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DLN: 93493134061235

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

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

Open to Public Inspection

A F	or the	2014 ca	lendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014				
B Ch	eck if a	pplicable	C Name of organization DELAWARE COUNTY BAR ASSOCIATION		D Emplo	yer ide	ntification number
☐ Ad	dress cl	hange			23-13	2004	7
∏ Na	me cha	inge	Doing business as				
┌ In	tıal retu	ım			E Telepho	ne num	her
⊢ Fii			Number and street (or P O box if mail is not delivered to street address) Room/suit 335 W FRONT STREET	е			
_		mınated			(610)	566-6	6627
	nended		City or town, state or province, country, and ZIP or foreign postal code MEDIA, PA 19063		G Gross n	eceints (\$ 1,627,360
Ap	plicatioi	n pending	·		G 61033 1	- ccipts	
			F Name and address of principal officer		Is this a group	return	for
			WILLIAM L BALDWIN ESQ 335 W FRONT STREET		subordinates?		┌ Yes 🗸 No
			MEDIA,PA 19063	H(b)	Are all subordi	nates	┌ Yes ┌ No
					ıncluded?		
I Ta	ax-exen	npt status	501(c)(3) 501(c)(6) (6) (insert no) 4947(a)(1) or 527		If "No," attach	a lıst	(see instructions)
J W	ebsite	e:► WV	WW DELCOBAR ORG	H(c)	Group exempt	ion nu	mber ►
K For	m of or	ganızatıor	Corporation Trust Association Other ►	L Yea	r of formation 19	50 M	State of legal domicile PA
	rt I		nmary				
			lescribe the organization's mission or most significant activities				
Activities & Governance		THE DE FOSTEF LEGAL	LAWARE COUNTY BAR ASSOCIATION EXISTS TO SERVE ITS MEME RING RESPECT FOR THE LAW, BY ADVANCING THE COMPETENT, CO PROFESSION, AND BY CREATING OPPORTUNITIES FOR ATTORNEY BORATIVELY FOR JUSTICE	LLEGI	AL, AND ETHI	CALP	RACTICE OF THE
Ē							
§							
ক্র	2	Check t	his box দ if the organization discontinued its operations or disposed of	more t	han 25% of its	net as	sets
20 ११	3	Number	of voting members of the governing body (Part VI, line 1a)			з	21
Ħ.			of independent voting members of the governing body (Part VI, line 1a)			4	21
ŧ			imber of individuals employed in calendar year 2014 (Part V, line 2a) .			5	7
∢			imber of volunteers (estimate if necessary)			6	21
			related business revenue from Part VIII, column (C), line 12			7a	81,865
			elated business taxable income from Form 990-T, line 34			7b	0 2,000
				Τ	Prior Year		Current Year
	8	Contr	ibutions and grants (Part VIII, line 1h)		73,5	530	105,982
E E	9	Progr	am service revenue (Part VIII, line 2g)		1,263,0)49	1,296,014
Rayenue	10	Inves	tment income (Part VIII, column (A), lines 3, 4, and 7d)		118,2	278	79,268
ď.	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		28,0	061	19,578
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		1,482,9	.10	1,500,842
	12		a and a malay a manufa pand (Dayt IV, aslump (A) lung 1, 2)	+			
	13 14		s and similar amounts paid (Part IX, column (A), lines 1-3)		31,:	0	30,510
			es, other compensation, employee benefits (Part IX, column (A), lines			+	
83	15	5-10			440,8	327	490,065
Š	16a	Profes	ssional fundraising fees (Part IX, column (A), line 11e)			0	0
Expenses	Ь	Total f	undraising expenses (Part IX, column (D), line 25) ▶0				
ш	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		727,9	15.8	803,246
	18		expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		1,199,9		1,323,821
	19		nue less expenses Subtract line 18 from line 12		282,9	-	177,021
* °					inning of Curre		
Net Assets or Fund Balances					Year		End of Year
33.45	20	Total	assets (Part X, line 16)		3,354,2	252	3,547,389
異	21		liabilities (Part X, line 26)		537,3	302	489,277
	22		ssets or fund balances Subtract line 21 from line 20		2,816,9	950	3,058,112
	rt II	_	nature Block				
my k	nowle	dge and	perjury, I declare that I have examined this return, including accompany belief, it is true, correct, and complete $$ Declaration of preparer (other the nowledge				
		***	***		2015-05-14		
Sig		Sign	ature of officer		Date		
Her			ert delong treasurer				
		17	e or print name and title				
_	_		· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	ite 15-05-13	Check If self-employed	PTIN P0130	
Pai		-	Firm's name WIPFLI LLP		Firm's EIN 🕒 39		
	pare	I .	Eimile address M. 2 WECT PALTIMODE AVE CUTTE 242		Dhene ::- (CC	٠	0.20
Us	on On	ly	Firm's address ► 2 WEST BALTIMORE AVE SUITE 210		Phone no (610	, 505-3	UCE
	LL	.c	MEDIA, PA 19063				
ıчау	tne IR	S discu	ss this return with the preparer shown above? (see instructions)				✓ Yes No

