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# 990-EZ

Department of the Treasury

Internal Revenue Service

#### **Short Form Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2013

OMB No 1545-1150

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Open to Public Inspection

For the 2013 calendar year, or tax year beginning and ending В Check if applicable C Name of organization D Employer identification number Address change WASHINGTON, DC CHAPTER OF AMERICAN IMMIGRATION LAWYERS ASSOCIATION 91-1911195 Name change Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Telephone number Initial return 1634 I STREET, NW 400 202-328-0605 Terminated City or town, state or province, country, and ZIP or foreign postal code Amended return F Group Exemption WASHINGTON, DC 20006 Application pending Number > Accounting Method: Cash X Accrual H Check X If the organization is not Other (specify) Website: ► WWW.AILADC.ORG required to attach Schedule B Tax-exempt status (check only one) — \_\_\_ 501(c)(3) X 501(c) ( 6 ) **◄**(insert no.) \_\_\_ 7 4947(a)(1) or (Form 990, 990-EZ, or 990-PF). Form of organization: X Corporation Trust L..... Association Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ 130,570. Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I  $\overline{\mathbf{x}}$ Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 51,106. 2 3 Membership dues and assessments 79,209. 3 Investment income 4 Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses 5b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than \$15,000) 6a Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) 6b Less: direct expenses from gaming and fundraising events 6с Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 6d 7a Gross sales of inventory, less returns and allowance 7a Less: cost of goods sold 7b Gross profit or (loss) from sales of inventory (Subtract line 7b frd (2) ine 7a) 7c Other revenue (describe in Schedule OMAY Š SEE SCHEDULE O 8 130,570. Total revenue. Add lines 1, 2 5c, 6d, 9 Grants and similar amounts paid (hst in Schedule O SEE SCHEDULE O 10 31,095. 11 Benefits paid to or for members 11 12 Salaries, other compensation, and employee benefits 12 13 Professional fees and other payments to independent contractors 743. 13 14 Occupancy, rent, utilities, and maintenance 14 15 Printing, publications, postage, and shipping 15 Other expenses (describe in Schedule O) 93,853. SEE SCHEDULE O 16 17 Total expenses. Add lines 10 through 16 125,691. 17 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 4,879. Net Assets 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 110,743. 19 Other changes in net assets or fund balances (explain in Schedule O) 20 Net assets or fund balances at end of year. Combine lines 18 through 20 115,622. LHA For Paperwork Reduction Act Notice, see the separate instructions.

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Form **990-EZ** (2013)

 $\sim$ WASHINGTON, DC CHAPTER OF AMERICAN Form 990-EZ (2013) IMMIGRATION LAWYERS ASSOCIATION 91-1911195 Part II Balance Sheets (see the instructions for Part II) Check if the organization used Schedule O to respond to any question in this Part II  $\mathbf{x}$ (A) Beginning of year (B) End of year 110,397. 114,976. 22 Cash, savings, and investments 23 Land and buildings 23 54. 354. SEE SCHEDULE O 24 Other assets (describe in Schedule O) 24 110.451.25 115,330. Total assets 25 -292.26 -292. SEE SCHEDULE O 26 Total liabilities (describe in Schedule 0) 110,743. 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 115,622. Part III Statement of Program Service Accomplishments (see the instructions for Part III) **Expenses** (Required for section Check if the organization used Schedule O to respond to any question in this Part III X 501(c)(3) and 501(c)(4) What is the organization's primary exempt purpose? SEE SCHEDULE O organizations and section 4947(a)(1) trusts; optional Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise for others.) manner, describe the services provided, the number of persons benefited, and other relevant information for each program title SEE SCHEDULE O ) If this amount includes foreign grants, check here (Grants \$ 29 ) If this amount includes foreign grants, check here 29a (Grants \$ (Grants \$ ) If this amount includes foreign grants, check here 31 Other program services (describe in Schedule O) ) If this amount includes foreign grants, check here ▶ 32 Total program service expenses (add lines 28a through 31a) Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated - see the instructions for Part IV) Check if the organization used Schedule O to respond to any question in this Part IV (b) Average hours (e) Estimated (d) Health benefits. (C) Reportable contributions to employee benefit plans, and deferred ensation (Forms per week devoted to amount of other (a) Name and title W-2/1099-MISC) (if not paid, enter -0-) compensation position compensation CYNTHIA ROSENBERG 0. CHAIR 22.00 0 0 CHARLES TIEVSKY CHAIR ELECT 15.00 0 0 0. NAIMA SAID VICE CHAIR 0 0 0. 15.00 JACKIE JOUNG LEE SECRETARY 15.00 0 0 0. CATHERINE REYNOLDS 15.00 0 0 TREASURER 0.

