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DLN: 93493128012074

Form 990

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 private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		2013 ca applicable	C Name of organization	01-01-2013 , 2013, and ending 12	-31-2013	D Emplo	yer iden	tification number
Add	dress cl	hange	Doing Business As			15-05	527253	
	me cha	_	Doing Business As					
_	tial retu rminate		Number and street (or P O box if magests SOUTH WARREN STREET 3RD F	all is not delivered to street address) Room/ LR	suite	E Telepho	one numb	er
		return	City or town, state or province, coun	ntry, and ZIP or foreign postal code		(315)	422-8	191
_		n pending	SYRACUSE, NY 13202	try, and zir or foreign postar code		G Gross r	eceipts \$	3,958,949
			F Name and address of prin	cıpal officer	H(a) Is	this a group		
			SUSAN R HORN 351 SOUTH WARREN STRE	FT		bordinates?		Γ Yes Γ No
			SYRACUSE, NY 13202		H(d)	e all subordı	nates	┌ Yes ┌ No
r Ta	v-even	npt status	 	nsert no)		cluded? "No " attach	a list (see instructions)
		•	WW HISCOCKLEGALAID ORG	nsert no) 4947(a)(1) 01 527	┨ .			
					1(-)	roup exempt		
	n of or rt I		n	n Other ►	L Year o	f formation 19	49 M 9	State of legal domicile N
ance		TO PRO QUALIT		n or most significant activities GHT OF EVERY PERSON TO EQUAL IVIDUALS AND FAMILIES IN NEE				
Governance	2	Check t	his box দ if the organization dis	scontinued its operations or disposed	d of more tha	n 25% of its	net ass	sets
Activities &	3	Number	of voting members of the governi	ng body (Part VI, line 1a)			3	2.
Ě	I		·	of the governing body (Part VI, line 1	•		4	2
₽ E	1			calendar year 2013 (Part V, line 2a)			5	7
				ecessary)			6 7a	1
	1			rom Form 990-T, line 34			7b	
					F	rior Year		Current Year
a.	8	Contr	ibutions and grants (Part VIII, lir	ne 1h)		3,652,4	454	3,951,828
Rayente	9	_		ne 2g)			0	(
H-24	10		·	(A), lines 3, 4, and 7d)	•	:	149	(
	11 12			lines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), l	ine -		0	(
	12					3,652,6	503	3,951,828
	13			IX, column (A), lines 1-3)			0	(
	14			X, column (A), line 4)			0	(
\$	15	5-10		e benefits (Part IX, column (A), lines	•	3,071,	181	3,447,016
Expenses	16a	Profes	ssional fundraising fees (Part IX,	column (A), line 11e)			0	(
ਡੋ	Ь		undraising expenses (Part IX, column (D)					
	17			ines 11a-11d, 11f-24e)		569,		545,957
	18			st equal Part IX, column (A), line 25)		3,640,4		3,992,97
<u>५</u> ५८ १९	19	Rever	ue less expelises Subtract line .	18 from line 12		12, ning of Curre Year		-41,145 End of Year
Not Assets or Fund Balances	20	Total	assets (Part X, line 16)		.	1,369,	725	1,153,464
28 28	21					417,8		242,467
žĒ	22	Net a	ssets or fund balances Subtract	line 21 from line 20		951,8	381	910,997
Unde my k	nowle arer ha	alties of dge and as any k	belief, it is true, correct, and com nowledge *** ature of officer	imined this return, including accomp iplete Declaration of preparer (other				
	-		AN R HORN PRESIDENT/CEO e or print name and title					
			Print/Type preparer's name	Preparer's signature		Check If	PTIN	220
Paid			PAULA D DECKMAN Firm's name TESTONE MARSHALL &	DISCENZA LLP	·	self-employed Firm's EIN 🟲 10	P000878 6-107699	
	pare	er						
Use	On	ly 📙	Firm's address FTHE FOUNDRY 432 NOF	RIH FRANKLIN ST		Phone no (315) 476-40	04

SYRACUSE, NY 13204
May the IRS discuss this return with the preparer shown above? (see instructions) .

✓ Yes No

4e Total program service expenses ► 3,450,775

Form 990 (· ,		
Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
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	Yes	
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		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or 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		No
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? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
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 of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	1/2017
		F.	orm 99 ((2013)

