

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



SCANNED DEC 0.1 2010

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	or the	2009 calendar year, or tax year beginning APR 1, 2009 and ending	MAR 31, 2010	
В	Check of applicable	C Name of organization	D Employer identific	eation number
	Addres	s labelor Togal Aid Society of San Mateo County		
	Name change	type	94-1	451894
	Initial return Termin	See Number and street (or P 0 box if mail is not delivered to street address) Room/st	uite E Telephone number (650	
누	ated Amend	Instruc-		1,753,798.
<u> </u>	lretum	City or town, state or country, and Zir + 4	G Gross receipts \$	
L	Application pendin	San Mateo, CA 94402	H(a) Is this a group re	
		F Name and address of principal officer Laurell Zorras	for affiliates?	Yes X No
		same as C above	H(b) Are all affiliates inc	
		mpt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527		list. (see instructions)
		e:▶ www.legalaidsmc.org	H(c) Group exemption	
		organization X Corporation Trust Association Other ► LY Summary	ear of formation 1959 N	State of legal domicile CA
		Briefly describe the organization's mission or most significant activities: See Sche	dule O.	
Activities & Governance	' '	Shelly describe the organization's mission of most significant determises.		· · · · · · · · · · · · · · · · · · ·
rua	2	Check this box if the organization discontinued its operations or disposed of m	ore than 25% of its net as	sets.
Š	3	Number of voting members of the governing body (Part VI, line 1a)	3	18
<u>ن</u> مح	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
Se	5	Total number of employees (Part V, line 2a)	5	30
Ě	6	Total number of volunteers (estimate if necessary)	6	236
Ę	7a -	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
•	ь	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
			Prior Year	Current Year
<u>o</u>	8	Contributions and grants (Part VIII, line 1h)	2,333,303.	1,642,099.
Revenue	9	Program service revenue (Part VIII, line 2g)		
ě	10	investment income (Part VIII, column (A), lines 3, 4, and 7d)	60,588.	32,446.
-	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,540.	12,040.
	12	Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,402,431.	1,686,585.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13,808.	9,273.
		Benefits paid to or for members (Part IX, column (A), line 4)	1 540 357	1 662 005
ės	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5·10)	1,548,357.	1,663,895.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
X	b	Total fundraising expenses (Part IX, column (D), line 25) 167,171.	393,321.	106 220
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,955,486.	406,330.
		Total expenses. Add lines 13-17 (must equal Partity column (A), line 25)	446,945.	<392,913.>
- 2	19	Revenue less expenses Subtract line 18 from line 12		
sts	00	544 wat (54 × 14 × 16)	Beginning of Current Year 3,362,043.	End of Year 3,489,676.
Net Assets or	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from time 20.	770,305.	796,541.
Vet.	21 22	Net assets or fund balances. Subtract line 21 from line 20	2,591,738.	2,693,135.
		Signature Block LOGDEN LIT	2/331/7330	2703071001
		Under penalties of penury, I declare that I have examined this return, including accompanying schedules and stateme and complete declaration of preparer of her than officer) is based on all information of which preparer has any knowle	nts, and to the best of my knowledg	ge and belief, it is true, correct,
	ļ	and complete declaration of preparer to her than officer) is based on all information of which preparer has any knowle	age / _	/ _
Sig	ın	\ X(\!\\/\\\^2\\\\\\\\\)	1 (//5/	'/ O
He		Signature of office/	Date /	
		Lauren Zorfas, Executive Director		
		Type or print name and title		
Pai	d	Preparer's signature Date (1) 4 (0)	Check if Prepare	er's identifying number structions)
	- parer's		employed	
	Only	Firm's name (or Harry 19ton Group, CPI.s, LLP yours if	EIN >	
	•	self-employed), address, and Son Mission Street, Suite 200		626) 402 C001
_		ZIP+4 San Marino, CA 91108	Phone no P	
_		RS discuss this return with the preparer shown above? (see instructions)	!A	X Yes No
932	001 02-0 S	4-10 LHA For Privacy /'ct and Paperwork Reduction Act Notice, see the separate ee Schedule 0 for Organization Mission State		Form 990 (2009)
	J	of Donounte of Lot organization intoblon beate		///

	990 (2009) Legal Aid Society of San Mateo County 94-1451894 Page 2
Pai	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission See Form 990; Part I, line 1.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes." describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:)(Expenses \$ 1,411,671. Including grants of \$)(Revenue \$) Legal Services - help disadvantaged people improve their lives through equal access to justice.
4b	(Code:) (Expenses \$ 166,310 • including grants of \$) (Revenue \$)
	Area On Aging - provide advocacy to seniors and persons with disabilities to ensure that their rights are protected and that they are receiving the benefits to which they are entitled.
4c	(Code:) (Expenses \$ 44,507 • Including grants of \$) (Revenue \$)
	Legal Services Trust Fund - provide advocacy services to the elderly, disabled, juveniles and other disadvantaged or underserved California groups.
4d	/ / /
40	(Expenses \$ Including grants of \$) (Revenue \$) Total program service expenses \$ 1,622,488.

			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	X	
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
•	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
•	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	_ <u></u>		
. •	If "Yes," complete Schedule D, Part V	10	Х	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
••	as applicable	11	Х	
•	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.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's separate or consolidated limit of the tax year incided 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	
12Δ	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	12		
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	170		
•	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		
. •	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
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	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	.,		_ <u>-</u> _
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
- •	complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
	2.5		gan r	

			Tes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the	04		x
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		
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	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	ļ		
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1		
	Schedule K. If "No", go to line 25	24a		Х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
_	any tax-exempt bonds?	24¢		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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		Х
ь	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		Х
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		Х
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			
	Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
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			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
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	X	
		Form	990 (2009)

Statements Regarding Other IRS Filings and Tax Compliance Part V Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 8 U.S. Information Returns. Enter -0- if not applicable 0 1b b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 30 2a filed for the calendar year ending with or within the year covered by this return Х 2b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? За 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 Х 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 b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 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). 7 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services Х provided to the payor? 7a Х **b** If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b 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 e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g 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 8 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 X at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a **b** Did the organization make a distribution to a donor, donor advisor, or related person? 9ь 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: 11a a 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.) 11b

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

12a

Section A. Governing Body and Management

Yes No

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.

