	before 2009 meral asset accor Tax Year U	sing the Ge	eneral Deprecia	ation Syste	em
17 MACRS 18 If you are	S deductions for assets placed in electing to group any assets placed in service Section B - Assets P (a) Classification of property	Placed in Servic (b) Month and year placed	Sect ears beginning into one or more get e During 2009 (c) Basis for de (business/inve	before 2009 meral asset accor Tax Year U	sing the Ge	eneral Deprecia	ation Syste	em
17 MACRS 18 If you are 19a 3-you b 5-you	S deductions for assets placed in electing to group any assets placed in service Section B - Assets F (a) Classification of property ear property	Placed in Servic (b) Month and year placed	Sect ears beginning into one or more get e During 2009 (c) Basis for de (business/inve	before 2009 meral asset accor Tax Year U	sing the Ge	eneral Deprecia	ation Syste	em
17 MACRS 18 If you are 19a 3-you b 5-you c 7-you	S deductions for assets placed in electing to group any assets placed in service Section B - Assets F (a) Classification of property ear property	Placed in Servic (b) Month and year placed	Sect ears beginning into one or more get e During 2009 (c) Basis for de (business/inve	before 2009 meral asset accor Tax Year U	sing the Ge	eneral Deprecia	ation Syste	em
17 MACRS 18 If you are 19a 3-you b 5-you c 7-you d 10-	S deductions for assets placed in electing to group any assets placed in service Section B - Assets P (a) Classification of property ear property ear property ear property ear property	Placed in Servic (b) Month and year placed	Sect ears beginning into one or more get e During 2009 (c) Basis for de (business/inve	before 2009 meral asset accor Tax Year U	sing the Ge	eneral Deprecia	ation Syste	em
17 MACRS 18 If you are 19a 3-yr b 5-yr c 7-yr d 10- e 15-	S deductions for assets placed in electing to group any assets placed in service Section B - Assets P (a) Classification of property ear property ear property ear property year property year property	Placed in Servic (b) Month and year placed	Sect ears beginning into one or more get e During 2009 (c) Basis for de (business/inve	before 2009 meral asset accor Tax Year U	sing the Ge	eneral Deprecia	ation Syste	em
17 MACRS 18 If you are 19a 3-yy b 5-yy c 7-yy d 10- e 15- f 20-	S deductions for assets placed in electing to group any assets placed in service. Section B - Assets P (a) Classification of property ear property ear property ear property year property year property	Placed in Servic (b) Month and year placed	Sect ears beginning into one or more get e During 2009 (c) Basis for de (business/inve	before 2009 meral asset accor Tax Year U	sing the Ge	eneral Deprecia	ation Syste	em
17 MACRS 18 If you are 19a 3-yy b 5-yy c 7-yy d 10- e 15- f 20- g 25-	S deductions for assets placed in electing to group any assets placed in service Section B - Assets F (a) Classification of property ear property ear property ear property year property year property year property year property year property year property year property	Placed in Servic (b) Month and year placed	Sect ears beginning into one or more get e During 2009 (c) Basis for de (business/inve	before 2009 meral asset accor Tax Year U	sing the Ge (d) Recovery period	eneral Deprecia	ation Syste	em
17 MACRS 18 If you are 19a 3-yy b 5-yy c 7-yy d 10- e 15- f 20- g 25-	S deductions for assets placed in electing to group any assets placed in service Section B - Assets F (a) Classification of property ear property ear property ear property year property year property year property year property	Placed in Servic (b) Month and year placed	Sect ears beginning into one or more get e During 2009 (c) Basis for de (business/inve	before 2009 meral asset accor Tax Year U	(d) Recovery period	(e) Convention	option Systems (f) Method	em
17 MACRS 18 If you are 19a 3-yr b 5-yr c 7-yr d 10- e 15- f 20- g 25- h Res	S deductions for assets placed in electing to group any assets placed in service. Section B - Assets F (a) Classification of property ear property ear property year property year property year property year property year property year property year property sidential rental property	e during the tax year laced in Service (b) Month and year placed in service	Sect ears beginning into one or more get e During 2009 (c) Basis for de (business/inve	before 2009 meral asset accor Tax Year U	(d) Recovery period 25 yrs. 27 5 yrs	(e) Convention	(f) Method S/L S/L	em
17 MACRS 18 If you are 19a 3-yr b 5-yr c 7-yr d 10- e 15- f 20- g 25- h Res	S deductions for assets placed in electing to group any assets placed in service Section B - Assets P (a) Classification of property ear property ear property year property year property year property year property year property year property sidential rental property	e during the tax year laced in Service (b) Month and year placed in service / / / / /	Sect ars beginning into one or more get e During 2009 (c) Basis for de (business/inve only - see ins	perior 2009 peral asset according to the pera	25 yrs. 27 5 yrs 39 yrs	(e) Convention MM MM MM MM	stion System (f) Method S/L S/L S/L S/L S/L S/L S/L	em (g) Depreciation deduction
