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_{Form} 990

232001 12-10-12

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047 2012

Open to Public Inspection

Ar	or the	2012 calendar year, or tax year beginning APR 1, 2012 and	enaing 15	IAR 31, 2013				
B	heck if	C Name of organization		D Employer identific	ation number			
\subseteq	Addres	Legal Aid Society of San Mateo County						
$oxed{L}$	Name chang	Doing Business As		94-14	51894			
	initial return		Room/suite	E Telephone number (650)	517-8913			
	Termir ated		30 Twin Dolphin Drive 123					
<u></u>	Amend	City, town, or post office, state, and ZIP code		G Gross receipts \$	2,495,448.			
_	Application pendir	Redwood City, CA 34003		H(a) is this a group ret	tum			
	penun	F Name and address of principal officer: M. Statey nawver						
same as C above H(b) Are all affiliates included? Ye								
		empt status: X 501(c)(3) 501(c) ()	or 527	If "No," attach a l	ist. (see instructions)			
		e:▶ www.legalaidsmc.org		H(c) Group exemption				
		organization: X Corporation	L Year	of formation: 1959 M	State of legal domicile: CA			
Pa	art I	Summary		<u></u>				
ø	1	Briefly describe the organization's mission or most significant activities: See	Schedu	ile 0				
Activities & Governance			· · · · · · · · · · · · · · · · · · ·					
er.	2	Check this box 🕨 📖 if the organization discontinued its operations or dispo	sed of more	e than 25% of its net as:				
ŏ	3	Number of voting members of the governing body (Part VI, line 1a)		3	18			
<u>م</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	18			
es	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	35			
<u>X</u>	6	Total number of volunteers (estimate if necessary)		6	386			
Ç	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.			
	b	Net unrelated business taxable income from Form 990-T, line 34		7ь	0.			
>				Prior Year	Current Year			
- 0	8	Contributions and grants (Part VIII, line 1h)		2,436,820.	2,317,148.			
enne	9	Program service revenue (Part VIII, line 2g)		0.	0.			
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		38,050.	23,540.			
	11	Other revenue (Part VIII, column (A), lines 5,00, 8c, 9c, 10c, and the		885.	71,454.			
<u> </u>	12	Total revenue - add lines 8 through 11 (mustegual Part VIII, column Attine 22)		2,475,755.	2,412,142.			
		Grants and similar amounts paid (Part IX, column (A), lines 13)		7,089.	6,315.			
9 4		Benefits paid to or for members (Part IX, column (A) 1164)		0.	0.			
 		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,888,739.	1,996,006.			
##N€ Expenses	1	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
Ξĝ	1	Total fundraising expenses (Part IX, column (D), line 25) > 222, 3	52.					
ш	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		621,569.	607,488.			
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,517,397.	2,609,809.			
	19	Revenue less expenses. Subtract line 18 from line 12		<41,642.	<197,667. × <197,667.			
Net Assets or Fund Balances			В	eginning of Current Year	End of Year			
ets	20	Total assets (Part X, line 16)		4,114,910.	4,135,415.			
ASS	21	Total liabilities (Part X, line 26)		1,148,516.	1,176,522.			
Ę,Ę	22	Net assets or fund balances. Subtract line 21 from line 20		2,966,394.	2,958,893.			
Pa	art II	Signature Block						
		lities of perjury, I declare that I have examined this return, including accompanying schedule	es and staten	nents, and to the best of my	knowledge and belief, it is			
		t, and complete. Declaration of preparer (other than officer) is based on all information of w			,			
	,	Mr Alexen Han		12/24/	13			
Sig	n	Signature of officer		Date (<u>, , , , , , , , , , , , , , , , , , , </u>			
Her		M. Stacey Hawver, Executive Director						
1161	•	Type or print name and title	-					
Print/Type preparer's name Preparer's signature Date Check PTIN								
Paid	d	Sean E. Cain, CPA		1/25/2				
	parer	Firm's name Harrington Group, CRAS, LLP		Firm's EIN	95-4557617			
	Only		M150	FIIIII S EIN	73 4331011			
036	Unity	Firm's address 234 East Colorado Blvd., Suite Pasadena, CA 91101	11170	Dhana na / f	526) 403-6801			
	. 41	· · · · · · · · · · · · · · · · · · ·		Phone no.	[T			
Ma	v tne li	RS discuss this return with the preparer shown above? (see instructions)			X Yes No			

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2012)

	990 (2012) Legal Aid Society of San Mateo County	94-1451894	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
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?	L Yes	X No
_	If "Yes," describe these new services on Schedule O.	<u></u>	▽]
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	∟ Yes	X No
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	_revenue, if any, for each program service reported.	ro, the total expenses, t	und
4a	(Code) (Expenses \$ 1,832,725. including grants of \$ 6,315.) (Revenue	e \$	
	Legal Services - help disadvantaged people improve their	lives thro	ugh
	equal access to justice.		
		<u> </u>	
		.— <u></u>	
			
4b	(Code) (Expenses \$ 173,474. including grants of \$) (Revenue)
	Area Agency On Aging - provide advocacy to seniors and p		
	disabilities to ensure that their rights are protected a	and that the	У
	are receiving the benefits to which they are entitled.		
			