					1	110		
1a	Enter the number of voting members of the governing body	1a		18				
b	Enter the number of voting members that are independent	1b		18				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	ny 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	e direct	supervision			l		
	of officers, directors or trustees, or key employees to a management company or other person?			3	ļ	X		
4	Did the organization make any significant changes to its organizational documents since the prior For		was filed?	4	<u> </u>	X		
5	Did the organization become aware during the year of a material diversion of the organization's assets	s?		5	 -	X		
6	Does the organization have members or stockholders?			6	 -	X		
7a	Does the organization have members, stockholders, or other persons who may elect one or more men	mbers	of the			l v		
	governing body?	_		7a	-	X		
	Are any decisions of the governing body subject to approval by members, stockholders, or other pers			7b	-	<u> </u>		
8	Did the organization contemporaneously document the meetings held or written actions undertaken of	auring i	ne year					
_	by the following:				х			
a b	The governing body? Each committee with authority to act on behalf of the governing body?			8a 8b	X	 		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	chad at	the	85	^	 		
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	oneu ai	trie	9		Х		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	21/00/10	Code)	0	<u> </u>			
	The second by requester intermediate about position for required by the intermediate		00007		Yes	No		
10a	Does the organization have local chapters, branches, or affiliates?			10a	1	X		
	If "Yes," does the organization have written policies and procedures governing the activities of such of	chapter	s, affiliates,					
	and branches to ensure their operations are consistent with those of the organization?	·		10b				
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fill	ing the	form?	11	X			
11A	11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
12a	2a 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?			12b	X	<u> </u>		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," d	escnbe					
	in Schedule O how this is done			12c	X	<u> </u>		
13	Does the organization have a written whistleblower policy?			13	X	<u> </u>		
14	Does the organization have a written document retention and destruction policy?			14	X	ļ		
15	Did the process for determining compensation of the following persons include a review and approva	i by inc	lependent					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			1				
a	The organization's CEO, Executive Director, or top management official			15a	X			
Ь	Other officers or key employees of the organization			15b		X		
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)		1h _					
ıva	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement taxable entity during the year?	ient Wi	urd	16a		х		
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate the organization of the organization o	usta ita	narticipation	108	 			
•	In joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization		•					
	exempt status with respect to such arrangements?	unzano		16ь		İ		
Sec	tion C. Disclosure			, .00	1	<u> </u>		
17	List the states with which a copy of this Form 990 is required to be filed ▶CA							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(501(c)	(3)s only) availal	ble for	_			
	public inspection. Indicate how you make these available. Check all that apply.							
	X Own website X Another's website X Upon request							
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, co	onflict c	of interest policy	, and fin	ancial			
	statements available to the public.							
20	State the name, physical address, and telephone number of the person who possesses the books an	d reco	rds of the organ	ızatıon:	-			
	Susan Stortini - (650) 558-0915							
	521 East 5th Avenue, San Mateo, CA 94402	-			0			
				Forn	990	(2009)		

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	compensate an	y cu	rren	t off	icer	, dire	ecto	or, or trustee.	·	
(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average			Pos				Reportable	Reportable	Estimated
	hours	(cl	heck	(ali 1	that	арр	ly)	compensation	compensation	amount of
	per week	acto						from the	from related organizations	other compensation
	Week	늉				ated		organization	(W-2/1099-MISC)	from the
		nstee	ast		18	pens		(W-2/1099-MISC)	,	organization
		Individual trustee or director	tonat		핥	ag sal	ļ ,			and related
		Indiv	Institutional trustee	Officer	Key emptoyee	Highest compensated employee	Former			organizations
Lynne Esselstein	1 00									
President	1.00	X	_	Х		ļ		0.	0.	0.
David C. Wilson		1								
Vice President	1.00	X	_	Х				0.	0.	0.
Robert Koenig										
Secretary	1.00	X		X	ļ	<u> </u>	L.	0.	0.	0.
Joseph Galligan, CPA	1	١								
Treasurer	1.00	X	_	X		_	_	0.	0.	0.
Maureen P. Alger	1 00	١,,					į			
Member	1.00	X		_	<u> </u>	-	L	0.	0.	0.
Jessica Arner	1 00	,,								_
Member	1.00	Х		_	<u> </u>	-	H	0.	0.	0.
Jeff Hyman Member	1.00	х						0.	0.	_
Janette Leonidou	1.00	^		-	┢	-	-	U •	<u> </u>	0.
Member	1.00	Х						0.	0.	0.
Brian Levy	1.00	^	-	_	-	-	-	0.		· ·
Member	1.00	Х			ĺ			0.	0.	0.
Dan L. Siegel	1.00				-	\vdash	\vdash	0.		
Member	1.00	X						0.	0.	0.
Leticia Toledo	1.00	 ^	\vdash			-	┢	·	•	
Member	1.00	X						0.	0.	0.
Garette Waltzer	1 2000					t				
Member	1.00	X						0.	0.	0.
Laurence A. Weiss										
Member	1.00	X						0.	0.	0.
Rand White										
Member	1.00	X						0.	0.	0.
Mary H. Lin										
Member	1.00	X						0.	0.	0.
Gayle Prytz										
Member	1.00	X			L			0.	0.	0.
Greg Regan										
Member	1.00	X				<u> </u>	L	0.	0.	0.

Legal Aid Society of San Mateo County 94-1451894 Page 8 Form 990 (2009) Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (D) (F) (C) (E) (A) (B) Reportable Reportable **Estimated** Name and title Average Position (check all that apply) compensation compensation amount of hours per from from related other ndividual trustee or director the organizations compensation week (W-2/1099-MISC) organization from the Institutional trustee (W-2/1099-MISC) organization and related Officer organizations Stcey Keare Member 1.00 X 0. 0. 0. Lauren Zorfas 3,571. **Executive Director** 35.00 X 7,912. 0 M. Stacey Hawver 9,121. X 122,112 0 35.00 Executive Director 130,024. 12,692. 1b Total Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization Yes No 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on Х 3 line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization X and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person **Section B. Independent Contractors** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from NONE the organization. (A) (B) (C) Name and business address Description of services Compensation