art	V	Statements Regarding Other 1RS Filings and Tax Compliance				_
		Check if Schedule O contains a response or note to any line in this Part V	· · · · · ·	• •	Yes	.) No
la E	nteri	the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a	10			110
		the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0			
		LL e organization comply with backup withholding rules for reportable payments to vend	ors and reportable			
c ga	amın	g (gambling) winnings to prize winners?		1c		
Т	ax St	the number of employees reported on Form W-3, Transmittal of Wage and tatements, filed for the calendar year ending with or within the year covered	72			
b If	at le	s return	nt tax returns?	2b	Yes	
		e organization have unrelated business gross income of \$1,000 or more during the y	ŀ	3a		No
		s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in S</i>	•	3b		
		y time during the calendar year, did the organization have an interest in, or a signatur a financial account in a foreign country (such as a bank account, securities account,				
		int) ²		4a		Νo
ı I f	"Yes	s," enter the name of the foreign country 🕨				
S	ee in	nstructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and	Financial Accounts			
		he organization a party to a prohibited tax shelter transaction at any time during the	· .	5a		No
D	ıd an	ny taxable party notify the organization that it was or is a party to a prohibited tax sho	elter transaction?	5b		No
: If	"Yes	s," to line 5a or 5b, did the organization file Form 8886-T?	[_		
	·	the organization have approved assessment that are assessed to the second) and did the	5c		N 1
		the organization have annual gross receipts that are normally greater than \$100,000 ization solicit any contributions that were not tax deductible as charitable contributions.		6a		No
	_	s," did the organization include with every solicitation an express statement that suc				
		not tax deductible?		6b		
	_	izations that may receive deductible contributions under section 170(c).				
		e organization receive a payment in excess of \$75 made partly as a contribution and		7a		N
Ιf	"Yes	s," dıd the organization notify the donor of the value of the goods or services provide	d?	7b		
		e organization sell, exchange, or otherwise dispose of tangible personal property for		_		
		orm 8282?		7c		No
1 11	res	s," indicate the number of Forms 8282 filed during the year				
e D	ıd the	e organization receive any funds, directly or indirectly, to pay premiums on a persona	al benefit			
		act?		7e		No
		e organization, during the year, pay premiums, directly or indirectly, on a personal be	•	7f		No
		organization received a contribution of qualified intellectual property, did the organiz	ation file Form 8899 as	7g		
		organization received a contribution of cars, boats, airplanes, or other vehicles, did t	he organization file a	7h		
th	ne su	oring organizations maintaining donor advised funds and section 509(a)(3) supporting properting organization, or a donor advised fund maintained by a sponsoring organization.				
DI	usine	ess holdings at any time during the year?		8		
S	pons	oring organizations maintaining donor advised funds.				
D	ıd th	e organization make any taxable distributions under section 4966?		9a		
D	ıd th	e organization make a distribution to a donor, donor advisor, or related person? .		9b		
		on 501(c)(7) organizations. Enter				
		tion fees and capital contributions included on Part VIII, line 12 10a				
	ross cılıtı	receipts, included on Form 990, Part VIII, line 12, for public use of club les				
		on 501(c)(12) organizations. Enter				
		Income from members or shareholders				
		income from other sources (Do not net amounts due or paid to other sources				
		st amounts due or received from them)				
		on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lie	u of Form 1041?	12a		
		s," enter the amount of tax-exempt interest received or accrued during the				
•		on 501(c)(29) qualified nonprofit health insurance issuers.				
		organization licensed to issue qualified health plans in more than one state?		4.5		
		See the instructions for additional information the organization must report on Sched	ule O	13a		
		the amount of reserves the organization is required to maintain by the states				
		cir the organization is incensed to issue qualified fleath plans				
		the amount of reserves on hand			 	
		e organization receive any payments for indoor tanning services during the tax year?	•	14a		No
. Tf	"V 🗅	s " has it filed a Form 720 to report these payments? If "No " provide an explanation in	Schodulo ()	14h		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Se	ection A. Governing Body and Management					1
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	24			
	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	22			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		No
3				3		No
4	Did the organization make any significant changes to its governing documents since filed?		•	4		No
5	Did the organization become aware during the year of a significant diversion of the or		ation's assets?	5		No
6	Did the organization have members or stockholders?	guinz	ation's assets.	6		No
		• •		0		NO
	Did the organization have members, stockholders, or other persons who had the power more members of the governing body?			7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval or persons other than the governing body?		nembers, stockholders,	7b		No
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons ur	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, vorganization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ection B. Policies (This Section B requests information about policies not i			eveni	ie Cod	e.)
	(· · · · · · · · · · · · · · · · · · ·				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			102		No
	Did the organization have local chapters, branches, or affiliates?			10a		No
b	If "Yes," did the organization have written policies and procedures governing the acti affiliates, and branches to ensure their operations are consistent with the organization	ivitie: on's e	s of such chapters, xempt purposes?	10a 10b		No
b 11a	If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of its the form?	ivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing		Yes	No
b 11a	If "Yes," did the organization have written policies and procedures governing the activation affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of its	ivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing	10b	Yes	No
b 11a b	If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of its the form?	ivitie: on's e s gov orm 9	s of such chapters, xempt purposes? erning body before filing 	10b	Yes	No
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?	on's es gov orm 9	s of such chapters, xempt purposes? erning body before filing	10b		No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?	on's ess governments or some some some some some some some some	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	on's ess gov orm 9 y inte	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes	No
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy?	ivities on's e s gov orm 9 y inte the p	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes Yes Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?	on's ess gov orm 9 y inte the p ew an	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review of the persons, comparability data, and contemporaneous substantiation of the following persons include a review of the persons include a review of the persons.	on's ess gov. orm 9 y inte the p ew an	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	on's ess gov. orm 9 y inte the p ewan e deli	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?	on's ess gov. orm 9 y inte the p ewan e deli	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activations, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?	on's ess gov. orm 9 y inte the p ew an e deli	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisite persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?	vities on's e s gov. orm 9 . y inte the p . ewan e deli	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activations, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form 50 the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisite persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture of	vities on's e s gov. orm 9 y inte the p ewan e deli zation	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the actiaffiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Found the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revision dependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization Of the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	vities on's e s gov. orm 9 y inte the p ewan e deli zation	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the actina filiates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Found the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revision dependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. Of the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take	vities on's e s gov. orm 9 y inte the p ewan e deli zation	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the actiaffiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?	y interest on several	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

interest policy, and financial statements available to the public during the tax year

►JOANNE P SAWMILLER 351 SOUTH WARREN STREET

SYRACUSE, NY 132022057 (315)218-0140

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See 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, or 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 nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours	more pers and	than on is	one bot	not box h an or/tr	offic	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	eetsurT lenotruttenl	Опрот	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) ADAMS BERTHA A	1 00	х						0	0	0
DIRECTOR										_
(2) BARANY KATHY	1 00	х						0	0	0
DIRECTOR (3) BUCKEL THOMAS C JR	1.00									
DIRECTOR	1 00	Х						0	0	0
(4) CARNRIKE THOMAS A	1 00	х						0	0	0
DIRECTOR		^							U	U
(5) CASSIDY MARGARET M	1 00	х						0	0	0
DIRECTOR										
(6) COTTRELL ANITA DIRECTOR	1 00	x						0	0	0
(7) DEVORE WYNETTA	1 00	<u> </u>								
DIRECTOR		Х						0	0	0
(8) ELBADAWI SAM A	1 00	Х						0	0	0
DIRECTOR										
(9) ENGEL RICHARD C	1 00	х		х				0	0	0
CHAIR (10) FIELD MARK	1.00									
	1 00	х						0	0	0
DIRECTOR										
(11) GALBATO SUZANNE O	1 00	x		х				o	0	0
CHAIR - ELECT										
(12) HANCOCK HON STEWART F JR	1 00	x						o	0	0
DIRECTOR										
(13) HARDICK JOSEPH A	1 00	x		х				o	0	o
SECRETARY-TREASURER								-		
(14) HORN SUSAN R	40 00	x		х				121,780	0	13,580
PRESIDENT & CEO								,		==,000
(15) HOVEMAN VIRGINIA A	1 00	x		х				0	0	0
VICE CHAIR								Ĭ		
(16) MAESTRI JOHN M	1 00	x						0	0	0
DIRECTOR								ŭ	Ŭ	0
(17) MALAVENDA ANTHONY J	1 00	x						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers	than on is	one bot	not box h ar	offic uste	ess er	Reportable Reportable compensation compensation from the organization (W- 2/1099- (W- 2		(E) Reportable compensation from related organizations (W- 2/1099-	Estir amount compe from	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1093	, -	MISC)	-	zation elated zations
(18) MAYS JOHN S	1 00	x							0	(0
DIRECTOR	4.00											
(19) PARRY MATTHEW L	1 00	x							0	(0
DIRECTOR (20) PERRY STANFORT J	1 00										1	
DIRECTOR		X							0	(0
(21) PESKO CARL	1 00	х							0			0
DIRECTOR												
(22) REED PASTOR KENNETH W	1 00	x							0	(0
DIRECTOR (23) ROSBROOK JANICE T	1 00										<u> </u>	
DIRECTOR		X							0	(0
(24) ROSENHOLM STEPHEN	1 00	V							Λ			
DIRECTOR		Х									1	0
(25) RUDOLPH CLAIRE PHD	1 00	x							0	(0
DIRECTOR (26) SYHRE CATHERINE	1 00										<u> </u>	
DIRECTOR		X							0	(0
(27) WALLACE JOANN C	1 00	,,										
DIRECTOR		Х							0			0
(28) YOUNG SAMUEL C	1 00	x							0	(0
DIRECTOR (29) SAWMILLER JOANNE P	40 00										<u> </u>	
ASSISTANT SECRETARY/TREASURER	40 00			х				98	,065	(19,390
ASSISTANT SECRETARY/TREASURER												
1b Sub-Total						<u> </u> ►						
c Total from continuation sheets to Part	VII, Section A	· · ·				▶						
d Total (add lines 1b and 1c)						•		219,845		0		32,970
Total number of individuals (including b \$100,000 of reportable compensation f				ed al	00V6	e) who	rec	eived more th	an			
											Yes	No
3 Did the organization list any former offi on line 1a? <i>If "Yes," complete Schedule J</i>			e, key •	/ em	ploy •	yee, d	or hig	ghest compen	sate •	d employee		No
4 For any individual listed on line 1a, is the organization and related organizations of individual										om the		No
5 Did any person listed on line 1a receive	or accrue com	pensat	ion fi	rom	anv	unre	lated	d organization	orır			110
services rendered to the organization?									•	5		No
Section B. Independent Contracto												
1 Complete this table for your five highes compensation from the organization Re												r