			
			
4c	(Code) (Expenses \$ 38,215 • including grants of \$) (Revenue		
	Legal Services Trust Fund - provide advocacy services to		y, '
	disabled, juveniles and other disadvantaged or underserv		
	groups.		
	Oll Control Octobrill Ol		
4d	Other program services (Describe in Schedule O.)	•	
4e	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses > 2,044,414.		
	Total program del 1100 experimed?	Form 9	90 (2012)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	ļ		
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributorହ	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		Х	
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5_		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			37
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		х
٥	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
8	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?		1	
	If "Yes," complete Schedule D, Part IV	9		<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10_	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	- 11		
·	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
þ	Was the organization included in consolidated, independent audited financial statements for the tax year?			.,
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	X
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a	<u> </u>	
þ	univestment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	1		
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15_		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			_v
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40	x	1
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	 ^	
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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
ورم h	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2012)

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Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			İ
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			l <u></u>
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			٠,,
	Schedule K. If "No", go to line 25	24a	<u> </u>	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	ļ	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease		ŀ	
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	_	-
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	-	X
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			X
	Schedule L, Part I	25b		^
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			X
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		 ^
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	27		x
00	of any of these persons? If "Yes," complete Schedule L, Part III	-21	╁	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	ŀ		ļ
_	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	CALLER TO A CONTROL OF THE CONTROL O	28b	├	X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	ţ	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
-	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
-	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<u>L</u> .	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Note. All Form 990 filers are required to complete Schedule O

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37

X

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Form 990 (2012) Legal Aid Society of San Mateo County
Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
_			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	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			,,
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a_		X
b	If "Yes," enter the name of the foreign country:	ļ		
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	_		х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		 ^
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
ьа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6a		х
	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Oa		
D	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Dillians the second of the second sec	7a	Х	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f	37,	X
9		7g	N/	
h	-	7h	N/	<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A			1
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	 	
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? N/A	9a		
a	but the digatilization make any taxable distributions affect better feet.	9b		
ь 10	Section 501(c)(7) organizations. Enter:		1	<u> </u>
а	N/A 100	1		
b	A LILL Second D. 1.100 Levid O. for exhibit a contract of the facilities.			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against]
	amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	 	<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	ŀ		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	 	 	├—
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a	-	┼
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	1		
	Enter the amount of reserves on hand [13c] [13c]	140	 	X
14a	Did the organization receive any payments for indoor tanning services during the tax year? If "Vos." has it filed a Form 730 to report these payments? If "No." provide an explanation in Schedule O	14a	\vdash	

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.

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			_
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 18			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		<u> </u>	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	- 	<u> </u>
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	<u> </u>
_	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		v	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	<u>├</u> ^	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-	x	
40	in Schedule O how this was done	12c	X	_
13	Did the organization have a written whistleblower policy?	14	X	-
14	Did the organization have a written document retention and destruction policy?	14		
15	Did the process for determining compensation of the following persons include a review and approval by independent			
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15a	х	
	Other officers or key employees of the organization	15b		x
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	135		
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			ŀ
.02	taxable entity during the year?	16a		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
-	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶CA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availat	ole	
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finai	ncial	
•	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion:	-	
	Susan Stortini - The Natalie Lanam Justice Center - (650) 517-8			
	330 Twin Dolphin Drive, Suite 123, Redwood City, CA 94065			

form 990 (2012)	Legal	Aid	Society	of	San
01111 330 (2012)				~ -	Can

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

Mateo County

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

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

Check this box if neither the organization n	or any related	orga	nıza	ation	cor	npei	nsat	ted any current officer, o	director, or trustee.		
(A)	(B)	(C)					(D)	(E)	(F)		
Name and Title	Average	(do	Position check more than one			one	Reportable	Reportable	Estimated		
	hours per	box	box, unless person is both an officer and a director/trustee)			is bot	h an	compensation	compensation	amount of	
	Week	_					T	from	from related	other	
	(list any hours for	direct						the organization	organizations (W-2/1099-MISC)	compensation from the	
	related	ь в	stee			nsate		(W-2/1099-MISC)	(** 2, , 555 ****************************	organization	
	organizations	individual trustee or director	institutional trustee		Кеу етріоуве	Highest compensated employee	l			and related	
	below	Mdua	ututo	 	ᄩ	hest c	ě			organizations	
	line)	ᆵ	lus	Officer	, Ke	₹ 5	ĕ				
(1) Stacey Keare	1.00	٠,,		۱.,							
President	1 00	X		X	L	<u> </u>	_	0.	0.	0.	
(2) Mary H. Lin	1.00	٠,		. ,	ŀ					_	
Vice President (3) Laura I. Bushnell	1 00	X	\vdash	X	<u> </u>	<u> </u>	_	0.	0.	0.	
	1.00	x		x	ļ			0.	^	_	
Secretary (4) Greg Regan CPA	1.00	^		^	⊢	 	-	U •	0.	0.	
Treasurer	1.00	x		x	1			0.	0.	0.	
(5) Jessica Arner	1.00	₽	\vdash	^	┝	-	┝	<u> </u>	0.	<u> </u>	
Member	1.00	X				l	1	0.	0.	0.	
(6) Lynne Esselstein	1.00	^		\vdash	_	┢	\vdash	0.	0.	•	
Member	1.00	x				1		0.	0.	0.	
(7) Jeffrey Hyman	1.00			\vdash		\vdash	\vdash	 	<u> </u>		
Member		x						0.	0.	0.	
(8) Brian Levy	1.00		\vdash	\vdash	_	\vdash	_				
Member		x					ł	0.	0.	0.	
(9) Leticia Toledo	1.00				<u> </u>	 			·		
Member		X					1	0.	0.	0.	
(10) Rand N. White	1.00										
Member		X		ŀ				0.	0.	0.	
(11) Laurence A. Weiss	1.00					T					
Member		Х						0.	0.	0.	
(12) Niki B. Okcu	1.00										
Member		X						0.	0.	0.	
(13) Keith L. Wuster	1.00			ĺ					•		
Member		X						0.	0.	0.	
(14) Aaron M. Armstrong	1.00							_		_	
Member		X					_	0.	0.	0.	
(15) Michele Bissada	1.00									_	
Member		X	<u> </u>	L_	<u> </u>	<u> </u>	_	0.	0.	0.	
(16) Ara R. Jabagchourian	1.00							_		_	
Member	4.00	X	<u></u>	<u> </u>		<u> </u>	<u> </u>	0.	0.	0.	
(17) Janice S. Tam	1.00								_	_	
Member		X	L	L_		<u> </u>	<u> </u>	0.	0.	0.	