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

\$100,000 in compensation from the organization

Part VIII Statement of Revenue Part VIII Project Statement of Revenue Part VIII	Forn	990	(2009) Legal	Aid Soc	ciety of	San Mateo	County	94-1451	894 Page 9
Total revenue Related or exempt function Unright or exempt business revenue Exempt function Unright or exempt business Exempt function Unright or exempt business Exempt function Unright or exempt Unright or	Pa	rt VII	Statement of Rever	nue					
Business Code Business Code Business Code							Related or exempt function	Unrelated business	Revenue excluded from tax under sections 512.
Business Code Business Code Business Code	돧	1 a	Federated campaigns	1a		<u> </u>			
Business Code Business Code Business Code	ga	b	Membership dues	1b					
Business Code Business Code Business Code	an an	C	Fundraising events	1c	387,132.				
Business Code Business Code Business Code	igi.		-	<u> </u>	520 067				
Business Code Business Code Business Code	Sim	_	- ·	, 	320,867.				
Business Code Business Code Business Code	호호	T	• •	1 1	734 100				
Business Code Business Code Business Code	풀림	_			734,100.				
Business Code Business Code Business Code	a č	_		s 1a-1r 3		1.642.099.			
2 a b c c c c c c c c c			Totali Tida III da Ti					***************************************	
Total. Add lines 2a:21 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gan or (loss) d Net gain or (loss) 4 Net gain or (loss) 5 a Gross income from fundraising events (not including \$ 387,132. 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: cost of goods sold c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a Miscellaneous income of All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions 12 Total revenue. See instructions 13 A 1446. 32, 446.	<u> </u>	2 a				1	[[1
Total. Add lines 2a:21 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gan or (loss) d Net gain or (loss) 4 Net gain or (loss) 5 a Gross income from fundraising events (not including \$ 387,132. 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: cost of goods sold c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a Miscellaneous income of All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions 12 Total revenue. See instructions 13 A 1446. 32, 446.	و کِ	b							
Total. Add lines 2a:21 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gan or (loss) d Net gain or (loss) 4 Net gain or (loss) 5 a Gross income from fundraising events (not including \$ 387,132. 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: cost of goods sold c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a Miscellaneous income of All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions 12 Total revenue. See instructions 13 A 1446. 32, 446.	en Se	c							
Total. Add lines 2a:21 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gan or (loss) d Net gain or (loss) 4 Net gain or (loss) 5 a Gross income from fundraising events (not including \$ 387,132. 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: cost of goods sold c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a Miscellaneous income of All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions 12 Total revenue. See instructions 13 A 1446. 32, 446.	e a	d	<u> </u>						
Total. Add lines 2a:21 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gan or (loss) d Net gain or (loss) 4 Net gain or (loss) 5 a Gross income from fundraising events (not including \$ 387,132. 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: cost of goods sold c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a Miscellaneous income of All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions 12 Total revenue. See instructions 13 A 1446. 32, 446.	<u></u>	е			ļ			 -	
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royaltes (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) f as Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) c Net income from fundraising events (not including \$ 387,132. 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: circlet expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory. Less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a Miscellaneous income b C All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions 32,446. 32,446. 32,446. 32,446. 32,446. 32,446. 32,446. 32,446. 32,446. 32,446. 32,446. 32,446.	۱ ۳	f	· •	enue	L			·····	
other similar amounts) Income from investment of tax-exempt bond proceeds Forgytites (i) Real (ii) Personal Forgytites (ii) Real (iii) Personal Forgytites (iii) Real (iii) Personal Forgytites (iii) Real (iii) Personal Forgytites (iv) Cother (iv) C	\dashv				-				
4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal b Less: rental expenses c Rental income or (joss) d Net rental income or (joss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (joss) d Net gain or (joss) for sales of inventory in the sales of contributions reported on line tc). See Part IV, line 18 b Less direct expenses c Net income or (joss) from fundraising events c Net income or (joss) from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (joss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (joss) from sales of inventory Miscellaneous Revenue Business Code 11 a Miscellaneous income b C d All other revenue c Total. Add lines 11a-11d 12 Total revenue. See instructions (ii) Personal (iii) Personal (iii		3		i aiviaenas, inter	_	32.446.			32.446
Second Post		4	· ·	x-exempt bond r	Ī	32,1100			32/110.
Second Personal Second Per				or exempt send p	>				
6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) 8 a Gross income from fundraising events (not including \$ 387,132. of contributions reported on line 1c). See Part IV, line 18 b Less circlet expenses c Net income or (loss) from gaming activities. See Part IV, line 19 b Less: cost of goods sold c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Miscellaneous income b Miscellaneous income of All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions			,	(ı) Real	(II) Personal				
The proof of the		6 a	Gross Rents						
d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gan or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 387,132. 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 c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous income 11 a Miscellaneous income e Total. Add lines 11a-11d 12 Total revenue. See instructions (i) Other (ii) Other (ii) Other (ii) Other (ii) Other (iii) Other (iii) Other (ii) Other (iii) Other (iiii) Other (iiii) Other (iii) Other (iii) Other (iii) Other (iii		b	Less: rental expenses						
Ta Gross amount from sales of 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 including \$ 387,132. 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 a b Less: circle expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a Miscellaneous income 900099 12,040. 12,044.486.		С	Rental income or (loss)		<u> </u>				
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 including \$ 387,132. 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 a b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross also of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Miscellaneous income b C d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions					1			·····	
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 including \$ 387,132. 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: circle expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a Miscellaneous income b C d All other revenue e Total. Add lines 11a-11d		7 a		(i) Securities	(II) Other				
and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 387,132. 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 c Net income or (loss) from gaming activities. See Part IV, line 19 b Less: cirrect expenses c Net income or (loss) from gaming activities. See Part IV, line 19 b Less: correct expenses c Net income or (loss) from gaming activities. See Part IV, line 19 b Less: correct expenses c Net income or (loss) from gaming activities. See Part IV, line 19 b Less: cost of goods sold c Net income or (loss) from sales of inventory. It is part of the part o			·		-				
C Gain or (loss)		b							
d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 387,132. 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 c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Miscellaneous income b C d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions All other revenue	ĺ	c	·						
8 a Gross income from fundraising events (not including \$ 387,132.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 c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Miscellaneous income b C d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions 8 a Gross income from fundraising events a 67,213. 67,					>	ĺ			i
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Miscellaneous income b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions D . O . O . O . O . O . O . O .	Jue		Gross income from fundraisin					······································	
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Miscellaneous income b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions D . O . O . O . O . O . O . O .	S S								
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Miscellaneous income b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions D . O . O . O . O . O . O . O .	œ.		· ·	•	67,213.				
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Miscellaneous income b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions D . O . O . O . O . O . O . O .	뚩	b		b	67,213.				
Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Miscellaneous income b c d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 12,040. 12,040.	٦	C	Net income or (loss) from fund	draising events	>	0.			
b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Miscellaneous income b c d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions b 12,040. 12,040. 13,040. 144,486.	İ	9 a		ctivities. See					
c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Miscellaneous income b c d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions D 12 Net income or (loss) from sales of inventory All other revenue 12 Total revenue. See instructions D 13 Net income or (loss) from gaming activities D 14 Net income or (loss) from gaming activities D 15 Net income or (loss) from gaming activities D 16 Net income or (loss) from gaming activities D 17 Net income or (loss) from gaming activities D 18 Net income or (loss) from sales of inventory D 19 Net income or (loss) from sales of inventory D 10 Net income or (loss) from sales of inventory D 11 A Miscellaneous income D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 10 Net income or (loss) from sales of inventory D 10 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales of inventory D 12 Net income or (loss) from sales o									
10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Miscellaneous income b c d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions b 12,040. 12 Total revenue. See instructions			· ·	_	L				
and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Miscellaneous income b c d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions a	ŀ			-					
b Less: cost of goods sold b		IU a							
c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a Miscellaneous income 900099 b		b							
Miscellaneous Revenue 11 a Miscellaneous income 900099 12,040. 12,040. b 12,040. 12,040. c 12,040. 12,040. d All other revenue 12,040. 12,040. 12 Total revenue. See instructions 1,686,585. 0. 0.44,486.			-	_	•	Í	ĺ		
11 a Miscellaneous income 900099 12,040. 12,040. b	Ī		Miscellaneous Revenu	ie	Business Code				
b	Ī	11 a	Miscellaneous i	ncome					12,040.
e Total. Add lines 11a-11d 12 Total revenue. See instructions 1,686,585. 1,686,585. 0. 0. 44,486.		b							
e Total. Add lines 11a-11d 12 Total revenue. See instructions 1,686,585. 1,686,585. 0. 0. 44,486.		c							
12 Total revenue. See instructions ► 1,686,585. 0. 0. 44,486.		d			<u> </u>	12 040	,,		<u> </u>
000000		e 10				12,040.			11 106
	93200		i nrai i sasuns. Ses instructions			1,000,303.			