(A)	(B)	(C)
Name and business address	Description of services	Compensation
EXCELLUS BLUECROSS BLUESHIED EXCELLUS H PO BOX 5266 BINGHAMTON NY 13902	INSURANCE	443,647
UNITED PARTNERS MANAGEMENT 351 WARREN STREET SYRACUSE NY 13202	RENT	139,839
Total number of independent continues (including but not limited to these listed	above \ who we coved make than	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►2

Form 99						Page 9
Part V	/ • • •	Statement of Revenue Check if Schedule O contains a response or note to any lir	ne in this Part VIII			
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
क ह	1a	Federated campaigns 1a 51,549				
Gifts, Grants ilar Amounts	Ь	Membership dues 1b 77,300				
قِ ق	c	Fundraising events 1c 20,547				
iffs ar /	d	Related organizations 1d				
%. m∷6	e	Government grants (contributions) 1e 3,529,879				
iği	f	All other contributions, gifts, grants, and 1f 272,553				
Contributions, Gifts, Grants and Other Similar Amounts		similar amounts not included above Noncash contributions included in lines				
n A O Ei	g	1a-1f \$				
Col	h	Total. Add lines 1a-1f	3,951,828			
<u> </u>		Business Code				
Ke II	2a					
22	b					
MCP	c					
Š	d					
ran	e f	All other program service revenue				
Program Service Revenue		All other program service revenue				
	g 3	Total. Add lines 2a-2f				
		Investment income (including dividends, interest, and other similar amounts)				
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6a	(1) Real (11) Personal Gross rents				
	b	Less rental				
	_c	expenses Rental income				
		or (loss) Net rental income or (loss)				
	"	(i) Securities (ii) Other				
	7a	Gross amount from sales of				
		assets other				
	ь	Less cost or				
		other basis and sales expenses				
	c	Gain or (loss)				
	d 8a	Net gain or (loss)				
<u>e</u>		events (not including				
重		\$20,547 of contributions reported on line 1c)				
Ве С		See Part IV, line 18				
Other Revenue	.	a 7,121				
		Less direct expenses b 7,121 Net income or (loss) from fundraising events b	0			
-		Gross income from gaming activities				
		See Part IV, line 19				
	Ь	Less direct expenses b				
	l	Net income or (loss) from gaming activities				
		Gross sales of inventory, less				
		returns and allowances .				
	Ь	Less cost of goods sold b				
	l	Net income or (loss) from sales of inventory				
		Miscellaneous Revenue Business Code				
	11a					
	ь					
	С					
	d e	All other revenue				
	e					
	12	Total revenue. See Instructions	3,951,828	0	О	0

Part IX Statement of Functional Expenses

ection 501(c)(3) and 501(c)(4) organizations must complete all	columns All other organizations must	complete column (A)
-------------------------------	-----------------------------------	--------------------------------------	---------------------

7b, 8b, 9b, and 1 Grants a in the U 2 Grants a United S 3 Grants a organiza States 4 Benefits 5 Comper key emplotes defindescribe 7 Other s 8 Pension and 403 9 Other e 10 Payroll 11 Fees for a Manage b Legal c Account	de amounts reported on lines 6b, nd 10b of Part VIII. s and other assistance to governments and organizations United States See Part IV, line 21	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants a United S Grants a Organiza States Grants a Organiza States Grants a Organiza States Grants a Organiza States Grants a Benefits Comper key emp Grants a defin describe Grants a Pension and 403 Other e Grants a Pension and 403 Grants a Pens					
Junited S Grants a organiza States Benefits Comper key emp Comper (as defindescribe) Comper (as defindescribe) Comper (as defindescribe) Comper (as defindescribe) Pension and 403 Comper employed by Legal Legal Account					
organiza States 4 Benefits 5 Comper key emp 6 Comper (as defindescribe 7 Other s 8 Pension and 403 9 Other e 10 Payroll 11 Fees for a Manage b Legal c Account	and other assistance to individuals in the I States See Part IV, line 22				
5 Comperkey emp 6 Comper (as defindescribe 7 Other s. 8 Pension and 403 9 Other e 10 Payroll 11 Fees for a Manage b Legal c Account	s and other assistance to governments, zations, and individuals outside the United s See Part IV, lines 15 and 16				
key emp Comper (as defin describe Others Pension and 403 Other e Payroll Fees for Manage b Legal c Account	ts paid to or for members				
(as defined described) 7 Other sides of the	ensation of current officers, directors, trustees, and nployees	247,043	64,094	182,949	
 8 Pension and 403 9 Other e 10 Payroll 11 Fees for a Manage b Legal c Account 	ensation not included above, to disqualified persons fined under section 4958(f)(1)) and persons bed in section 4958(c)(3)(B)				
and 403 9 Other e 10 Payroll 11 Fees for a Manage b Legal c Account	salaries and wages	2,359,623	2,124,563	235,060	
10 Payroll11 Fees fora Manageb Legalc Account	on plan accruals and contributions (include section 401(k) 03(b) employer contributions)	100,453	93,891	6,562	
11 Fees fora Manageb Legalc Account	employee benefits	542,794	503,011	39,783	
a Manageb Legalc Account	ltaxes	197,103	167,127	29,976	
b Legalc Account	or services (non-employees)				
c Accoun	ement				
d Lobbyin	nting				
•	ing				
e Profess	sional fundraising services See Part IV, line 17				
f Investm	ment management fees				
column	(If line 11g amount exceeds 10% of line 25, n (A) amount, list line 11g expenses on ule O)				
12 Advertis	tising and promotion	19,460		19,460	
13 Office e	expenses				
14 Informa	nation technology				
15 Royaltie	ries				
16 Occupa	pancy	142,196	135,086	7,110	
17 Travel		8,111	8,111		
	ents of travel or entertainment expenses for any federal, or local public officials				
19 Confere	rences, conventions, and meetings	28,305	26,324	1,981	
20 Interest	st				
21 Paymen	ents to affiliates				
22 Depreci	ciation, depletion, and amortization	22,103	22,103		
23 Insuran	nce	10,527	9,790	737	
miscella	expenses Itemize expenses not covered above (List llaneous expenses in line 24e If line 24e amount exceeds 10% 25, column (A) amount, list line 24e expenses on Schedule O)				
a PROFF	FEES AND CONTRACT	93,561	84,205	9,356	
b EQUIPI	PMENT PURCHASE, LEA	72,636	69,004	3,632	
c SUPPLI	LIES	40,538	38,511	2,027	
d CLIENT	IT CASE EXPENSE	37,243	37,243		
e All othe	er expenses	71,277	67,712	3,565	
25 Total fu	functional expenses. Add lines 1 through 24e	3,992,973	3,450,775	542,198	(
Joint co reported education here		†			