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

\$100,000 of compensation from the organization

Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII Revenue excluded from tax under sections 512, 513, or 514 (C) Related or Unrelated Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b b Membership dues 518,696. 1c c Fundraising events 1d d Related organizations 631,143. e Government grants (contributions) 1e f All other contributions, gifts, grants, and ,167,309 similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 2,317,148. h Total. Add lines 1a-1f Business Code Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 33,790. 33,790. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) 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 (i) Securities (II) Other assets other than inventory b Less: cost or other basis 10,250 and sales expenses <10,250. c Gain or (loss) <10,250. <10,250.> d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ 518,696. of contributions reported on line 1c). See 73,056 Part IV, line 18 73,056. b Less: direct expenses 0. 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 **Business Code** 990099 71,351. 71,351. 11 a Cy-pres award 103. b Miscellaneous income 900099 103. d All other revenue 71,454. e Total. Add lines 11a-11d

2,412,142.

Total revenue. See instructions.

232009 12-10-12

0.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (C) Management and general expenses (D) Fundraising Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 2 Grants and other assistance to individuals in 6,315. 6,315. the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States, See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 134,953. 67,477. 53,981. 13,495. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 1,405,597. 1,142,851 119,260. 143,486. 7 Other salaries and wages Pension plan accruals and contributions (include 37,333. 29,866. section 401(k) and 403(b) employer contributions) 4,107. 3,360. 238,258. 292,634. 26,315. 28,061. Other employee benefits 125,489. 100,391. 13,804. 11,294. 10 Payroll taxes Fees for services (non-employees): 11 Management Legal b 9,039. 2,010. 15,500. 4,451. С Accounting Lobbying Professional fundraising services. See Part IV, line 17 24,184. 24,184. Investment management fees Other (If line 11g amount exceeds 10% of line 25, 204,881 197,463. 7,418 column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 50,205 41,264. 7,209. 1,732. 13 Office expenses Information technology 14 15 Royalties 49,036. 97,373. 38,732. 9,605. 16 Occupancy 14,134 11,518. 2,616. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 35,230. 32,298. 1,541. 1,391. 20 Interest 21 Payments to affiliates 48,643. 48,643. Depreciation, depletion, and amortization 22 16,949. 6,510. 9,085. 1,354. 23 Insurance Other expenses, Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 38,440. 8,773. 24,683. 4,984. Equipment repairs and m 5,135. Miscellaneous 24,888. 16,527. 3,226. 12,048. Court and filing costs 12,048. С 11,079. 11,079. Library supplements 13,934. 10,540. 3,294. 100. All other expenses 2,609,809. 2,044,414. 343,043. 222,352. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ıf following SOP 98-2 (ASC 958-720)

Pai	t X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X	· .		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	414,693.	1	286,153.
	2	Savings and temporary cash investments	76.	2	
	3	Pledges and grants receivable, net	374,131.	3	139,257.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L	·	5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instr). Complete Part II of Sch L		_6	
ets	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	42,157.	9	54,588
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 1,368,353.			
	b	Less: accumulated depreciation 10b 317,598.	1,016,956.	10c	1,050,755
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11	2,266,897.	12	2,604,662
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,114,910.	16	4,135,415
	17	Accounts payable and accrued expenses	220,582.	17	253,826
	18	Grants payable		18	
	19	Deferred revenue	467,995.	19	474,135
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,		1	
jab		key employees, highest compensated employees, and disqualified persons.			
_		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	459,939.	23	448,561
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	4 4 4 0 5 4 6	25	4 456 500
	26	Total liabilities. Add lines 17 through 25	1,148,516.	26	1,176,522
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
es		complete lines 27 through 29, and lines 33 and 34.	000 500		750 001
au	27	Unrestricted net assets	877,537.		750,881
Bai	28	Temporarily restricted net assets	410,747.	28	329,902
Net Assets or Fund Balances	29	Permanently restricted net assets	1,678,110.	29	1,878,110
F		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐			
, o		and complete lines 30 through 34.			
sets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et	32	Retained earnings, endowment, accumulated income, or other funds		32	0.050.000
4	33	Total net assets or fund balances	2,966,394.	33	2,958,893
	34	Total liabilities and net assets/fund balances	4,114,910.	34	4,135,415.