Forn	n 990 (2014))			Page
Par		tement of Program Service Ack if Schedule O contains a response	Accomplishments or note to any line in this Part III .		ন
1	Briefly des	cribe the organization's mission			
PRO COC	ICATION OF FESSIONAL OPERATION	THE PUBLIC CONCERNING THEIR CONDUCT OF ASSOCIATION MED BETWEEN THEM, PROFESSIONAL	INISTRATION OF JUSTICE, EQUAL R RIGHTS AND RESPONSIBILITIES MBERS, THE INDEPENDENCE OF T AND INTERPERSONAL ACTIVITIE SSION IN THE ADMINISTRATION C	UNDER THE LAW, THE ET HE JUDICIARY AND THE E S FOR ITS MEMBERS, AND	HICAL AND SAR, AND FOSTERING
2		· · · · · · · · · · · · · · · · · · ·	rogram services during the year whic	h were not listed on	┌ Yes ┌ No
	If "Yes," de	escribe these new services on Sched	ule O		
3			significant changes in how it conduct	s, any program	┌ Yes ┌ No
	If "Yes," de	escribe these changes on Schedule C)		
4	expenses S	, ,	complishments for each of its three la anizations are required to report the a program service reported		•
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	PUBLICATION	N OF A WEEKLY LEGAL JOURNAL CONTAINING	S LEGAL NOTICES AND ASSOCIATION INFORMA	ATION	
	(Code) (Expenses \$	including grants of \$) (Revenue \$	\
40	`	, , , ,	LAWYERS ARE REQUIRED TO TAKE 12 HOURS	, ,	,
4 c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	PRO BONO A	AND COMMUNITY OUTREACH			

) (Revenue \$

Other program services (Describe in Schedule O)

Total program service expenses ►

including grants of \$

4d

(Expenses \$

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		No
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	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? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	Yes	
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? <i>If "Yes," complete Schedule D, Part I</i>	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? <i>If "Yes,"</i> complete Schedule D, Part III	8		Νo
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^{\bullet}	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
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
С	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		No
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		No
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
L4a	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		No
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		No
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 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals 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		
	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), 501(c)(4), and 501(c)(29) 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		
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		
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 "Yes," 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? <i>If "Yes," complete Schedule L, Part III </i>	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		1	
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
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? If "Yes," complete Schedule R, Part 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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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		No
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		
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?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V		<u> </u>	<u></u>
	Estable sumbar and de Bar 2 of Estable 1006		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0	_		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	-		
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	,		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	٦.	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N o
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a 7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
Ī	file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
h	required?	7g		
•	Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
С	In which the organization is licensed to issue qualified health plans			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	Νo
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14a		.,,,

Part VI 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.