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	150	1	650,167
	2	Savings and temporary cash investments	1,185,899		7,470
	3	Pledges and grants receivable, net	129,610		266.234
	4	Accounts receivable, net	120,010	4	
	5	Loans and other receivables from current and former officers, directors, trustees, k		7	
	3	employees, and highest compensated employees Complete Part II of Schedule L	ey	5	
4ssets	6	Loans and other receivables from other disqualified persons (as defined under sect 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employe and sponsoring organizations of section 501(c)(9) voluntary employees' beneficial organizations (see instructions) Complete Part II of Schedule L	ers	6	
φ. 	7	Notes and loans receivable, net		7	
4	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	6,470		38,358
	10a	Land, buildings, and equipment cost or other basis Complete	,106	9	
	ь	rait vi di Schedule D	,910 47,596	100	32,196
	11	Investments—publicly traded securities	,010	11	156,925
	12	Investments—other securities See Part IV, line 11		12	.53,525
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
			0		2,114
	15	Other assets See Part IV, line 11			
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,369,725	16	1,153,464
	17	Accounts payable and accrued expenses	5,520		21,746
	18	Grants payable	100.117	18	
	19	Deferred revenue	162,147	19	35,853
	20	Tax-exempt bond liabilities		20	
8	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
莲		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	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	050 477		40.4.000
		D	250,177	25	184,868
	26	Total liabilities. Add lines 17 through 25	417,844	26	242,467
ري d)		Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete			
Ĕ	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets	951,881	27	910,997
<u>ଟ</u>	27		951,001		910,997
<u> </u>	28	Temporarily restricted net assets		28	
ĭ	29	Permanently restricted net assets		29	
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
ې	30	Capital stock or trust principal, or current funds		30	
Φ 	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ĕ	33	Total net assets or fund balances	951,881	33	910,997
_	34	Total liabilities and net assets/fund balances	1.369.725	34	1.153.464

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,9	951,828
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,9	992,973
3	Revenue less expenses Subtract line 2 from line 1	3			-41,145
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			951,881
5	Net unrealized gains (losses) on investments	5			261
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			910,997
Par	t XII Financial Statements and Reporting				· ·
	Check if Schedule O contains a response or note to any line in this Part XII				. 区
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigl audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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SCHEDULE A

(Form 990 or 990EZ)

Internal Revenue Service

Department of the

Treasury

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name of the organization FRANK H HISCOCK LEGAL AID SOCIETY Employer identification number

15-0527253

	τŢ			DIIC Charity Sta						istructio	ns.
Γhe o	rganı	zatıon ıs	not a privat	e foundation becaus	eitis (Forl	ınes 1 throu	igh 11, check	only one bo	ox)		
1	Γ	A churc	ch, conventi	on of churches, or as	ssociation of	churches d	escribed in s e	ection 170(b)(1)(A)(i).		
2	\sqcap	A scho	ol described	in section 170(b)(1	.)(A)(ii). (At	tach Schedu	ıle E)				
3	\sqcap	A hosp	ital or a coo	perative hospital se	rvice organiz	atıon descri	bed in sectio	n 170(b)(1)	(A)(iii).		
4	Γ	A medi	cal researcl	n organization operat	ted ın conjun	ction with a	hospital desi	cribed in sec	tion 170(b)(1)(A)(iii)	. Enter the
				ty, and state							
5	Γ	An orga	anızatıon op	erated for the benefi	t of a college	or universit	ty owned or o	perated by a	a government	al unit de	scribed in
		sect ion	170(b)(1)(A)(iv). (Complete P	art II)						
6	\sqcap	A feder	al, state, or	local government or	government	al unit desc	rıbed ın secti	on 170(b)(1	.)(A)(v).		
7	~	_		at normally receives in 170(b)(1)(A)(vi).		· · ·	support from	a governme	ntal unit or fi	om the ge	eneral public
8	\sqcap			described in section			nplete Part II)			
9	Γ	An orga	anization tha	at normally receives	(1) more th	an 331/3% o	fits support	from contrib	utions, mem	bership fe	es, and gross
	·			ities related to its ex							
		· · ·		oss investment inco	·	-		· ·			
		•		janization after June				•		,	
10	Г			ganized and operated							
11	<u>'</u>	_		ganized and operated	•		•		. , . ,	o carry oi	it the nurnoses of
	·	one or the box	more public that descri	y supported organiz bes the type of supp b Type II c	ations descr orting organ	ibed in secti ization and c	ion 509(a)(1 complete line) or section s 11e throu	509(a)(2) S gh 11h	ee sectio i	n 509(a)(3). Check
e	Γ	' - '	_	ox, I certify that the	-					-	
				on managers and otl	her than one	or more pub	licly support	ed organızat	ions describ	ed in sect	ion 509(a)(1) or
f			509(a)(2)	received a written de	atarmination	from the IPs	C that it is a	Type I Typ	all or Typo	III cuppo	orting organization
•			:his box	received a written de	ecerminacion	nom the 1K.	5 that it is a	Type I, Type	e II, OI Type	III Suppo	
g				2006, has the organi	zation accep	ted any gift	or contributi	on from any	of the		,
-			g persons?		·	, -					
		(i) A pe	erson who d	rectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons des	scribed in (ii)		Yes No
		and (III) below, the	governing body of th	ie supported	organızatıor	۱?			1	1g(i)
		(ii) A fa	amıly memb	er of a person descri	bed in (i) abo	ove?				1	1g(ii)
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			1:	lg(iii)
h		Provide	the follown	ng information about	the supporte	ed organizati	ıon(s)				
(i) Nam	ne of	(ii) EIN	(iii) Type of	(iv) Is t	the	(v) Did you	notify	(vi) Is	the	(vii) A mount of
	uppor			organization	organizati		the organiz		organizati		monetary
or	ganiza	ation		(described on	col (i) list		ın col (i) d	•	col (i) org		support
				lines 1- 9 above or IRC section	your gove docume	_	suppor	τγ	ın the U	5 /	
				(see	docume	111,					
				instructions))		T	 , 		 ,,		\dashv
					Yes	No	Yes	No	Yes	No	
							ļ		ļ		
Total											

Schedule A (Form 990 or 990-EZ) 2013 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 3,277,092 3,196,783 3,355,903 3,652,454 3,958,949 17,441,181 include any "unusual grants ") 7 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 3,277,092 3,196,783 3,355,903 3,652,454 3,958,949 17,441,181 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5 17,441,181 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 (f) Total beginning in) 🟲 3,958,949 3,277,092 3,196,783 3,355,903 3,652,454 17,441,181 Amounts from line 4 Gross income from interest, dividends, payments received on 1,305 1,133 4,881 3,294 securities loans, rents, royalties 261 10,874 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 17,452,055 through 10) Gross receipts from related activities, etc (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 99 940 % Public support percentage for 2012 Schedule A, Part II, line 14 15 15 99 860 % 16a 33 1/3% support test—2013. 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 b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported $\vdash \Gamma$ organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

supported organization

instructions

Schedule A (Form 990 or 990-EZ) 2013 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.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") 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						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 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	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 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	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 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 Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 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	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and 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