	990 (2012) Legal Aid Society of San Mateo County	94-	1451	894	Pag	₁₀ 12
Pai	t XI Reconciliation of Net Assets					
_	Check if Schedule O contains a response to any question in this Part XI					
			•			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	, 41	$\frac{2}{1}$	<u>42.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		,60		
3	Revenue less expenses. Subtract line 2 from line 1	3				<u>67.</u> >
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	,96		
5	Net unrealized gains (losses) on investments	5		19	0,1	<u>66.</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	2	<u>, 95</u>	<u>8,8</u>	<u>93.</u>
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					Щ.
			,		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			ĺ		ı
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?]	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a	İ	ļ		
	separate basis, consolidated basis, or both:			Ì		
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,				
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis			1		
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Aud	nt			
	Act and OMB Circular A-133?		1	3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ııred aud	ıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Employer identification number

			Legal A	id Society o	f San	Mate	o Cou	nty		9.	4-1451	894	
Pa	rt I	Reason	for Public Char	ity Status (All organiza	ations mus	st complet	e this part) See inst	ructions.				
Πhe	organ	zation is not a	private foundation I	because it is: (For lines 1	through 1	1, check o	only one b	ox.)					
1			•	s, or association of churc	_								
2	\sqcap	•		0(b)(1)(A)(ii). (Attach Sch			•						
3	\sqcap			tal service organization d	•	n section	170(b)(1)(Δ\fiii\					
4	一	•	•	operated in conjunction v					ΒΛΑΙΑΛ	i) Enter i	the hospital	's nam	A
•		city, and state	-	sporatoa iir oonjanotion t	aoo,	pitai dodoi			(~)(·)(··	.,. L			,
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
9	ш	section 170(b)(1)(A)(iv). (Complete Part II.)											
_		^		•			470/LV/4	V A V- A					
6	믕	-	•	ent or governmental unit									_
7	X	•	•	eives a substantial part o	of its supp	ort from a	governme	ntai unit o	r trom the	generai	public desc	ribea i	n
		-	b)(1)(A)(vi). (Comple	·									
8	\vdash	•		ection 170(b)(1)(A)(vi). (_
9	ш	•	•	eives: (1) more than 33 1							_	-	
				nctions - subject to certa									
		income and u	inrelated business to	axable income (less sect	ion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nization	after June 3	0, 197	' 5.
		See section	509(a)(2). (Complete	Part III.)									
10	닏	•	•	perated exclusively to tes		•							
11	ш			perated exclusively for th									or
		more publicly	supported organiza	ations described in section	on 509(a)(1	l) or section	on 509(a)(2) See sec	tion 509(a	a)(3). Ch	eck the box	that	
		describes the	type of supporting	organization and comple	ete lines 1°	1e through	11h.						
	_	a Type I		•	/pe III · Fur	-	•	d			n-functional		
е	لــا	By checking	this box, I certify tha	at the organization is not	controlled	directly o	r indirectly	by one o	r more disc	qualified	persons oth	ner tha	ın
		foundation m	anagers and other t	han one or more publicly	/ supporte	d organiza	itions desc	cribed in s	ection 509	9(a)(1) or	section 509	ı(a)(2).	
f		If the organiz	ation received a writ	ten determination from t	he IRS tha	atıtıs a Ty	pe I, Type	II, or Type	e III				
		supporting or	rganization, check th	nis box									
Ę)	Since August	t 17, 2006, has the o	organization accepted an	ny gift or co	ontribution	from any	of the foll	owing per	sons?			
		(i) A person	n who directly or ind	irectly controls, either al	one or tog	ether with	persons o	lescribed	ın (II) and (III) below	', <u> </u>	Yes	No
		the gove	erning body of the si	upported organization?							11g(i)	<u> </u>	
		(ii) A family	member of a persor	n described in (i) above?							11g(ii)	ļ	
		(iii) A 35% d	controlled entity of a	person described in (i) o	or (II) above	e?					11g(iii)	<u> </u>	
ŀ	1	Provide the f	ollowing information	about the supported org	ganızatıon((s).							
(i) Name	of supported	(ii) EIN		(iv) Is the o			ı notify the	(vi) ls organizatio	the	(vii) Amoun	t of mo	netary
•	orga	anızation	, ,	(00000	in col. (i) lis				l (i) organız	ed in the	sup	port	
				above or IRC section (see instructions))	governing	document	(1) of your	support?	U.S	.7			
				(acc mandonona))	Yes	No	Yes	No	Yes	No			_
									1				
										<u> </u>	ļ		
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					-				-				
Tot	al		1	1			1	}			1		

Schedule A (Form 990 or 990 EZ) 2012 Legal Aid Society of San Mateo County 94-1451894 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2,333,303 1,642,099 2,129,929 2,436,820 2,317,148 10,859,299. 2 Tax revenues levied for the organization'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 2,333,303 1,642,099 2,129,929 2,436,820 2,317,148 10,859,299. 4 Total. Add lines 1 through 3 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, 626,641. column (f) 10,232,658. 6 Public support, Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total 2,333,303. 1,642,099 2,129,929 2,436,820, 2,317,148. 10,859,299. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 32,550. 38,050. 33,790. 60,588. 32,446. 197,424. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 8.540 12.040. 300. 885. 71.454. 93.219. assets (Explain in Part IV.) 11 12 13 S 14 15 16