17 MACRS 18 If you are 19a 3-yr b 5-yr c 7-yr d 10- e 15- f 20- g 25- h Res	S deductions for assets placed in electing to group any assets placed in service. Section B - Assets F (a) Classification of property ear property ear property year property year property year property year property year property year property year property sidential rental property	e during the tax year laced in Service (b) Month and year placed in service / / / / /	Sect ars beginning into one or more get e During 2009 (c) Basis for de (business/inve only - see ins	perior 2009 peral asset according to the pera	25 yrs. 27 5 yrs 39 yrs	(e) Convention MM MM MM MM	stion System (f) Method S/L S/L S/L S/L S/L S/L S/L	em (g) Depreciation deduction
17 MACRS 18 If you are 19a 3-yr b 5-yr c 7-yr d 10- e 15- f 20- g 25- h Res	S deductions for assets placed in electing to group any assets placed in service Section B - Assets P (a) Classification of property ear property ear property year property year property year property year property year property year property sidential rental property	e during the tax year laced in Service (b) Month and year placed in service / / / / /	Sect ars beginning into one or more get e During 2009 (c) Basis for de (business/inve only - see ins	perior 2009 peral asset according to the pera	25 yrs. 27 5 yrs 39 yrs	(e) Convention MM MM MM MM	stion System (f) Method S/L S/L S/L S/L S/L S/L S/L	em (g) Depreciation deduction
17 MACRS 18 If you are 19a 3-yo b 5-yo c 7-yo d 10- e 15- f 20- g 25- h Res i Not	S deductions for assets placed in electing to group any assets placed in service Section B - Assets F (a) Classification of property ear property ear property year property year property year property year property year property sidential rental property presidential real property Section C - Assets Place Section C - Assets Place Section C -	e during the tax year laced in Service (b) Month and year placed in service / / / / /	Sect ars beginning into one or more get e During 2009 (c) Basis for de (business/inve only - see ins	perior 2009 peral asset according to the pera	25 yrs. 27 5 yrs 39 yrs	(e) Convention MM MM MM MM	stion System (f) Method S/L S/L S/L S/L S/L S/L S/L S/L S/L S/	em (g) Depreciation deduction
17 MACRS 18 If you are 19a 3-yo b 5-yo c 7-yo d 10- e 15- f 20- g 25- h Res i Noo	S deductions for assets placed in electing to group any assets placed in service. Section B - Assets F (a) Classification of property ear property ear property ear property year property year property year property year property sidential rental property presidential real property Section C - Assets Places	e during the tax year laced in Service (b) Month and year placed in service / / / / /	Sect ars beginning into one or more get e During 2009 (c) Basis for de (business/inve only - see ins	perior 2009 peral asset according to the pera	25 yrs. 27 5 yrs 29 yrs 39 yrs	(e) Convention MM MM MM MM	stion System (f) Method S/L S/L S/L S/L S/L S/L S/L S/L S/L S/	em (g) Depreciation deduction
17 MACRS 18 If you are 19a 3-yo b 5-yo c 7-yo d 10- e 15- f 20- g 25- h Res i Noo	S deductions for assets placed in electing to group any assets placed in service. Section B - Assets F (a) Classification of property ear property ear property ear property year property year property year property year property sidential rental property nresidential real property Section C - Assets Places iss life	e during the tax year laced in Service (b) Month and year placed in service / / / / /	Sect ars beginning into one or more get e During 2009 (c) Basis for de (business/inve only - see ins	perior 2009 peral asset according to the pera	25 yrs. 27 5 yrs 27 5 yrs 39 yrs ing the Alte	(e) Convention MM MM MM MM MM Trnative Deprece	stion System (f) Method S/L S/L S/L S/L S/L S/L S/L S/L S/L S/	em (g) Depreciation deduction
17 MACRS 18 If you are 19a 3-yr b 5-yr c 7-yr d 10- e 15- f 20- g 25- h Res i Nor 20a Cla b 12- c 40- Part IV	S deductions for assets placed in electing to group any assets placed in service. Section B - Assets P (a) Classification of property ear property ear property year property year property year property year property year property sidential rental property nresidential real property Section C - Assets Places iss life year	le during the tax year leaced in Service (b) Month and year placed in service / / / / aced in Service	Sect ars beginning into one or more get e During 2009 (c) Basis for de (business/inve only - see ins	perior 2009 peral asset according to the pera	25 yrs. 27 5 yrs 27 5 yrs 39 yrs ing the Alte	(e) Convention MM MM MM MM MM Trnative Deprece	stion System (f) Method S/L S/L S/L S/L S/L S/L S/L S/L S/L S/	em (g) Depreciation deduction