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp				
	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	9,273.	9,273.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16			orloloska karastalia	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	140 650	00 041	61 000	
	trustees, and key employees	143,650.	82,341.	61,309.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 170 540	060 050	06 266	115 100
7	Other salaries and wages	1,179,548.	968,059.	96,366.	115,123.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	240 442	107 017	22.002	10 622
9	Other employee benefits	240,443.	197,817.	23,993.	18,633.
10	Payroll taxes	100,254.	81,226.	11,648.	7,380.
11	Fees for services (non-employees):				
a	Management				
ь	Legal	15 000	F 027	0 000	1 074
	Accounting	15,000.	5,027.	8,899.	1,074.
	Lobbying				
e	Professional fundraising services See Part IV, line 17	19,722.		10 722	
f	Investment management fees	141,718.	96,285.	19,722.	13,556.
	Other	141,710.	90,203.	31,0//.	13,330.
12	Advertising and promotion	44,408.	27,244.	14,628.	2,536.
13	Office expenses	44,400.	21,244.	14,020.	2,330.
14	Information technology Royalties				
15 16	· ·	22,750.	16,944.	3,356.	2,450.
17	Occupancy Travel	9,747.	9,545.	85.	117.
18	Payments of travel or entertainment expenses	3,7,27.	3/313.		117.
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	35,380.	29,853.	4,932.	595.
21	Payments to affiliates			-7,500	
22	Depreciation, depletion, and amortization	25,536.	25,536.		· · · · · · · · · · · · · · · · · · ·
23	Insurance	13,181.	6,847.	5,652.	682.
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	Equipment repairs and m	38,420.	28,615.	5,667.	4,138.
b	Library supplements	18,755.	18,755.		
c	Court and filing fees	6,567.	6,567.		
ď	Miscellaneous	5,684.	4,234.	838.	612.
е	Training	4,993.	4,307.	411.	275.
f	All other expenses	4,469.	4,013.	456.	
25	Total functional expenses. Add lines 1 through 24f	2,079,498.	1,622,488.	289,839.	167,171.
26	Joint costs. Check here ▶ ☐ 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				
					5 000 (0000)

	τX	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			113,151.	1	135,515.
	2	Savings and temporary cash investments			357,756.	2	9,607.
	3	Pledges and grants receivable, net			372,944.	3	270,523.
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, di	rectors, tru	ustees, key			
		employees, and highest compensated employee		·			
		of Schedule L	·			5	
	6	Receivables from other disqualified persons (as	defined ui	nder section			
		4958(f)(1)) and persons described in section 495		•			
		Part II of Schedule L		·		6	
Ś	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges		Ī	12,063.	9	20,285.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	1,202,853.			
	ь	Less: accumulated depreciation	10b	1,202,853. 278,121.	950,268.	10c	924,732.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1	11		1,555,861.	12	2,129,014.
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)		3,362,043.	16	3,489,676.
	17	Accounts payable and accrued expenses			198,370.	17	3,489,676. 188,856.
	18	Grants payable		18			
	19	Deferred revenue		81,682.	19	126,594.	
	20	Tax-exempt bond liabilities			20	-	
Ø	21	Escrow or custodial account liability. Complete	Part IV of S	Schedule D		21	
Liabilities	22	Payables to current and former officers, director			THE PART OF THE PA		<u> 11000 - 1100 </u>
abi		highest compensated employees, and disqualifi					
		of Schedule L	·			22	
	23	Secured mortgages and notes payable to unrela	ated third	parties	490,253.	23	481,091.
	24	Unsecured notes and loans payable to unrelate		Г		24	. == -=
	25	Other liabilities Complete Part X of Schedule D	•			25	
	26	Total liabilities. Add lines 17 through 25		ľ	770,305.	26	796,541.
		Organizations that follow SFAS 117, check he	ere 🕨 [X and complete			
S		lines 27 through 29, and lines 33 and 34.					
Š	27	Unrestricted net assets			476,068.	27	810,329.
ala	28	Temporarily restricted net assets			496,280.	28	235,928.
Ā	29	Permanently restricted net assets			1,619,390.	29	1,646,878.
Ē		Organizations that do not follow SFAS 117, c	heck here	and			
6		complete lines 30 through 34.					
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds				30	
15S	31	Paid-in or capital surplus, or land, building, or ed		und		31	
et /	32	Retained earnings, endowment, accumulated in	come, or	other funds		32	
Z	33	Total net assets or fund balances			2,591,738.	33	2,693,135.
	34	Total liabilities and net assets/fund balances			3,362,043.	34	3,489,676.

Form **990** (2009)

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.