	assets (Explain in Latery.)	<u> </u>	,	• • • •	• • • •	,				
11	Total support. Add lines 7 through 10						11,149,942.			
12	Gross receipts from related activities,	, etc. (see instructi	ons)			12				
13	First five years. If the Form 990 is for	r the organization's	s first, second, thire	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)				
	organization, check this box and stor									
Se	Section C. Computation of Public Support Percentage									
14	Public support percentage for 2012 (line 6, column (f) d	ıvıded by line 11, c	olumn (f))		14	91.77 %			
15	Public support percentage from 2011	Schedule A, Part	II, line 14			15	94.22 %			
16a	16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and									
	stop here. The organization qualifies as a publicly supported organization									
t	33 1/3% support test - 2011. If the	organization did no	ot check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box			
	and stop here. The organization qual	lifies as a publicly :	supported organiza	ation			▶□			
178	10% -facts-and-circumstances tes	i t - 2012. If the org	anization did not d	check a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,			
	and if the organization meets the "fac	ts-and-circumstan	ices" test, check th	nis box and stop h e	ere. Explain in Pai	rt IV how the organ	ization			
	meets the "facts-and-circumstances"	test. The organiza	ition qualifies as a	publicly supported	organization		▶□			
t	10% -facts-and-circumstances tes	i t - 2011. If the org	janization did not d	check a box on line	13, 16a, 16b, or	17a, and line 15 is	10% or			
	more, and if the organization meets the	he "facts-and-circu	ımstances" test, cl	heck this box and s	stop here. Explain	n in Part IV how the				
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization									
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b	, check this box a	and see instructions	s Þ			
		-			Sche	edule A (Form 990	or 990-EZ) 2012			

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")								
2	Gross receipts from admissions,		•						
	merchandise sold or services per-	ı							
	formed, or facilities furnished in any activity that is related to the	ı							
	organization's tax-exempt purpose	į							
3	Gross receipts from activities that	ı							
	are not an unrelated trade or bus-								
	iness under section 513	í							
4	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
5	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge					ļ			
6	Total. Add lines 1 through 5								
78	Amounts included on lines 1, 2, and								
	3 received from disqualified persons								
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								
	Public support (Subtract line 7c from line 6.)	<u></u>				<u> </u>	<u> </u>		
	ction B. Total Support	,		<u> </u>	Т	Τ	1		
	endar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
	Amounts from line 6								
10:	Gross income from interest, dividends, payments received on								
	securities loans, rents, royalties								
	and income from similar sources	-					-		
'	Unrelated business taxable income								
	(less section 511 taxes) from businesses								
	acquired after June 30, 1975								
	Add lines 10a and 10b								
11	Net income from unrelated business activities not included in line 10b,								
	whether or not the business is								
40	regularly carried on Other income Do not include gain		. .			<u> </u>			
12	or loss from the sale of capital						ļ		
	assets (Explain in Part IV.)					 			
	Total support. (Add lines 9, 10c, 11, and 12)					501/-)(0)			
14	First five years. If the Form 990 is fo	r the organization?	s tirst, secona, tni	ra, rourth, or titth t	tax year as a section	on 501(c)(3) organi	zation,		
<u> </u>	check this box and stop here ction C. Computation of Publ	ic Support Pe	rcentage						
_	Public support percentage for 2012 (column (fl)		15	%		
16				Column (ij)		16	<u>%</u>		
	ction D. Computation of Inve			·		1101			
_	Investment income percentage for 20					17	%		
18				(,,,		18	%		
	a 33 1/3% support tests - 2012. If the			on line 14. and lin	e 15 is more than				
	more than 33 1/3%, check this box a						▶□		
1	b 33 1/3% support tests - 2011. If the						and		
20	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions								

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

► See separate instructions.

2012

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.

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

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

If the organization answered "Yes," 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), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

	•	Control of the contro	. u.,, c oi iii 000 Ei	<u>., , </u>	- Λ, .α	A)
	ection 501(c)(4), (5), or (6) organizat	ions: Complete Part III.		· · · · · · · · · · · · · · · · · · ·	Emple	er identification number
vame	of organization	id Cogioty of Co-	Water Com		-mpio)	94-1451894
Dor	Legal A	id Society of San anization is exempt unde	mateo Cour	orio coetien 5'	27 050	
Par	t I-A Complete if the org	anization is exempt unde	r section 501(c)	or is a section 52	27 Org	janization.
1 F	Provide a description of the organiz	ation's direct and indirect political	campaign activities i	n Part IV.		
2 F	Political expenditures				▶\$_	
3 \	/olunteer hours				_	
Par	t I-B Complete if the org	janization is exempt unde	r section 501(c)	(3).		
1 8	Enter the amount of any excise tax	incurred by the organization unde	r section 4955		> \$_	
2 E	Enter the amount of any excise tax	incurred by organization manager	s under section 4955	I	▶\$_	
3 I	f the organization incurred a sectio	n 4955 tax, did it file Form 4720 fo	or this year?			Yes No
4a \	Vas a correction made?					Yes No
bl	f "Yes," describe in Part IV.					
Par	t I-C Complete if the org	janization is exempt unde	r section 501(c),	except section :	501(c)(3).
1 E	nter the amount directly expended	by the filing organization for sect	tion 527 exempt funct	tion activities	▶\$	
	Enter the amount of the filing organ	, , ,	•		_	
	exempt function activities		ŭ		▶ \$	
	Total exempt function expenditures	. Add lines 1 and 2 Enter here an	d on Form 1120-POL		_	
	ine 17b			•	▶\$	
	Did the filing organization file Form	1120-POL for this year?			_	Yes No
	Enter the names, addresses and en	·) of all section 527 pc	olitical organizations to	which	the filing organization
	nade payments. For each organiza	• •	•	~		
	contributions received that were pro-	•	• •			•
ŗ	political action committee (PAC). If	additional space is needed, provid	de information in Part	IV.		
<u>`</u>	(a) Name	(b) Address	(c) EIN	(d) Amount paid fr	rom	(e) Amount of political
	(a) Hame	(b) Addices	(0) 2	filing organization		contributions received and
				funds. If none, ente		promptly and directly
						delivered to a separate political organization.
						If none, enter -0
					 +	
				 		· · · · · · · · · · · · · · · · · · ·
						