Part IV		formation. Provide the explanations required by Part II, line 10; Part II, lin ne 12. Also complete this part for any additional information. (See instruction	
		Facts And Circumstances Test	
Retu	ırn Reference	Explanation	
		Schodulo A / Form 000 o	000 E7) 201

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493128012074

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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

	me of the organization NK H HISCOCK LEGAL AID SOCIETY			Employer id	lent if	fication number	
				15-05272			
Par	t I-A Complete if the or	ganization is exempt under s	section 501(c) or is a section 5	27 o	organization.	
1	Provide a description of the org	ganızatıon's dırect and ındırect politic	al campaıgn act	ıvıtıes ın Part IV			
2	Political expenditures			▶	\$		
3	Volunteer hours						
Par	t I=B Complete if the or	ganization is exempt under s	section 501(c)(3).			
1		e tax incurred by the organization und	-		. \$		
2	Enter the amount of any excise	e tax incurred by organization manage	ers under section	n 4955 🕨	\$		
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?		·	Yes	┌ No
4a	Was a correction made?					┌ Yes	┌ No
b	If "Yes," describe in Part IV						
Par	t I-C Complete if the or	ganization is exempt under s	section 501(c), except section	501	(c)(3).	
1	Enter the amount directly expe	ended by the filing organization for sec	ction 527 exemp	ot function activities 🕨	\$		
2	Enter the amount of the filing of exempt function activities	rganızatıon's funds contributed to oth	ner organizations	for section 527	\$		
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	ind on Form 112	0-POL, line 17b	\$		
4	Did the filing organization file F	Form 1120-POL for this year?				☐ Yes	┌ No
5	organization made payments f amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	amount paid fro rectly delivered	m the filing organization to a separate political o	's fur rgani:	nds Also enter t zation, such as	the
	(a) Name	(b) Address	(c) EIN	(d) A mount paid fror filing organization's funds If none, enter -	0-	(e) A mount of p contributions re and promptly directly deliver separate poli organization If enter -0-	eceived and ed to a tical f none,
					\perp		
					+		
					+		
		•	i		- 1		

Sch	nedule C (Form 990 or 990-EZ) 2013					Page 2
Pä	art II-A Complete if the organization	is exempt under	section 501(c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Doub TV an	- h - 66:1: - h - d		a adduces FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		iist in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		l" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l .)		(a) Filing organization's totals	(b) Affiliated group totals
La	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
ь	Total lobbying expenditures to influence a legisl	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	o)		Γ		
d	O ther exempt purpose expenditures			Γ		
e	Total exempt purpose expenditures (add lines 1	c and 1d)		Γ		
f	Lobbying nontaxable amount Enter the amount is columns	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lir	ue 1f)				
h	Subtract line 1g from line 1a If zero or less, ent	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	havè to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera ⊤	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
C	Total lobbying expenditures					
d	Grassroots nontaxable amount					

e Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

Sche	dule C (Form 990 or 990-EZ) 2013					Pa	age 3
Pa		anization is exempt under section 501(c)(3) and has lection under section 501(h)).	NOT				
For e	ach "Ves" response to lines 1a through	11 below, provide in Part IV a detailed description of the lobbying	(a	1)		(b)	
activ		In below, provide in rare IV a decaned description of the lobbying	Yes	No	Δ	moun	it
1		nization attempt to influence foreign, national, state or local o influence public opinion on a legislative matter or referendum,		N			
a			V	No			
b		compensation in expenses reported on lines 1c through 1i)?	Yes	N. a			
C	Media advertisements?	make a mulaling 2		No			
d	Mailings to members, legislators, o	-		No			
e	Publications, or published or broad	l-	.,	No			
f	Grants to other organizations for lo	le contraction de la	Yes				1,814
g		ır staffs, government officials, or a legislative body?	Yes				496
h		conventions, speeches, lectures, or any similar means?		No			
!	Other activities?			No			
j	Total Add lines 1c through 1i		ı				2,310
2a		ne organization to be not described in section 501(c)(3)?		No			
b	If "Yes," enter the amount of any to						
C		ax incurred by organization managers under section 4912					
d		section 4912 tax, did it file Form 4720 for this year?					
Pai		anization is exempt under section 501(c)(4), section	501(c))(5), o)r se	ectio	n
	501(c)(6).				T	Yes	No
1	Were substantially all (90% or mo	re) dues received nondeductible by members?		Г	1		110
2		nouse lobbying expenditures of \$2,000 or less?		⊢	2		
3		over lobbying and political expenditures from the prior year?			3		
		anization is exempt under section 501(c)(4), section !	501(c)(5). o	_	ectio	n
		her (a) BOTH Part III-A, lines 1 and 2, are answered "					
1	Dues, assessments and similar am	ounts from members	1				
2	Section 162(e) nondeductible lobb expenses for which the section 527	ying and political expenditures (do not include amounts of political 7(f) tax was paid).					
а	Current year		2a				
b	Carryover from last year		2b				
C	Total		2c				
3	Aggregate amount reported in sect	ion 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	does the organization agree to carr	or ton line 2c exceeds the amount on line 3, what portion of the excess yover to the reasonable estimate of nondeductible lobbying and					
_	political expenditure next year?	librari aynandibiyaa (aaa yaabayabaya)	4				
5		litical expenditures (see instructions)	5				
	art IV Supplemental Info			_			
	vide the descriptions required for Pa t II-B, line 1 Also, complete this pa	art I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou rt for any additional information	up list),	Part II	-A , lı	ne 2,	and
	Return Reference	Explanation					

Return Reference	Explanation
PART II-B, LINE 1	PROFESSIONAL LOBBYING FEES TOTALED \$1,814 FOR THE YEAR ENDED DECEMBER 31, 2013 SALARY EXPENSE FOR THE PRESIDENT/CEO WHICH WAS ALLOCATED TO DIRECT CONTACT WITH LEGISLATORS TOTALED \$496 FOR THE YEAR ENDED DECEMBER 31, 2013
_	
_	
	Schodulo C (Form 900 or 900-F7) 2013

201104410 3 (1 01111 3 3 0 01 3 3 0 12) 2 0 1 3		i age -i
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	

Schedule D (Form 990) 2013

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DLN: 93493128012074

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

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. ► Information about Schedule D (Form 990)