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
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, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
	action B. Balliciae (This Costion B. requests information about nations not required by the Internal E		C.d	~ \
56	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Coa	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 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 interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 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 interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 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 and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 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 or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 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 interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 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 and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 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 or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes	No No No No

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►EXECUTIVE DIRECTOR

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		more pers	than on is	one bot	not box h ar or/tr	check Highest compensated	ess er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JONATHAN PERI PRESIDENT	2 00	х		x				0	0	0
(2) KRISTEN M RUSHING PRESIDENT ELECT	2 00	Х		х				0	0	0
(3) SCOTT C GOTTEL VICE PRESIDENT	2 00	х		х				0	0	0
(4) VINCENT B MANCINI RECORDING SECRETARY	2 00	х		х				0	0	0
(5) CRAIG B HUFFMAN CORRESPONDING SECRETARY	2 00	Х		х				0	0	0
(6) ROBERT R DELONG JR TREASURER	2 00	Х		х				0	0	0
(7) PATRICIA H DONNELLY DIRECTOR	1 00	Х						0	0	0
(8) KAREN E FRIEL DIRECTOR	1 00	Х						0	0	0
(9) MICHAEL R GALANTINO DIRECTOR	1 00	Х						0	0	0
(10) PATRICK T HENIGAN DIRECTOR	1 00	Х						0	0	0
(11) EUGENE F JARRELL III DIRECTOR	1 00	x						0	0	0
(12) ROBERT F KELLY JR DIRECTOR	1 00	Х						0	0	0
(13) JOSEPH A MALLEY III DIRECTOR	1 00	Х						0	0	0
(14) STEVEN R KOENSE DIRECTOR	1 00	Х						0	0	0
						'				Form 990 (2014)

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	more than one box, unless t person is both an officer and a director/trustee)					ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(15) KATHLEEN A PIPERNO	1 00	x						0	0	,
DIRECTOR		_ ^						U	U	
(16) MATTHEW M RYAN	1 00									
DIRECTOR		Х						0	0	C
(17) DOUGLAS L SMITH	1 00									
DIRECTOR		Х						0	0	C
(18) GINA GORBEY ZARKO	1 00	.,								_
DIRECTOR		Х						0	0	C
(19) PATRICK T DALEY	1 00									
PRESIDENT YLS		X						0	0	C
(20) LYN B SCHOENFELD	1 00									
PAST PRESIDENT		X						0	0	C
(21) JOSEPH T MATTSON	1 00									
PAST PRESIDENT		X						0	0	C
(22) WILLIAM L BALDWIN ESQUIRE	60 00									
				Х				125,465	0	10,459

Lb	Sub-Total	•			
c	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	•	125,465	0	10,459

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►1

			res	NO
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule I for such individual	3		Νo
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No

Section	B.	Independent	Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

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 ▶0

-	
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f g
Program Serwice Revenue	2a b c d e f g
venue	3 4 5 6a b c d 7a b
Other Rev	b c 9a b c
	b c 11a b c d

Form 99		•						Page 9
Part V	<u> </u>	Statement o Check if Schedu	o f Revenue ule O contains a respon	se or note to any lir	ne in this Part VIII			<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s £	1a	Federated camp	paigns 1a					
Grants mounts	b	Membership du	es 1b					
Ę, Ģ	С	Fundraising eve	ents 1c					
Giffs, iilar A	d	Related organiz	zations 1d	22,982				
%. E	е	Government grants	s (contributions) 1e	45,000				
ition: er Si	f	All other contribution	ons, gifts, grants, and 1f ot included above	38,000				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contribution	ons included in lines					
Con	h	Total. Add lines	s 1 a - 1 f	▶	105,982			
				Business Code				
eun	2a	LEGAL JOURNAL		511120	836,705	754,840	81,865	
₽e	b	MEMBERSHIP DUES	S	900099	229,903	229,903		
926	С	CONFERENCES/CO	DNVENTION	541900	199,506	179,506		20,000
Ser.	d	LAYWER REFERRAL	L	541100	19,185	19,185		
Ē	e	DIRECTORY		511140	10,715	10,715		
Program Serwoe Revenue	f	All other progra	am service revenue					
	g		s 2a – 2f		1,296,014			
	3		ome (including dividend ar amounts)		36,806			36,806
	4		stment of tax-exempt bond p					
	5	Royalties		🕨				
			(ı) Real	(II) Personal				
	6a	Gross rents Less rental	11,910					
	Ь	expenses						
	C	Rental income or (loss)	11,910				ı	
	d	Net rental incor	me or (loss)		11,910			11,910
	 7a	Gross amount	(ı) Securities	(II) O ther				
	'"	from sales of assets other than inventory	168,980					
	ь	Less cost or other basis and	126,518					
	c	sales expenses Gain or (loss)	42,462					
	d		(ss)		42,462			42,462
ψ		Gross income fi	rom fundraising		· · ·			
Other Revenue		\$	s reported on line 1c)					
<u></u>			a					
Ě			penses b					
0	C		(loss) from fundraising e	events 🛌				
	Ja	See Part IV, lin	rom gaming activities ne 19					
			a					
			penses b (loss) from gaming activ	ution				
		Gross sales of returns and allo	inventory, less	rices				
		returns and and	a					
	ь	Less cost of go	oods sold b					
	С	Net income or ((loss) from sales of inve	ntory 🛌				
		Miscellaneous		Business Code				
		OTHER INCOM	<u> 1</u>	900099	7,668	7,668		
	b							
	C	A 11 - +1-						
	d e	All other revenu	L	▶				
					7,668			
	12	Total revenue.	See Instructions	🕨	1,500,842	1,201,817	81,865	111,178