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

2009

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Legal Aid Society of San Mateo County

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

Employer identification number 94-1451894

he organi	ization is not a	private foundation I	because it is: (For lines 1	I through 1	11, check	only one b	ox)					
1 🖳	A church, cor	vention of churches	s, or association of churc	ches desc	ribed in se	ction 170	(b)(1)(A)(i)	-				
2	A school desc	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E.)								
з 🔛	•		tal service organization o									
4	A medical res	earch organization of	operated in conjunction	with a hos	pıtal descı	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter t	the hospital	s nam	ie,
	city, and state	e:					_					
5 🔲	An organization	on operated for the	benefit of a college or ur	niversity ov	wned or op	perated by	a governr	mental uni	describ	ed in		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6 🔲	A federal, sta	te, or local governme	ent or governmental unit	t described	d in sectio	n 170(b)(1)(A)(v).					
7 X	An organizati	on that normally rec	eives a substantial part (of its supp	ort from a	governme	ntal unit o	r from the	general	public desc	ribed i	n
	section 170(b)(1)(A)(vi). (Comple	te 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	nembershij	o fees, a	nd gross red	eipts	from
	activities relat	ted to its exempt fur	nctions - subject to certa	ın excepti	ons, and (2	2) no more	than 33 1	/3% of its	support	from gross	ınvest	ment
		•	axable income (less sect									
	See section	509(a)(2). (Complete	Part III.)									
10 🔲			perated exclusively to te	st for publ	c safety. S	See sectio	n 50 9 (a)(4	I).				
11 🔲	An organizati	on organized and or	perated exclusively for th	ne benefit (of, to perfo	orm the fur	nctions of,	or to carry	y out the	purposes o	f one	or
	more publicly	supported organiza	ations described in section	on 509(a)(1) or section	on 509(a)(2	2). See sec	tion 509(a	a)(3). Ch	eck the box	that	
			organization and comple									
	a Type I	ь 🗀	Type II c	: П Тур	e III - Fund	tionally int	egrated		d 🗀	Type III - C	Other	
е 🗀	e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than											
	foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)											
f			ten determination from t						, , , ,			
	-	rganization, check th			•		•					
g	•	-	organization accepted ar	nv aift or c	ontribution	from anv	of the follo	owing pers	sons?			
J	_		rectly controls, either al			-					Yes	No
			upported organization?	·		•			•	11g(i)		
	_		described in (i) above?							11g(ii)		
		•	person described in (i) of		e?					11g(iii)		
h		•	about the supported or								·	· · · · · - ·
				•	\-,							
(i) Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	rganization	(v) Did voi	notify the	(vi) Is	the	(vii) An	nount o	.f
	anization	(II) LIN	organization	in col (i) li	sted in your	organizat		organization (i) organiz	on in colled in the		port	1
J. 9.			(described on lines 1-9 above or IRC section	governing	document?	(i) of your	r support?	```	2			
			(see instructions))	Yes	No	Yes	No	Yes	No			
					}	ľ						
								-				
						 						
	;									:		
Total								<u> </u>				

Sch	edule A (Form 990 or 990-EZ) 2009 L	egal Aid	<u>Society o</u>	f San Mat	eo County	94-145	1894 Page 2
Pa	rt II Support Schedule for	Organizations	Described in	Sections 170	b)(1)(A)(iv) and	d 170(b)(1)(A)(v	ri)
	(Complete only if you checked	d the box on line 5	, 7, or 8 of Part I.)				
Sec	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2083356.	2508071.	1892234.	2333303.	1642099.	10459063.
2	Tax revenues levied for the organ-						
	ızatıon'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	2083356.	2508071.	1892234.	2333303.	1642099.	10459063.
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,						1100604
	column (f)						1180694.
	Public support. Subtract line 5 from line 4	<u> </u>					9278369.
	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006 2508071.	(c) 2007 1892234.	(d) 2008 23333303.	(e) 2009	(f) Total 10459063.
	Amounts from line 4	2083356.	2508071.	1892234.	2333303.	1642099.	10459063.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	5,436.	5,632.	53,511.	60,588.	32,446.	157,613.
_	and income from similar sources	5,430.	3,032.	33,311.	00,300.	32,440.	137,013.
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital	2,501.	18,704.	4,749.	8,540.	12,040.	46,534.
44	assets (Explain in Part IV) Total support. Add lines 7 through 10	2,301.	10,704.	3,130.	0,340.		10663210.
	Gross receipts from related activities,	ete (see instructi	000)			12	10003210.
	First five years. If the Form 990 is for			d fourth or fifth to	v vear as a sectio		
10	organization, check this box and stor	-	s mat, second, tim	a, 10a1111, 01 111111 te	Dr year as a seeme	11 00 1(0)(0)	
Se	ction C. Computation of Publ		rcentage				
	Public support percentage for 2009 (column (f))	,	14	87.01 %
	Public support percentage from 2008	• • • • • • • • • • • • • • • • • • • •		.,,		15	86.63 %
	33 1/3% support test - 2009. If the o			line 13, and line 1	4 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization	ı			$\blacktriangleright X$
t	33 1/3% support test - 2008.If the o	rganization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiz	ation			▶
178	10% -facts-and-circumstances tes	t - 2009.If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	ind line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop h	ere. Explain in Pa	rt IV how the organ	ıızatıon
	meets the "facts-and-circumstances"	test. The organiza	ition qualifies as a	publicly supported	d organization		▶ □
ŀ	10% -facts-and-circumstances tes	-					
	more, and if the organization meets ti	ne "facts-and-circu	mstances" test, cl	neck this box and	stop here. Explair	in Part IV how the	1

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

	edule A (Form 990 or 990-EZ) 2009 Int III Support Schedule for C	Organizations	Described in	Section 509(a)(2) (Complete only	y if you checked the bo	Page 3 ox on line 9 of Part I
Sec	ction A. Public Support						
Cale	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						
	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 business under section 513						
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	<u>-</u>					
	Amounts included on lines 1, 2, and						
, ,	3 received from disqualified persons			i			
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the		-				
	amount on line 13 for the year Add lines 7a and 7b				<u> </u>		
	Public support (Subtract line 7c from line 6)			<u> </u>			
	ction B. Total Support			<u> </u>	£	1	
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(a) 2000	(6 Total
	Amounts from line 6	(0) 2000	(0) 2000	(0) 2001	(u) 2000	(e) 2009	(f) Total
	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						
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth to	ax year as a section	on 501(c)(3) organiz	ation,
	check this box and stop here						▶ □
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2009 (I	ine 8, column (f) d	ivided by line 13, o	column (f))		15	%
16	Public support percentage from 2008	Schedule A, Part	III, line 15			16	%
Sec	ction D. Computation of Inves	stment incom	e Percentage				
17	Investment income percentage for 20	09 (line 10c, colur	nn (f) divided by lir	ne 13, column (f))		17	%
18	Investment income percentage from 2	2008 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2009. If the			on line 14, and line	15 is more than	33 1/3%, and line 1	
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2008. If the	organization did n	ot check a box or	line 14 or line 19a	ı, and line 16 is m	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3% iche	CK this box andet	on here. The oros	nization dualities s	is a nuhlich/ euss	ARIAM ARABAITSIAA	▶
20	line 18 is not more than 33 1/3%, che Private foundation. If the organization		-	•		-	