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nal Revenue Service and its ins	structions is at <u>www.irs.gov/rorini990</u> .			Inspect	ion
ame of the organization RANK H HISCOCK LEGAL AID SOCIETY		Emp	loyer ident if ica	tion numbe	r
		15-0	0527253		
	r Advised Funds or Other Similar F	unds	or Accounts	. Complet	e if th
organization answered "Yes" to Form	· · · · · · · · · · · · · · · · · · ·	1	(h) Eurada '	0+h0=====	nto
Total number at end of year	(a) Donor advised funds	+	(b) Funds and	otner accou	nts
Aggregate contributions to (during year)					
Aggregate contributions to (during year) Aggregate grants from (during year)					
Aggregate value at end of year					
Did the organization inform all donors and donor					
funds are the organization's property, subject to	the organization's exclusive legal control?			☐ Yes	┌ No
Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?				┌ Yes	┌ No
	ete if the organization answered "Yes"	to Forn	n 990, Part I\	/, line 7.	
Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recressor Protection of natural habitat Preservation of open space					
Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conservation contribution in	the forn	n of a conserva	tion	
			Held at the	End of the	Year
Total number of conservation easements		2a			
Total acreage restricted by conservation easeme	ents	2b			
Number of conservation easements on a certified	d historic structure included in (a)	2c			
Number of conservation easements included in (o historic structure listed in the National Register	c) acquired after 8/17/06, and not on a	2d			
Number of conservation easements modified, tra	nsferred, released, extinguished, or terminat	ed by th	ne organization	during	
the tax year ►					
Number of states where property subject to cons	ervation easement is located -				
Does the organization have a written policy regar enforcement of the conservation easements it ho	rding the periodic monitoring, inspection, har		violations, and	l ┌ Yes	┌ No
Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing conservation ease	ments o	luring the year		
Amount of expenses incurred in monitoring, inspe	ecting, and enforcing conservation easemen	ts durınç	g the year		
►\$ Does each conservation easement reported on III and section 170(h)(4)(B)(II)?	ne 2(d) above satisfy the requirements of se	ction 17	70(h)(4)(B)(ı)	Г Yes	┌ No
In Part XIII, describe how the organization repor balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financia			and	, 140
rt III Organizations Maintaining Collec	ctions of Art, Historical Treasures, ed "Yes" to Form 990, Part IV, line 8.	or Otl	her Similar	Assets.	
If the organization elected, as permitted under SI works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the foot	FAS 116 (ASC 958), not to report in its reve rassets held for public exhibition, education	, or rese	arch in furthera		
If the organization elected, as permitted under SI works of art, historical treasures, or other similar service, provide the following amounts relating to	FAS 116 (ASC 958), to report in its revenue rassets held for public exhibition, education	statem	ent and balanc		ıc
(i) Revenues included in Form 990, Part VIII, lir	ne 1		► \$		
(ii) Assets included in Form 990, Part X					
If the organization received or held works of art, I following amounts required to be reported under S					
	· · · · · ·		. +		
Revenues included in Form 990, Part VIII, line 1			F >		
Assets included in Form 990, Part X			► \$		

Par	TITE Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tr</u>	easur	es, or O	the	<u>r Similar A</u>	ssets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	rds, cl	heck	any of t	he follo	wing that a	are a	sıgnıfıcant us	e of its	
а	Public exhibition		d	Γ	Loan	or exch	ange progi	rams			
b	Scholarly research		e	Γ	Other	r					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and expla	ain ho	w the	y furthe	er the oi	ganızatıor	ı's ex	empt purpose	ın	
5	During the year, did the organization solicit	or receive donation:	s of aı	rt, hıs	torıcal	treasur	es or othe	rsım	ıılar		
	assets to be sold to raise funds rather than t									 Yes	☐ No
Ра	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar						answere	d "Y	es" to Form	990, 	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?					itions o	r other ass	ets r	not	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follo	wing t	able		_				
									A	mount	
С	Beginning balance							1c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, lin	e 21?	,						☐ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI:	II Check here if the	e expl	anatı	on has	been pr	ovided in I	Part :	XIII		. $ extstyle ag{}$
Pa	rt V Endowment Funds. Complete										
		(a)Current year	(b) Prior	year	b (c) Tw	o years back	(d)	Three years back	(e)Four	years back
1a	Beginning of year balance							_		<u> </u>	
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships							T			
e	Other expenditures for facilities							+			
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end balan	ce (lır	ne 1 g	, colum	n (a)) h	eld as				
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🕨										
c	Temporarily restricted endowment 🕨										
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
За	Are there endowment funds not in the posse	ssion of the organiz	atıon	that a	are held	d and ac	dministere	d for	the		
	organization by									Ye	s No
	(i) unrelated organizations		•					•		(i)	
ь	(ii) related organizations If "Yes" to 3a(ii), are the related organization							•		(ii) Bb	<u> </u>
ь 4	Describe in Part XIII the intended uses of the	· ·						•	🗀	<u>טי</u>	
	rt VI Land, Buildings, and Equipme					n answ	ered 'Yes	to:	Form 990 P	art IV	line
	11a. See Form 990, Part X, line			rgan	nzacioi	1 411511	0,04,100		101111 330, 1	<u> </u>	
	Description of property				a) Cost o sıs (ınve		(b)Cost or basis (oth		(c) Accumulat depreciation		Book value
1a	Land		•								
b	Buildings										
c	Leasehold improvements										
d	Equipment										
	Other							6,106	463	,910	32,196
ot :	Add lines 12 through 10 (Column (d) must e	agual Form 990 Part	Y colu	ımn (P) line	10(0))			L		22 104

Part VII Investments—Other Securities. Com	plete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of va	
(including name of security) (1)Financial derivatives		Cost or end-of-year	market value
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	1		
Part VIII Investments—Program Related. Cor	nplete if the organization	n answered 'Yes' to Fo	orm 990, Part IV, line 11c.
See Form 990, Part X, line 13.	1 (1)		
(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year	
		,	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. Complete if the organization (a) Descrip), Part IV, line 11d See	Form 990, Part X, line 15 (b) Book value
(a) Descrip	- CIOII		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.			
Part X Other Liabilities. Complete if the organ	nization answered 'Yes' to	o Form 990, Part IV, l	ine 11e or 11f. See
Form 990, Part X, line 25. 1 (a) Description of liability	(b) Book value		
Federal income taxes			
ACCRUED PAYROLL AND COMPENSATED ABSENCES	81,743		
ACCRUED RETIREMENT PLAN EXPENSES	90,997		
ACCRUED OTHER	12,128		
	<u> </u>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	184,868		

Par		evenue per Audited Financial Sta vered 'Yes' to Form 990, Part IV, line :		its With R	levenue p	oer Retui	'n Complete ıf
1		r support per audited financial statements				1	3,959,210
2	A mounts included on line 1 bu	t not on Form 990, Part VIII, line 12					
а	Net unrealized gains on invest	ments	2a		261		
b	Donated services and use of fa	acılıtıes	2b				
c	Recoveries of prior year grants	s	2c				
d	Other (Describe in Part XIII)		2d		7,121		
e	Add lines 2a through 2d .					2e	7,382
3	Subtract line ${f 2e}$ from line ${f 1}$.					3	3,951,828
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1					_
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a				
b	Other (Describe in Part XIII)		4b				
С	Add lines 4a and 4b					4c	0
5	Total revenue Add lines 3 and	i 4c. (This must equal Form 990, Part I, line	12)			5	3,951,828
Part		xpenses per Audited Financial Sta swered 'Yes' to Form 990, Part IV, line		nts With	Expenses	s per Ret	urn. Complete
1	Total expenses and losses pe	r audited financial statements				1	4,000,094
2	A mounts included on line 1 bu	t not on Form 990, Part IX, line 25					
а	Donated services and use of fa	acılıtıes	2a				
b	Prior year adjustments		2b				
С	Otherlosses		2c			1	
d	Other (Describe in Part XIII)		2d		7,121		
e	Add lines 2a through 2d					2e	7,121
3	Subtract line ${f 2e}$ from line ${f 1}$.					3	3,992,973
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:					
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII)		4b				
c	Add lines 4a and 4b					4c	0
5	Total expenses Add lines 3 a	nd 4c. (This must equal Form 990, Part I, lir	ne 18)			5	3,992,973
Part	XIII Supplemental Inf	ormation					
Part		Part II, lines 3, 5, and 9, Part III, lines 1a , lines 2d and 4b, and Part XII, lines 2d and					y additional
	Return Reference	Explanation					
	XI, LINE 2D - OTHER STMENTS	FUNDRAISING COSTS 7,121					
	XII, LINE 2D - OTHER STMENTS	FUNDRAISING COSTS 7,121					