17 MACRS 18 If you are 19a 3-yr b 5-yr c 7-yr d 10- e 15- f 20- g 25- h Res i Nor 20a Cla b 12- c 40- Part IV 21 Listed	S deductions for assets placed in electing to group any assets placed in service Section B - Assets P (a) Classification of property ear property ear property year property year property year property year property sidential rental property Section C - Assets PI ass life year year Summary (See instructions)	le during the tax year leaced in Service (b) Month and year placed in service / / / / aced in Service /	Sections Sections Sections Sections Sections Sections Section	perior 2009 peral asset according to the pera	25 yrs. 27 5 yrs 27 5 yrs 39 yrs ing the Alte	(e) Convention MM MM MM MM MM MM MM MM MM	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	em (g) Depreciation deduction
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Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, Part V Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes _ No (ı) (c) (e) (h) (f) (a) (d) Elected Date Businessi Basis for depreciation Type of property (list vehicles first) Cost or Recovery Method/ Depreciation section 179 placed in investment (business/investment Convention deduction period other basis use percentage use only) service cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25 26 Property used more than 50% in a qualified business use: % % % 27 Property used 50% or less in a qualified business use: S/L -S/L -% S/L -% 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (c) (d) (e) (f) (a) (b) Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle 30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year. Add lines 30 through 32 Yes 34 Was the vehicle available for personal use Yes No Yes No Yes No Yes No Yes No No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your No Yes 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI Amortization (b) Date amortization (d) (e) **(f)** (a) Description of costs Amortization period or percentage Amortizable amount begins 42 Amortization of costs that begins during your 2009 tax year: 43 Amortization of costs that began before your 2009 tax year 43 44 44 Total. Add amounts in column (f) See the instructions for where to report

Form **8868** (Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

Form 8868 (Rev. 4-2009)

• If yo	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box			ightharpoons
• If yo	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	s form).		
Do no	t complete Part II unless you have already been granted an automatic 3-month extension on a previously t	filed Fo	m 8868.	
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed).			
A corp	oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and coi	nplete		
Part I	· · · · · · · · · · · · · · · · · · ·	·		▶ □
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a income tax returns.	n exten	sion of time	
noted (not au you m	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extensi below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electror atomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cours submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic firs. gov/efile and click on e-file for Charities & Nonprofits.	nically if	(1) you wan	t the additional 90-T. Instead,
Type o	Name of Exempt Organization	Empl	oyer identif	ication number
print	FRANK H. HISCOCK LEGAL AID SOCIETY	1	5-0527	253
File by the due date filing you	Number, street, and room or suite no. If a P.O. box, see instructions.			
Instruction	00			
Check	t type of return to be filed (file a separate application for each return):			
	Form 990 Form 990-T (corporation) Form 4 Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 5 Form 990-EZ Form 990-T (trust other than above) Form 6 Form 990-PF Form 1041-A Form 8	227 069		
Tel	JOANNE P. SAWMILLER be books are in the care of > 351 SOUTH WARREN STREET - SYRACUSE, NY ephone No. > (315) 218-0140 FAX No. > ne organization does not have an office or place of business in the United States, check this box	132	02-205	7
		nis is fo	r the whole o	roup, check this
box 🕨				
	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un AUGUST 15, 2010 , to file the exempt organization return for the organization named is for the organization's return for: X Calendar year 2009 or tax year beginning , and ending		The extension	on
2	If this tax year is for less than 12 months, check reason: Initial return Final return		Change in a	ccounting period
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nonrefundable credits. See instructions	3a	\$	
	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3ь	\$	
	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	35		
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	[.		
	See instructions.	Зс	\$	N/A
Cautio	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	n 8879-	FO for paym	ent instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.