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

OMB No 1545-0047

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			'	oloyer identification number
	Legal A	id Society of Sa	an Mateo Cou	inty	94-1451894
P	art I-A Complete if the org	anization is exempt un	der section 501(c) or is a section 527 (organization.
1	Provide a description of the organia	ation's direct and indirect politi	ical campaign activities	s in Part IV.	
2	Political expenditures			▶ :	\$
3	Volunteer hours				
FT 75 TO	1177 1117 1117 1117 1117 1117 1117 111				
P	art I-B Complete if the org	<u>janization is exempt un</u>	der section 501(c		
1	= ''	•			
2	Enter the amount of any excise tax			5 5 ► 1	·
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	0 for this year?		Yes No
	a Was a correction made?				Yes No
	b if "Yes," describe in Part IV.			\	(-)(0)
		janization is exempt un			-i -i -i
	Enter the amount directly expended	, ,	•		\$
2	Enter the amount of the filing organ	ization's funds contributed to d	other organizations for s		
_	exempt function activities				\$
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-PO	L, •	
	line 17b	4400 DOL 6 . H 0			
4		•	"IN) of all access 507 a	بالربار والمعارض والم	Yes No
5	Enter the names, addresses and er For each organization listed, enter to		•	-	• •
	that were promptly and directly del	,	•	•	
	(PAC). If additional space is needed		-	opalate org. ogatou i alifa of	a pointou action committee
_	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(b) Name	(b) Address	(0) 2.114	filing organization's	contributions received and
				funds. If none, enter -0-	
					delivered to a separate political organization
					If none, enter -0.
			į.		

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009	Legal Aid S	ociety of S	San Mateo C	ounty 94-1	451894 Page 2
Part II-A Complete if the orga	anization is exemp	ot under section	n 501(c)(3) and fil	ed Form 5768	
(election under sect		<u></u>			
. —	on belongs to an affiliat				
	on checked box A and son Lobbying Expend		visions apply.	(a) Filing organization's	(b) Affiliated group totals
(The term "expend	tures" means amount	s paid or incurred.)		totals	1014.0
1a Total lobbying expenditures to influ	ence public opinion (gra	ass roots lobbying)			
b Total lobbying expenditures to influ	, , ,			1,984.	
c Total lobbying expenditures (add lin	•	, ,,		1,984.	
d Other exempt purpose expenditure	•			2,077,514.	
e Total exempt purpose expenditures				2,079,498.	
f Lobbying nontaxable amount. Enter	the amount from the fo	ollowing table in both	columns	253,975.	
If the amount on line 1e, column (a) or		ing nontaxable amo			
Not over \$500,000	20% of the	e amount on line 1e.			
Over \$500,000 but not over \$1,000	,000 \$100,000	plus 15% of the exce	ess over \$500,000.		
Over \$1,000,000 but not over \$1,50	0,000 \$175,000	plus 10% of the exce	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,0	000,000 \$225,000	plus 5% of the exces	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,00	0			
		.	· . <u>-</u> .		4-4f:
g Grassroots nontaxable amount (ent	er 25% of line 1f)			63,494.	
h Subtract line 1g from line 1a. If zero		0.			
i Subtract line 1f from line 1c. If zero	or less, enter -0-			0.	<u> </u>
j If there is an amount other than zero	o on either line 1h or lin	e 1ı, dıd the organıza	ition file Form 4720	-	
reporting section 4911 tax for this y					Yes No
/Sama arganiza		ging Period Under		alata all of the five	
	itions that made a sec umns below. See the i				
		itures During 4-Yea	<u>-</u> <u>-</u> -	.50,	- · · · · · · · · · · · · · · · · · · ·
	Lobbying Expend	ltures burning 4 rea	. Atcluging I chou		
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount	249,145.	245,531.	247,774.	253,975.	996,425.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,494,638.
c Total lobbying expenditures	2,342.	4,108.	894.	1,984.	9,328.
d Grassroots nontaxable amount	62,286.	61,383.	61,944.	63,494.	249,107.
e Grassroots ceiling amount		· · · · · · · · · · · · · · · · · · ·		····	•
(150% of line 2d, column (e))					373,661.
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 Legal Aid Society of San Mateo County 94-1451894 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)).

		(a))
		Yes	No	Amo	ount
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?		X		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	ļ	X		
C	Media advertisements?		X		
d	Mailings to members, legislators, or the public?		X		
e	Publications, or published or broadcast statements?		X	 	
f	Grants to other organizations for lobbying purposes?		X		
9	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	-	
i	Other activities? If "Yes," describe in Part IV		X		
· i	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	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?			*	
	III-A Complete if the organization is exempt under section 501(c)(4), sect	on 501(c)	(5), or se	ction	
	501(c)(6).			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	163	140
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		
1	"Yes." 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).				
а	Current year		2a		
b	Carryover from last year		2ь		
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				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
_	expenditure next year?		4		
5 Par	Taxable amount of lobbying and political expenditures (see instructions)		5		
	······································	D II D	l d A l		41
	blete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, a y additional information.	na Part II-B,	line 11. Also	, complete	this part
OI WI	y additional information.				
				_	_
	- · · · · · · · · · · · · · · · · · · ·	 -			

Schedule D (Form 990)

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

Department of the Treasury Internal Revenue Service Name of the organization

Legal Aid Society of San Mateo County

Employer identification number 94-1451894

Pai	rt I Organizations Maintaining Donor Adv		or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV	/, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors	s in writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization		Yes No
6	Did the organization inform all grantees, donors, and don		used only
	for charitable purposes and not for the benefit of the dor	nor or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the	e organization answered "Yes" to Form 990, P	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organ	nization (check all that apply)	
	Preservation of land for public use (e.g., recreation	or pleasure) Preservation of an his	torically important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a q	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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic	c structure included in (a)	2c
d	Number of conservation easements included in (c) acqui	red after 8/17/06	2d
3	Number of conservation easements modified, transferred	d, released, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation	n easement is located ►	
5	Does the organization have a written policy regarding the	e periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easeme	nts it holds?	└── Yes └── No
6	Staff and volunteer hours devoted to monitoring, inspect	ting, and enforcing conservation easements d	uring the year 🕨
7	Amount of expenses incurred in monitoring, inspecting,	and enforcing conservation easements during	the year ▶ \$
8	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)?		Yes No
9	In Part XIV, describe how the organization reports conse	ervation easements in its revenue and expense	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organ	inization's financial statements that describes	the organization's accounting for
·	conservation easements.		
Pa	ort III Organizations Maintaining Collection		ther Similar Assets.
	Complete if the organization answered "Yes" to F	orm 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116	•	
	treasures, or other similar assets held for public exhibition	· ·	blic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes the		
Ь	If the organization elected, as permitted under SFAS 116	•	
	or other similar assets held for public exhibition, education	on, or research in turtherance of public service	e, provide the following amounts relating to
	these items		. .
	(i) Revenues included in Form 990, Part VIII, line 1		5
_	(ii) Assets included in Form 990, Part X		\$
2	if the organization received or held works of art, historica		ıl gain, provide
	the following amounts required to be reported under SFA	AS 1 to relating to these items:	▶ ¢
a	•		► \$
Þ	Assets included in Form 990, Part X		> 3