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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DLN: 93493128012074

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

Supplemental Information Regarding

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	ne of the organization NK H HISCOCK LEGAL AID	SOCIETY					Employer ider	ntification number
FKA	NK II III SCOCK LLGAL AID	SOCILIT					15-0527253	
Pa	rt I Fundraising Act Form 990-EZ filers					to Form	990, Part IV	, line 17.
1	Indicate whether the organ	•			•	eck all tha	nt apply	
а	Mail solicitations	ization raioca raiiao	amougn a		Solicitation of non			
Ь	Internet and email soli	citations		f	Solicitation of gov			
c	Phone solicitations			g	Special fundraisin		_	
d	☐ In-person solicitations							
2a	Did the organization have a or key employees listed in							Γ _{Yes} Γ _{No}
b	If "Yes," list the ten highes to be compensated at least			fundraisei	rs) pursuant to agreem	ents unde	r which the fu	ndraiser is
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai cust cont	Did ser have ody or trol of outions?	(iv) Gross receipts from activity	(or re fundrai	ount paid to tained by) serlisted in ol (i)	(vi) A mount paid to (or retained by) organization
			Yes	No				
Tota	al			>				
3	List all states in which the cregistration or licensing	organization is regis	tered or lı	censed to	solicit contributions o	r has bee	n notified it is	exempt from

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
			(a) Event #1 VOICES	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			FUNDRAISING EVENT	(event type)	(total number)	
Ф			(event type)	+		+
Revenue	1	Gross receipts	27,66	8		27,668
Rev	2	Less Contributions	20,54	7		20,547
	3	Gross income (line 1 minus line 2)	7,12	1		7,121
	4	Cash prizes				
မှာ	5	Noncash prizes				
Expenses	6	Rent/facility costs				
ă	7	Food and beverages .	1,27	1		1,271
Direct	8	Entertainment				
ā	9	Other direct expenses .	5,85	О		5,850
	10	Direct expense summary Add lir	nes 4 through 9 ın columr	n (d)		(7,121)
	11	Net income summary Subtract li	ine 10 from line 3, columi	n (d)		0
Par	t III	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
enses	2	Cash prizes				
Expens	3	Non-cash prizes				
Dreat E	4	Rent/facility costs				
<u>ā</u>	5	Other direct expenses				
	6	Volunteer labor	│ Yes% │ No	│ Yes	Г Yes <u>%</u> Г No	
	7	Direct expense summary Add line	es 2 through 5 in column	(d)	•	
	8	Net gaming income summary Sub-	tract line 7 from line 1, c	olumn (d)	<u> ▶</u>	
9	Ent	er the state(s) in which the organiz	ation operates gaming ac	tivities		
a b		he organization licensed to operate No," explain				
10a b		re any of the organization's gaming	licenses revoked, suspe	nded or terminated during	the tax year?	

						1:
Does	s the organization operate gaming activi	ties with nonmember	rs?		T Yes T No	
12	Is the organization a grantor, beneficia					
	formed to administer charitable gaming	g [,]			· Fyes [– No
13	Indicate the percentage of gaming act	ıvıty operated ın				
а	The organization's facility					%
b	An outside facility			13b		%
14	Enter the name and address of the per	son who prepares the	e organization's gaming/special e	vents books and reco	ords	
	Name ▶					
	Address 🟲					
15a b	Does the organization have a contract revenue?	evenue received by t	the organization 🟲 \$		· · 「Yes「	– No
	amount of gaming revenue retained by	the third party 🟲 \$ _				
C	If "Yes," enter name and address of th	e thırd party				
	Name ▶					
	Address ►					
16	Gaming manager information					
	Name 🕨					
	Gaming manager compensation ► \$					
	Description of services provided					
	Director/officer	E mployee	☐ Independent cor	ntractor		
17	Mandatory distributions					
а	Is the organization required under stat	e law to make charit	able distributions from the gaming	g proceeds to		
	retain the state gaming license?				┌ Yes 「	— No
b	Enter the amount of distributions requi	red under state law (distributed to other exempt organi	ızatıons or spent		
	ın the organızatıon's own exempt actıv	ities during the tax y	∕ear ⊳ \$			
Pai		5b, 15c, 16, and 1	xplanations required by Part I 7b, as applicable. Also compl			and
	Return Reference		Explanat	ıon		
		<u>I</u>	<u> </u>		rm 990 or 990-	7) 2012

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OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

FRANK H HISCOCI		ETY					'	mpioy	er iden	tiricatio	on numbe	er.
									27253			
	ess Benefit										405	
	olete if the orga e of disqualifie			on Form 990 ship between		(c) Des					40b (d) Corr	ractad?
1 (a) Nam	e or arsquarme	u person (n and organiz		(c) Des	cription	or tra	iisactio	'' ⊦	Yes	No
			·	<u> </u>							103	140
					d					<u>_</u>		
2 Enter the a	amount of tax ı	ncurred by or	_	managers or o	disqualified pe	rsons during t	the year	r unde 	rsectio * \$	n 		
	amount of tax,	ıf any, on line			the organizat	ion			▶ \$			
	ans to and,										6.1	
	mplete if the o janization repo						Form 9	90, P	art IV , I	ine 26,	orifthe	
(a) Name of	(b)	(c)	(d) Loan		(e)O riginal	(f)Balance	(g) In		(h)		(i)Wrı	ıtten
ınterested	Relationship	Purpose of			principal	due	defaul		A pprov	ved	agreen	nent?
person	with organization	loan	organizatio	on ⁷	amount				by board			
	organization								or			
					4				commi	1		
			То	From			Yes	No	Yes	No	Yes	No
							<u> </u>		<u> </u>	-	_	
									+		_	
											_	
											_	
Total		▶ \$										
Part III Gra	ants or Assi	istance Be	nefitting	Interested	d Persons.	out TV lung (77					
(a) Name of I	mplete if the	organizatio (b) Relationsi		_	nt of assistanc			ictore		1 Durne	se of ass	uctone
perso		תם, אפוםנוטווגו nterested per			iit oi assistaiic	e (d) (yp	e 01 a55	istaiit		e) Puipo	5e 01 a55	SISTAILL
		organız	atıon									
				1								
				1								
				+								
	+			+								
				†								
				+								