	TV Chatamant of Functional Functional				rage 10
	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete all columns All	othor organizati	one must com	oloto column (A.)	
Section					
_	Check if Schedule O contains a response or note to any line in this l		(B)	(c)	<u>l</u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	30,510			
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	135,924			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	267,174			
8	Pension plan accruals and contributions (include section 401(k)				
	and 403(b) employer contributions)	8,040			
9	Other employee benefits	46,910			
10	Payroll taxes	32,017			
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting	5,900			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	13,359			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	7,468			
12	Advertising and promotion	3,246			
13	Office expenses	23,190			
14	Information technology	31,693			
15	Royalties				
16	Occupancy	110,663			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	263,294			
20	Interest	23,986			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	49,730			
23	Insurance	11,391			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	LEGAL JOURNAL EXPENSES	210,315			
b	POSTAGE	26,214			
c	MEMBERSHIP FEES	9,722			
d	DIRECT ADVERTISING COST	9,143			
e	All other expenses	3,932			
25	Total functional expenses. Add lines 1 through 24e	1,323,821			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in t	.iiis Fait		(A) Beginning of year	•	(B) End of year
	1	Cash-non-interest-bearing			184,501	1	149,212
	2	Savings and temporary cash investments			622,643	2	808,216
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former officers, demployees, and highest compensated employees. Complete Paschedule L	rt II of			5	
şı;	6	Loans and other receivables from other disqualified persons (a: 4958(f)(1)), persons described in section 4958(c)(3)(B), and cand sponsoring organizations of section 501(c)(9) voluntary erorganizations (see instructions) Complete Part II of Schedule I	ontribut mployee:	ting employers		6	
assets	7	Notes and loans receivable, net				7	
₹	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			10,688	9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	1 1	2,102,284			
	Ь	Less accumulated depreciation	10b	987,719	1,154,157	10c	1,114,565
	11	Investments—publicly traded securities			1,382,263	11	1,475,396
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets		-		14	
	15	Other assets See Part IV, line 11		_		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			3,354,252	16	3,547,389
	17	Accounts payable and accrued expenses			, ,	17	
	18	Grants payable				18	
	19	Deferred revenue		_		19	
	20	Tax-exempt bond liabilities		_		20	
	21	Escrow or custodial account liability Complete Part IV of Sche	dule D			21	
lities	22	Loans and other payables to current and former officers, directively employees, highest compensated employees, and disqualif	ors, trus				
liabil.		persons Complete Part II of Schedule L				22	
Ξ	23	Secured mortgages and notes payable to unrelated third partie	s		537,302	23	489,277
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Pa					
		D				25	
	26	Total liabilities. Add lines 17 through 25			537,302	26	489,277
A D		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	⊽ and co	omplete			
2	27	Unrestricted net assets		-	1,434,687	27	1,582,717
ე ე	28	Temporarily restricted net assets			1,382,263	28	1,475,395
2	29	Permanently restricted net assets				29	
or ruini balance		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	ere ► ┌	and			
	30	Capital stock or trust principal, or current funds				30	
240	31	Paid-in or capital surplus, or land, building or equipment fund				31	
î	32	Retained earnings, endowment, accumulated income, or other f	unds			32	
≨	33	Total net assets or fund balances			2,816,950	33	3,058,112
_	34	Total liabilities and net assets/fund balances			3,354,252	34	3,547,389