		id Society							<u>51894</u>	
Par	Companizations Maintaining C	ollections of A	t, His	storical T	reasures,	or Othe	<u>r Simila</u>	r Asse	ts (contini	ued)
3	Using the organization's acquisition, accession	on, and other record	ls, ched	ck any of the	e following th	at are a sig	ınıficant u	se of its	collection i	items
	(check all that apply):									
а	Public exhibition	d		Loan or ex	change prog	rams				
b	Scholarly research	е		Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ellections and explain	n how t	they further	the organizat	lion's exem	npt purpo	se in Parl	XIV.	
5	During the year, did the organization solicit or	r receive donations	of art, h	nistorical tre	asures, or otl	ner sımılar	assets			
	to be sold to raise funds rather than to be ma	aintained as part of t	he orga	anization's c	collection?				Yes	No_
Par	Escrow and Custodial Arrange reported an amount on Form 990, Par	-	ete if or	rganization a	answered "Ye	es" to Form	n 990, Par	t iV, line	9, or	
	· · · · · · · · · · · · · · · · · · ·		liani fa						-	
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary to	r contributio	ons or other a	ssets not i	nciuaea		Yes	□ No
	on Form 990, Part X?							L	」 res	N0
Þ	If "Yes," explain the arrangement in Part XIV	and complete the to	llowing	table:			[<u>[</u>			
									Amount	
	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f		٦.,	
2a	Did the organization include an amount on Fo		21?						J Yes	∟ No
,	If "Yes," explain the arrangement in Part XIV.				000 0	. 157 1 - 46				
Par	t V Endowment Funds. Complete if								4.5-	
		(a) Current year 1,080,619.	(b)	Prior year	(c) Two ye	ars back (d) Three ye	ears back	(e) Four y	ears back
1a	, , , , , , , , , , , , , , , , , , ,	27,488.					~~***********	·1···11.	, ,11.,,	
Þ	Contributions									
С	Net investment earnings, gains, and losses	508,040.	<u> </u>	20,311	•		 .			
d	Grants or scholarships				-		·····	•••••		
е	Other expenditures for facilities	27 570		-0 040						
	and programs	27,570.		11 102	•		······································	······		
f	Administrative expenses								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
9	- ,	1,588,577.	_ -	30,619	•		***************************************			***************************************
2	Provide the estimated percentage of the year	r end balance held a								
а	Board designated or quasi-endowment		_%							
Ь	Permanent endowment ► 100.00	%								
		%								
3a	Are there endowment funds not in the posse	ssion of the organiz	ation th	nat are held	and administ	ered for th	e organiz	ation	<u> </u>	
	by:									es No
	(i) unrelated organizations									X
	(ii) related organizations								3a(ii)	<u> </u>
þ	If "Yes" to 3a(ii), are the related organizations	•							3b	
4	Describe in Part XIV the intended uses of the									
Pai	t VI Investments - Land, Building			See Form 99	0, Part X, line	T				
	Description of investment	(a) Cost or o			st or other	1	cumulate	d	(d) Book	value
		basis (investr	nent)		s (other)	dep	reciation		255	-000
1a	Land				75,000.	 	06 11			,000.
b	Buildings			$\frac{1}{1}$	25,968.	1 2	06,49	10.	519	<u>,472.</u>
C	Leasehold improvements			1	00 116	 	m 1			
đ	Equipment			1 :	93,114.	ļ	71,62	25.		<u>,489.</u>
	Other				8,771.					<u>,771.</u>
Total	I. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colu	ımn (B), line	10(c))				924	,732.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 Legal Aid S Part VII Investments - Other Securities. Se	Society of San		94-1451894 Page 3
(a) Description of security or category (including name of security)	(b) Book value	(c) M	ethod of valuation: nd-of-year market value
Financial derivatives			
Closely-held equity interests			
Other			
Guaranteed investment			
contract	1,508,429.		Market Value
Equity funds	600,221.		Market Value
Money market funds	20,364.	End-of-Year	Market Value
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)	2,129,014.		
Part VIII Investments - Program Related. S	See Form 990, Part X, line 1		
(a) Description of investment type	(b) Book value	• • • • • • • • • • • • • • • • • • • •	lethod of valuation: nd-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, line	15		
	Description		(b) Book value
1-2	<u> </u>		(4, 250, 13, 25
	 		
Total. (Column (b) must equal Form 990, Part X, col (B) lin	o 15)	-	
Part X Other Liabilities. See Form 990, Part X			
1. (a) Description of liability	,	(b) Amount	· · · · · · · · · · · · · · · · · · ·
Federal income taxes			ŕ
	-		
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 25)		
2. FIN 48 Footnote. In Part XIV, provide the text of the foo	otnote to the organization's	financial statements that	reports the organization's liability for

	dule D (Form 990) 2009 Legal Ald Society of San Ma					1451894	Page 4
Pa	A XI Reconciliation of Change in Net Assets from Form 990 to	<u>Audite</u>	ed Finan	cial Stat	emen		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1		1,686	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		2,079	<u>,498.</u>
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3			,913.
4	Net unrealized gains (losses) on investments			4		494	,310.
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			,310.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and			10			<u>,397.</u>
Pa	t XII Reconciliation of Revenue per Audited Financial Statemer	nts Wi	th Rever	nue per l	Retur		
1	Total revenue, gains, and other support per audited financial statements				1	2,627	<u>,990.</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	87	4,192	•		
C	Recoveries of prior year grants	2c					
d	Other (Describe in Part XIV.)	2d	6	7,213	•		
е	Add lines 2a through 2d				2e	941	,405.
3	Subtract line 2e from line 1				3	941 1,686	,585.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.				***************************************		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part 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	1,686	,585.
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	nts W	ith Expe	nses pe	r Retu		
1	Total expenses and losses per audited financial statements				1	3,020	,903.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities	2a	87	4,192	•		
b	Prior year adjustments	2b			7		
c	Other losses	2c			7		
d	Other (Describe in Part XIV.)	2d	6	7,213	•		
е	Add lines 2a through 2d				2e	941	405.
3	Subtract line 2e from line 1				3	2,079	,498.
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			7		
C	Add lines 4a and 4b				4c		0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				5	2,079	498.
Pai	t XIV Supplemental Information		_				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III,	lines 1	a and 4; Pa	rt IV, lines	1b and	2b; 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 comple	ete this	part to pro	vide any ac	ditiona	l information.	
Paı	t V, line 4: The interest is used for oper	atir	ig exp	enses	of	the	
org	ganization while the corpus remains intact	ın p	erpet	uity.			
Dar	ct VII line 2d. Cross income from fundrais	ina	01100+	+	:	1	_
rai	t XII, line 2d: Gross income from fundrais	1119	event	s not	THC	ruded II	1
cor	ntributions - \$67,213						
201	VOLIDACIONO VOLIZIO						
		_					
Par	t XIII, line 2d: Direct expenses from fund	rais	sing e	vents	- \$	67,213	
					•		