Part IV Business Transactions Complete if the organizat			ne 28a - 28h ior 28c		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh organiz reven	f zatıon's
				Yes	No
(1) SAMUEL YOUNG	DIRECTOR	62,229	A FAMILY MEMBER OF BOARD DIRECTOR SAMUEL YOUNG IS AN EMPLOYEE OF THE ORGANIZATION		No
(2) SUSAN HORN	PRESIDENT & CEO	71,027	THE PRESIDENT & CEO SERVES AS VICE PRESIDENT FOR THE CENTER FOR COMMUNITY ALTERNATIVES BOARD OF DIRECTORS THE CENTER FOR COMMUNITY ALTERNATIVES IS THE FUNDER OF THE ORGANIZATION'S PSI PROGRAM AND THE SUBCONTRACTOR OF THE ORGANIZATION'S NYS DEFENSE INTERVENTION ASSESSMENT-PAROLE GRANT		No

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
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DLN: 93493128012074

OMB No 1545-0047

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SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Employer identification number Name of the organization FRANK H HISCOCK LEGAL AID SOCIETY 15-0527253

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE 990 IS FIRST REVIEWED BY THE FINANCE MANAGER AND THEN BY THE PRESIDENT/CEO AND COO IT IS THEN REVIEWED BY THE SECRETARY/TREASURER AND FORWARDED TO THE ENTIRE BOARD OF DIRECTORS FOR REVIEW
FORM 990, PART VI, SECTION B, LINE 12C	THERE ARE TWO DIFFERENT CONFLICT OF INTEREST POLICIES THERE IS A CLIENT CONFLICT OF INTEREST POLICY AND A SEPARATE BOARD CONFLICT OF INTEREST POLICY THE BOARD CONFLICT OF INTEREST POLICY IS GIVEN TO THE MEMBER WHEN THEY JOIN THE BOARD EACH BOARD MEMBER SIGNS A CONFLICT OF INTEREST STATEMENT ANNUALLY
FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION FOR THE ORGANIZATION'S PRESIDENT/CEO IS INCLUDED IN THE ANNUAL BUDGET WITH STANDARD INCREASES WHICH IS REVIEWED AND APPROVED BY THE BOARD ANYTHING ABOVE A STANDARD ACROSS THE BOARD INCREASE WOULD BE INITIATED AND/OR INDIVIDUALLY APPROVED BY THE BOARD THE ASSISTANT SECRETARY/TREASURER IS AN EMPLOYEE OF THE ORGANIZATION, WHOSE SALARY IS ESTABLISHED BY THE PRESIDENT/CEO THERE ARE NO KEY EMPLOYEES, AS DEFINED BY FORM 990, OF THE ORGANIZATION
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTERST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST
PART XII LINE 2C	NO CHANGE FROM PRIOR YEAR

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493128012074 OMB No 1545-0172 Depreciation and Amortization (Including Information on Listed Property) Department of the Treasury Internal Revenue Service (99) See separate instructions. ► Attach to your tax return. Sequence No 179 Business or activity to which this form relates **Identifying number** FORM 990 PAGE 10 Name(s) shown on return FRANK H HISCOCK LEGAL AID SOCIETY 15-0527253 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Total cost of section 179 property placed in service (see instructions) • • • • • • 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- · · · · · · Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married 5 (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 · · · · · · · · 9 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 . | 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during 14 Property subject to section 168(f)(1) election 15 21.551 MACRS Depreciation (Do not include listed property.) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2013 · · · · · · 552 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method deduction period property service only—see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/L g 25-year property 25 yrs 27 5 yrs MM S/L h Residential rental property 27 5 yrs ММ S/L ΜМ i Nonresidential real 39 yrs property ΜМ Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L **c** 40-year MMS/L 40 yrs Summary (see instructions.) Part IV 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter 22 here and on the appropriate lines of your return Partnerships and S corporations—see instructions • • 22,103 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	ciation a	<u>nd Other I</u>	<u>nforma</u>	tion (C	aution	<u>: See</u>	the i	nstr	uctio	ns for	<u>limits</u>	for pa	asseng	<u>ier au</u>	tomol	oiles. 🕽
24a Do you have evider	nce to support	the business/inv	estment ι	ise claime	d? ┌ Yes	Гио			24b	If "Yes,"	is the e	/ idence	written?	, Г _{ує}	s Γ_{N}	0
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(e) Basis for depreciati (business/investme use only)				(f) Recov perio	very Method/			(h) Depreciation/ deduction			(i) Elected section 179 cost		
25Special depreciation allo	•		erty placed	in service (during the	tax yea	r and u	ised m	nore t	han 2!	_					
50% in a qualified busi	•		hueinaee	IICA						2:	<u>, </u>					
201 Toperty used more	1 1 1 1 1 1 1 1 1 1 1 1 1	%	Dusiness	usc					Т					\Box		
		%												\bot		
37 Dranarty used 500/		%														
27 Property used 50%	oriess in a	quanned bus	iness us	e	1				S	/L -				$\overline{}$		
		%							S/L -							
		%			<u> </u>					/L -						
28 Add amounts in co						ne 21,	page	1	2	8						
29 Add amounts in c	olumn (ı), lın						<u></u>	•	<u> </u>		• •		29			
Complete this section	for vehicles		ction B								or relat	مط مما	con			
If you provided vehicles to														se vehic	les	
30 Total business/investment miles driven during the year (do not include commuting miles)				(i		(b) Vehicle 2		(c)		(d) Vehicle 4		-	e)	(f) 5 Vehicle 6		
				Vehicle 1		Venicle 2		+	Vehicle 3		veille 4		veiii	icle 5	ven	icie 6
31 Total commuting	mıles drıven	during the ye	ar .													
32 Total other person	nal(noncomn	nuting) miles	drıven													
33 Total miles driven	during the y	year Add line	s 30													
34 Was the vehicle a	vailable for p	personal use		Yes	No	Yes	No	Y	'es	No	Yes	No	Yes	No	Yes	No
during off-duty hours?																
35 Was the vehicle used primarily by a more than 5% owner or related person?																
36 Is another vehicle available for personal use? .																
Section Answer these question 5% owners or related	ns to determ	•	et an exc												not mo	re thar
37 Do you maintain a written policy statement that prohemployees?					personal	use of	vehic	cles,	ınclı	uding co	mmutır	ng, by	your	Y	'es	No
38 Do you maintain a employees? See t																
39 Do you treat all us						213, un	cccor.	3,01	1 /0	or more	OWITCIS	•		-		
40 Do you provide mo			•			rmatio	n from	· •	ır or	· ·	about			-		
vehicles, and reta				· · ·			• •		ur en	ipioyees	• • •					
41 Do you meet the r	•	3	•					,			•					
Note: If your ansv	ver to 37, 38	3, 39, 40, or 4	1 is "Ye	s," do no	t comple	te Sec	tion B	fort	he c	overed v	/ehicle	s				
Part VI Amo	rtization															
(a) Description of c	(b) Date amortization begins			A mort a mo		(d) Code sectio			(e) A mortiz period percen		r A mor			(f) tization for iis year		
42 A mortization of co	sts that beg		ur 2013	tax year	(see ins	tructio	ns)			•		•				
43 A mortization of co	sts that beg	gan before you	ur 2013 t	ax year							43					
44 Total. Add amoun	ts ın column	(f) See the ı	nstructio	ns for wh	ere to re	port					44					· <u></u>