Form **990-EZ** (2013)

	instructions for Part V) Check if the organization used Sch. O to respond to any question in the	ıs Paı	rt V	
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each			
	activity in Schedule O	33		Х
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended			
	documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule 0 (see instructions)	34		X
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported			
	on lines 2, 6a, and 7a, among others)?	35a		Х
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	N/	A
C	3			
	requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes,"			
	complete applicable parts of Schedule N	36		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions    37a   0.	_		
b	Did the organization file Form 1120-POL for this year?	37b		X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made			
	in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved  38b N/A	_		
39	Section 501(c)(7) organizations. Enter:			
а		1		
b	Gross receipts, included on line 9, for public use of club facilities  39b N/A	4		
40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 $\blacktriangleright$ ; section 4912 $\blacktriangleright$ ; section 4955 $\blacktriangleright$ <b>N/A</b>			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the		 	
	year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ?	1		
	If "Yes," complete Schedule L, Part I	40b	N/	A
C	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers			
	or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the			
	organization N/A			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction? If "Yes," complete Form 8886-T	40e	L	X
41	List the states with which a copy of this return is filed  NONE			
42 a	The organization's books are in care of ► CATHERINE REYNOLDS  Telephone no. ► (202)			5
	Located at ► 1634 I STREET, NW, SUITE 400, WASHINGTON, DC ZIP+4 ► 2	<u> 2000</u>	6	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		<del></del>	T
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	account)?	42b		X
	If "Yes," enter the name of the foreign country:			1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		X
	If "Yes," enter the name of the foreign country:			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here	_		
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A		
			Yes	No
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of			
	Form 990-EZ	44a	<u> </u>	X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead			
	of Form 990-EZ	44b		X_
C	Did the organization receive any payments for indoor tanning services during the year?	44c	<u> </u>	X
đ	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation			
	ın Schedule O	44d		
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
45 b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section	1		
	512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		
		Form 9	90-EZ	(2013)

WASHINGTON, DC CHAPTER OF AMERICAN

## **SCHEDULE O**

(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 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization

WASHINGTON, DC CHAPTER OF AMERICAN IMMIGRATION LAWYERS ASSOCIATION

Employer identification number 91-1911195

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	6,844.		
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	<del>-</del>		
OF YEAR	END OF YEAR		
54.	354.		
	OF YEAR		

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#### SCHEDULE O (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

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

Attach to Form 990 or 990-EZ.

2013
Open to Public Inspection

Name of the organization

MASHINGTON, DC CHAPTER OF AMERICAN Employ

Employ

Employ

Employ

IMMIGRATION LAWYERS ASSOCIATION

Employer identification number 91-1911195

ACCOUNTS PAYABLE  CREDIT CARD MISC.  TOTAL TO FORM 990-EZ, LINE 26  FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE - AMERICAN IMMIGRATION IN WASHINGTON DC, MD AND VA.  FORM 990-EZ, PART III, LINE 28, PROGRAM SERVICE ACCOMPLISHMENTS THE ORGANIZATION HOLDS ANNUAL IMMIGRATION LAW CONFERENCE  FOR MEMBERS. HOLDS MONTHLY DINNER MEETINGS FOR MEMBERS TO  OBTAIN IMMIGRATION INFORMATION, MEET GOVERNMENT OFFICERS AND ADDRESS IMMIGRATION ISSUES. HOLDS MONTHLY WEBINARS FOR MEMBERS AND ADDRESS IMMIGRATION ISSUES. HOLDS MONTHLY WEBINARS FOR MEMBERS TO  PUBLIC FOR MEMBERS TO PROVIDE PRO BONO SERVICES TO THE PUBLIC, INCLUDING CITIZENSHIP DAY, HELD FUNDRAISER FOR CHARITY SERVING CHILDREN. PROVIDES WEEKLY NEWSLETTER WITH UPDATES ON IMMIGRATION	END OF VENT	BEG. OF YEAR	DECCD T DOTON
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