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

▶ Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open To Public

Name of the organization

Department of the Treasury

Internal Revenue Service

Inspection Employer identification number

Schedule G (Form 990 or 990-EZ) 2009

Legal Aid Society of San Mateo County 94-1451894 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Solicitation of non-government grants Mail solicitations Internet and email solicitations Solicitation of government grants b Special fundraising events Phone solicitations c In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or No Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col (i) Yes_ No Total 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

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

Schedule G (Form 990 or 990 EZ) 2009 Legal Aid Society of San Mateo County 94-1451894 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000. (b) Event #2 (c) Other events (a) Event #1 (d) Total events Golf Annual None (add col. (a) through Luncheon Tournament col. (c)) (event type) (total number) (event type) 307,307. 454,345. 147,038. Gross receipts 266,822. 387,132. 120,310. Less: Charitable contributions 26,728. 40,485 67,213. 3 Gross income (line 1 minus line 2) Cash prizes Noncash prizes **Direct Expenses** 6 Rent/facility costs 7 Food and beverages 8 Entertainment 67,213. 26,728. 40,485. Other direct expenses 67,213, 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Combine line 3, column (d), and line 10 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Expenses 3 Noncash prizes Direct Rent/facility costs 5 Other direct expenses Yes 6 Volunteer labor No No No Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary Combine line 1, column (d), and line 7 Yes No Enter the state(s) in which the organization operates gaming activities: a is the organization licensed to operate gaming activities in each of these states? 9a **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," explain:

11

administer charitable gaming?

Does the organization operate gaming activities with nonmembers?

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to

Schedule G (Form 990 or 990 EZ) 2009 Legal Ald Society of San Mateo County 94-14.	2182		<u>ige 3</u>
		Yes	No
13 Indicate the percentage of gaming activity operated in:			
a The organization's facility	⊣ ;		
b An outside facility	의 1		
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
Name			
Address ▶			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$			
c f 'Yes,' enter name and address of the third party:			İ
Name			İ
Address ►			
16 Gaming manager information:			
Name			
Gaming manager compensation \$			
Description of services provided ▶	.		
Director/officer Employee Independent contractor			
17 Mandatory distributions:			
a is the organization required under state law to make charitable distributions from the gaming proceeds to			1
retain the state gaming license?	17a		ļ
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
organization's own exempt activities during the tax year ▶ \$		L	L
Schedule G (Form 9	/90 or 99	90-EZ	<i>)</i> 2009

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ▶ Attach to Form 990. San Mateo County of Legal Aid Society Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE I (Form 990)

2009 .	Open to Public

OMB No 1545-0047

Employer identification number

2 94-1451894 (h) Purpose of grant or assistance X Yes recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection non-cash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant (c) IRC section if applicable Enter total number of section 501(c)(3) and government organizations General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization or government Part Part #

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

Schedule I (Form 990) 2009

94-1451894

Page 2

Schedule I (Form 990) 2009 Legal Aid Society of San Mateo County

Part II Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

USE MAIN SCHEOUGE FT (FORTH 990) II AGUIROHA SPACE IS HEEGED.	ace is lieeded.				
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Emergency assistance	31	9,273.	.0		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the information	required in Part I, I	ine 2, and any other	additional information.	
Emergency assistance to clients is prov	provided	to help	ided to help families and	nd	
individuals in crisis to meet emergency		eds for fo	needs for food and shelter.	lter.	
Upon approval of the emergency check re	ck requis	quisition by the	the Executive	ive	
Director, the emergency check is is	issued to	the reque	to the requestor's client in	ent in	
need.					

Schedule I (Form 990) 2009

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990

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

Legal Aid Society of San Mateo County

Employer identification number 94-1451894

Form 990, Part I, Line 1, Description of Organization Mission:
The Legal Aid Society of San Mateo County ("Legal Aid") is a private
non-profit law firm providing civil legal services since 1959 to low
income individuals, families, seniors, adults, teens, and children in
San Mateo County. Legal Aid's mission is to help vulnerable and
disadvantaged people improve their lives through equal access to
justice. Legal Aid provides individual representation, community
education, systemic advocacy and strategic collaborative approaches to
address legal issues and resolve problems in important areas of basic
needs including access to housing and healthcare, special education and
disability rights and domestic violence/family law matters.
Form 990, Part VI, Section B, line 11: A copy of the Form 990 is presented
to the Board for review prior to submission.
Form 990, Part VI, Section B, Line 12c: Board members are asked to
complete and sign conflict of interest disclosures at the Annual Meeting.
Form 990, Part VI, Section B, Line 15a: The organization uses the following
to establish the compensation of its Executive Director:
- Compensation Committee;
- Written Employment Contract;
- Compensation survey, and
- Approval by the Board.

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

Legal Aid Society of San Mateo County 94

Employer identification number 94-1451894

documents available to the public:
a. Form 990 is available on its website, another organization's website,
and upon request.
b. Governing documents : Website and upon request.
c. Conflict of Interest Policy : Website and upon request.
d. Financial Statements: Upon request.

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

-	u are filing for an Automatic 3-Month Extension, complete only Part I and check this box u are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	► X
•	t complete Part II unless you have already been granted an automatic 3-month extension on a previously fil	·
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 com only	plete
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an ncome tax returns.	extension of time
noted not au ou mi	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronication at the extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or collust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Chanties & Nonprofits	cally if (1) you want the additional nsolidated Form 990·T. Instead,
Type o	• •	Employer identification number
<i>,</i> ,,,,,	Legal Aid Society of San Mateo County	94-1451894
ile by the due date filing you	e for Number, street, and room or suite no. If a P.O. box, see instructions. 1 521 East 5th Avenue	
eturn S nstruction		
Check	type of return to be filed (file a separate application for each return):	
	Form 990	27 69
Tele If the	Susan Stortini books are in the care of 521 East 5th Avenue - San Mateo, CA 944 sphone No. (650) 558-0915 FAX No. (650) 558-06 be organization does not have an office or place of business in the United States, check this box also is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box and attach a list with the names and EINs of all	73 • □ s is for the whole group, check this
I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of tine November 15, 2010, to file the exempt organization return for the organization naise for the organization's return for:		
1	calendar year or X tax year beginning APR 1, 2009, and ending MAR 31, 2010	·
2	f this tax year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
	f 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 \$
b i	f this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	
-	ax payments made Include any prior year overpayment allowed as a credit.	3b \$
(Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	3c \$ N/A
	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	