						
					\longrightarrow	

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

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990 EZ) 2012 Part II-A Complete if the org	Legal Aid	Society of S	an Mateo Co	unty 94-1	451894 Page 2
Part II-A Complete if the org (election under sec		empt under section	n 50 r(c)(s) and in	ea Form 5700	
		filiated group (and list in	Part IV each offiliated	aroup mombor's nom	o address FIN
	e of excess lobbying		reart iv each ainliated	group members nam	e, address, Eliv,
, r		and "limited control" pro	visions annly		
Limit	s on Lobbying Exp			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ience public opinion	(grass roots lobbying)		1,012.	
b Total lobbying expenditures to influ				1,019.	
c Total lobbying expenditures (add li	<u>.</u>	ody (direct lobbying)		2,031.	
d Other exempt purpose expenditure	•			2,607,778.	
e Total exempt purpose expenditure		Id)		2,609,809.	
f Lobbying nontaxable amount Ente	-	-	h columns.	280,490.	
If the amount on line 1e, column (a) o		bbying nontaxable am			
Not over \$500,000		of the amount on line 1e		•	
Over \$500,000 but not over \$1,000		000 plus 15% of the exc	ess over \$500,000		
Over \$1,000,000 but not over \$1,5		000 plus 10% of the exc			
Over \$1,500,000 but not over \$17,		000 plus 5% of the exce			
Over \$17,000,000	\$1,000				
		· -			
g Grassroots nontaxable amount (er	ter 25% of line 1f)			70,123.	
h Subtract line 1g from line 1a. If zer	o or less, enter -0-			0.	
i Subtract line 1f from line 1c. If zero	or less, enter -0-			0.	
j If there is an amount other than ze	ro on either line 1h c	or line 1i, did the organiza	ation file Form 4720	_	
reporting section 4911 tax for this	year?				Yes No
	ations that made a	veraging Period Under section 501(h) election the instructions for line	n do not have to com		
	Lobbying Exp	enditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount	253,975	258,902.	275,870.	280,490.	1,069,237.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,603,856.
c Total lobbying expenditures	1,984	3,000.	674.	2,031.	7,689.
d Grassroots nontaxable amount	63,494	. 64,726.	68,968.	70,123.	267,311.
e Grassroots ceiling amount (150% of line 2d, column (e))					400,967.
Grandracta labbuma evacaditures				1.012.	1.012.

Schedule C (Form 990 or 990-EZ) 2012 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)).

or each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a)	(b)
f the lobbying activity.	Yes	No	Amo	ount
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:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or se	ction	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				ne 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				ne 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members	"No," O	R (b) Par		ne 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	"No," O	R (b) Par		ne 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	"No," O	R (b) Par		ne 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year	"No," O	R (b) Par		ne 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year	"No," O	R (b) Par		ne 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total	"No," O	1 2a 2b		ne 3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	"No," O	1 2a 2b 2c		ne 3, is
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501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section of the exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and processing the carryover to the reasonable estimate of nondeductible lobbying and processing the carryover to the reasonable estimate of nondeductible lobbying and processing the carryover to the reasonable estimate of nondeductible lobbying and processing the carryover to the reasonable estimate of nondeductible lobbying and processing the carryover to the reasonable estimate of nondeductible lobbying and processing the carryover to the reasonable estimate of nondeductible lobbying and processing the carryover to the reasonable estimate of nondeductible lo	"No," O	1 2a 2b 2c		ne 3, is
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2012
Open to Public Inspection

Name of the organization

Employer identification number

Legal Aid Society of San Mateo County 94-1451894 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 2 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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check all that apply :	Par	t III Organizations Maintaining C	ollections of A	rt, Hist	orical Tre	easures, c	or Othe	r Simil	<u>ar Asse</u>	ts (continue	∌d)	
a Public exhibition d Loan or exchange programs b Scholarly research e Other compression of the organization of the organization of the organization scollections and explain how they further the organization's exempt purpose in Part XIII. Part IV Exercise and Custodial Arrangements. Complete fit the organization and as part of the organization and an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is elso granization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is elso granization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is elso granization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Beginning blance Is a Beginning blance Is a Beginning diverse an amount on Form 990, Part X, line 21? Is a Beginning of year balance Is a Begin	3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the	following tha	it are a si	gnıfıcant	use of its	collection if	tems	
b Scholarly research e Other Preservation for future generations Prevented a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds intert than to be maintained as part of the organization collection? Yes No No Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII 1b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII 1c Beginning of year balance 1c Current year (b) Proviews (c) Two years back (e) Four years back (e) Four years back (e) Current year (e) Two years back (for years back (e) Four years back (for years back ((check all that apply):										
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Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 Legal Aid Sc	ociety of Sa	n Mateo Count	y 94	-1451894	Page 3
Part VII Investments - Other Securities. See (a) Description of security or category (including name of security)	Form 990, Part X, line 1 (b) Book value	(c) Method of valua	tion: Cost or end	l-of-year market v	alue
(1) Financial derivatives	(2) DOOK 78100	(S) MOLITOR OF VAIDA	9000 01 0110	your market v	
(2) Closely-held equity interests		_			
(3) Other					
(A) Guaranteed investment		_			
(B) contract	1,878,493				
(C) Equity funds	496,928				
(D) Money market funds	15,481				
(E) Common Stock	153,893				
(F) Bond	59,867	. End-of-Yea	r Market	varue	
(G)					·
(H) (I)					
Total. (Col (b) must equal Form 990, Part X, col. (B) line 12.)	2,604,662	•			
Part VIII Investments - Program Related. See				-	
(a) Description of investment type	(b) Book value	(c) Method of valua	tion: Cost or end	i-of-year market v	alue
(1)					
(2)					
(3)					
(4)					
(5)	 				
(6)					
(7)		<u> </u>		·	
(8)					-
(9) (10)					
Total. (Col (b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX Other Assets. See Form 990, Part X, line	15.		<u>-</u>		
	Description			(b) Book va	lue
(1)					
(2)					
(3)					
(4)					
(5)	<u> </u>				
(6)				<u> </u>	
(7)					
(8)					
(10)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line	: 15)	· - · · · · · · · · · · · · · · · · · · ·	•		_
Part X Other Liabilities. See Form 990, Part X, In					
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)	-				
(8)					
(10)					
(11)					
Total. (Column (b) must equal Form 990, Part X, col (B) line	25)				
2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the tex		organization's financial sta	tements that rep	orts the organization	ation's

liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

) (Form 990) 2012		Society of S					1451894	Page 4
Pai	rt XI	Reconciliation of	f Revenue per A	udited Financial S	tatements	S Wit	th Revenue per R	eturn		
1	Total	revenue, gains, and ot	ner support per audite	ed financial statements				1	4,002	571.
2	Amou	unts included on line 1	but not on Form 990,	Part VIII, line 12 [.]						
а	Net u	inrealized gains on inve	stments		<u> </u>	2a	190,166.			
b	Dona	ted services and use o	f facilities		<u> </u>	2b	1,327,207.			
¢	Reco	veries of prior year grai	nts		<u> </u>	2c				
d	Other	r (Describe in Part XIII.)			نا	2d	73,056.			
е	Add I	ines 2a through 2d						2e	1,590	<u>,429.</u>
3	Subtr	ract line 2e from line 1						3	2,412	,142.
4	Amou	unts included on Form	990, Part VIII, line 12,	but not on line 1.						
а	Inves	tment expenses not in	cluded on Form 990, F	Part VIII, line 7b	L	4a				
b	Other	r (Describe in Part XIII.)			[-	4b]		
С	Add I	ines 4a and 4b			_			4c		0.
5	Total	revenue. Add lines 3 a	nd 4c. (This must equ	al Form 990, Part I, line 1	12)			5	2,412	142.
Pa				Audited Financial S		ts W	ith Expenses per	Retu	rn	
1	Total	expenses and losses p	er audited financial s	tatements				1	4,010	,072.
2	Amou	unts included on line 1	but not on Form 990,	Part IX, line 25:						
а	Dona	ited services and use o	f facilities		1 :	2a	1,327,207.			
b	Prior	year adjustments				2b		1		
С		r losses				2c		1		
d	Othe	r (Describe in Part XIII.)				2d	73,056.	1		
е		lines 2a through 2d			_	•		1 2e	1,400	,263.
3		ract line 2e from line 1						3	2,609	,809.
4		unts included on Form	990. Part IX. line 25. b	out not on line 1:						
а		stment expenses not in			1.	4a		1 1		
b		r (Describe in Part XIII.)		an rm, mo re		4b		1 1		
		lines 4a and 4b			<u> </u>			4c		0.
5			and 4c . (This must ed	jual Form 990, Part I, line	18.)			5	2,609	
		Supplemental Ir		au rominoso, runti, imo	, ,	•				,
		<u> </u>	•	for Part II, lines 3, 5, and	19: Part III. lin	nes 1a	a and 4: Part IV lines 1	h and :	2b: Part V line	4 Part
		•		and 4b. Also complete th					20,1 0.1 1,0	.,
				income is u					ses of	
							<u>.F</u>			• • •
th	e oi	rganization	while the o	corpus remain	ns inta	ct	in perpetui	.tv.		
		<u>9</u>	_:	<u> </u>			L L			
							· · · · · · · · · · · · · · · · · · ·			
Pa:	rt }	K, Line 2: L	egal Aid is	s exempt from	n taxat	ior	under Inte	rna	1	
		· · · · · · · · · · · · · · · · · · ·	 	-						
Re	veni	ie Code Sect	ion 501(c)	(3) and Calif	ornia	Rev	enue and Ta	xat	ion Code	9
			•	· · ·	•		····			
Se	ctio	on 23701d.								
					-					
Ge	nera	ally accepte	d accounting	ng principles	s provi	de	accounting	and	disclos	sure
									dule D (Form 9	

Schedule D (Form 990) 2012 Legal Aid Society of San Mateo County 94-1451894 Page 5 Part XIII Supplemental Information (continued)
guidance about positions taken by an organization in its tax returns that
might be uncertain. Management has considered its tax positions and
believes that all of the positions taken by Legal Aid in their federal and
state exempt organization tax returns are more likely than not to be
sustained upon examination. Legal Aid's returns are subject to examination
by federal and state taxing authorities, generally for three and four
years, respectively, after they are filed.
Part XI, Line 2d - Other Adjustments:
Special events expenses 73,056.
Part XII, Line 2d - Other Adjustments:
Special events expenses 73,056.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Department of the Treasury Internal Revenue Service

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

2012

Open To Public Inspection

name or the organization Legal A	id Society of San	Mat	eo	County	94-1451	894
	Complete if the organization answe				ne 17. Form 990-EZ	filers are not
Indicate whether the organization rais	sed funds through any of the following Solicitates Solicitates Special Special solicitates are virillariant villor or entity in connection with prividuals or entitles (fundraisers) pursur	ion of ion of fundra (includ	non-go goven Ising e ding of Ional f	overnment grants nment grants events fficers, directors, trus undraising services?	stees or Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	istody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
			_			
Total			•			
3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrik	oution	s or has been notifie	d it is exempt from r	egistration
						
	<u> </u>				 	
-						
						

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

Sch Pa	edu	le G (Form 990 or 990-EZ) 2012 Legal A	id Society o	f San Mateo	County 94-	1451894 Page 2
	II L	of fundraising event contributions and gr	_			
		of fallalasing over Continuations and gr	(a) Event #1	(b) Event #2 Golf	(c) Other events None	(d) Total events
			Luncheon	Tournament	None	(add col. (a) through
			(event type)	(event type)	(total number)	col (c))
Jue			(event type)	(event type)	(total ridinbor)	
Revenue	1	Gross receipts	452,545.	139,207.		591,752.
	2	Less: Contributions	426,229.	92,467.		518,696.
	3	Gross income (line 1 minus line 2)	26,316.	46,740.		73,056.
	4	Cash prizes				
S	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Direct E	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	26,316.	46,740.		73,056.
	10	Direct expense summary. Add lines 4 through	h 9 ın column (d)		•	73,056
	11	Net income summary. Combine line 3, colum	n (d), and line 10		<u> </u>	0.
Pa	art		answered "Yes" to Form	990, Part IV, line 19, or i	reported more than	
	Ι	\$15,000 on Form 990-EZ, line 6a.	1 .	(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col. (c))
æ	1	Gross revenue				
ses	2	Cash prizes		<u> </u>		
rect Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs			<u> </u>	
_	5	Other direct expenses	 			
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary Add lines 2 throug	h 5 ın column (d)		•	()
	8	Net gaming income summary. Combine line	1, column d, and line 7		<u> </u>	<u></u>
	a Is	nter the state(s) in which the organization operate the organization licensed to operate gaming a "No," explain:	ctivities in each of these	states?		Yes No
		ere any of the organization's gaming licenses r			year?	Yes No
•	_					

		<u> 1451894</u>	Page 3
11	Does the organization operate gaming activities with nonmembers?	Yes	L No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes Yes	☐ No
13	Indicate the percentage of gaming activity operated in:		
	i The organization's facility	13a	%
	An outside facility	13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100 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?	Yes	☐ No
b	olf "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party > \$		
С	: If "Yes," enter name and address of the third party:		
	Name		
	Address >		
16	Gaming manager information:		
	Name		
	Gaming manager compensation ▶ \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatory distributions:		
a	a is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	└── Yes	└─ No
ŀ	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 > \$		
Pa	art IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (i	ıı) and (v) and	Part III.
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information		
_			
_			
			_
_			

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

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

Open to Public

OMB No 1545-0047

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

Employer identification number Inspection

2 [

94-1451894 X Yes 1 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 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ► Attach to Form 990. San Mateo County Legal Aid Society of Part I General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization 0

ı		ı	ı	ı .	1	1	1
-	(h) Purpose of grant or assistance						
	(g) Description of non-cash assistance						
	(f) Method of valuation (book, EMV, appraisal, other)						
	(e) Amount of non-cash assistance						
	(d) Amount of cash grant						
	(c) IRC section if applicable						
	(b) EIN						
recipient that received more than \$	1 (a) Name and address of organization or government						

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table N

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2012)

94-1451894

Page 2

Schedule | (Form 990) (2012) Legal Aid Society of San Mateo County

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

Part III can be duplicated if additional space is needed

					100
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(a) Amount of non- cash assistance	(book, FMV, appraisal, other)	(I) Description of non-cash assistance
Emergency assistance	22	6,315.	0		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information	ide the information	required in Part I,	line 2, Part III, colum	n (b), and any other additional inf	ormation
1 5	provide	d to help	provided to help families and	nđ	
ls in crisis to meet		eds for fo	for food and shelter.	lter.	
l of the emergency	1	sition by	requisition by the Executive	ive	
tor the emergency check is		issued to the requestor's	stor's client	ent in	
ssistance.					
	:				

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Department of the Treasury
Internal Revenue Service

Name of the organization

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012
Open to Public Inspection

Employer identification number

94-1451894 Legal Aid Society of San Mateo County Form 990, Part I, Line 1, Description of Organization Mission: Legal Aid's mission is to help disadvantaged and vulnerable persons 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 need including health, education, housing, income and freedom from violence. Legal Aid is an integral part of San Mateo County's safety net and has a history of successfully collaborating with community agencies, local governments, health care providers and pro bono attorneys to provide coordinated services to low-income residents. 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.

Name of the organization Legal Aid Society of San Mateo County	Employer identification number 94-1451894
documents available to the public:	
a. Form 990 is available on its website, another organiza	ation'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.	
	<u> </u>