Par	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		1,5	500,842
2	Total expenses (must equal Part IX, column (A), line 25)	2		1 7	323,821
3	Revenue less expenses Subtract line 2 from line 1	3			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				177,021
5	Net unrealized gains (losses) on investments	5		2,8	64,143
6	Donated services and use of facilities	6			04,143
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		3,0	58,112
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other modified cash If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
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 review a separate basis, consolidated basis, or both	wed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of tl	ne 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	ie	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		

DLN: 93493134061235

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

Political Campaign and Lobbying Activities

www.irs.gov/form990.

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V,

υEL	me of the organization LAWARE COUNTY BAR ASSOCIATION			Employer ider	ntification number
	LAWARE COUNTY BAR ASSOCIATION			23-1320047	
ar	rt I-A Complete if the or	ganization is exempt und	er section 501(c) or is a section 527	7 organization.
L	Provide a description of the or	ganızatıon's dırect and ındırect po	litical campaign act	civities in Part IV	
2	Political expenditures			▶	\$
3	V olunteer hours				
ar	TJG: Complete if the or	ganization is exempt und	er section 501(c)(3).	
		e tax incurred by the organization	_		\$
<u> </u>	·	e tax incurred by organization ma			\$
3		section 4955 tax, did it file Form			☐ Yes ☐ No
la	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
ar	rt I-C Complete if the or	ganization is exempt und	er section 501(c), except section 50)1(c)(3).
	Enter the amount directly expe	ended by the filing organization fo	r section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to	o other organization	s for section 527 ▶	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	ere and on Form 112	.0-POL, line 17b ►	\$
Ļ	Did the filing organization file I	Form 1120-POL for this year?			Yes No
5	organization made payments amount of political contribution	nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid fro d directly delivered	om the filing organization's to a separate political orga	funds Also enter the anization, such as a
	(-) Nove				
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
	(a) Name	(b) Address	(c) EIN	filing organization's	contributions received and promptly and directly delivered to a separate political organization If none,
	(a) Name	(b) Address	(c) EIN	filing organization's	contributions received and promptly and directly delivered to a separate political organization If none,
	(a) Name	(b) Address	(c) EIN	filing organization's	contributions received and promptly and directly delivered to a separate political organization If none,
	(a) Name	(b) Address	(c) EIN	filing organization's	contributions received and promptly and directly delivered to a separate political organization If none,
	(a) Name	(b) Address	(c) EIN	filing organization's	contributions received and promptly and directly delivered to a separate political organization If none,

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	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 \$500,00	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	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	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

	rt II-B Complete if the organization filed Form 5768 (election un	is exempt under section 501(c)(3) and has lader section 501(h)).	-			
For e	each "Yes" response to lines 1a through 1i below, pr	ovide in Part IV a detailed description of the lobbying	(a	a) 	(b)
activ	rity.		Yes	No	Amo	unt
1 a	legislation, including any attempt to influence performs the use of Volunteers?	mpt to influence foreign, national, state or local public opinion on a legislative matter or referendum,				
b C	Paid staff or management (include compensation Media advertisements?	on in expenses reported on lines 1c through 1i)?				
d	Mailings to members, legislators, or the public	7				
е	Publications, or published or broadcast statem	ents?				
f	Grants to other organizations for lobbying purp	oses?				
g	Direct contact with legislators, their staffs, gov	vernment officials, or a legislative body?				
h i	Rallies, demonstrations, seminars, conventions Other activities?	s, speeches, lectures, or any sımılar means?				
j	Total Add lines 1c through 1i		_			
2a	Did the activities in line 1 cause the organizati					
b	If "Yes," enter the amount of any tax incurred t			ļ		
C	If "Yes," enter the amount of any tax incurred b		_			
d	If the filing organization incurred a section 491					
Par	t III-A Complete if the organization 501(c)(6).	is exempt under section 501(c)(4), section	501(c))(5), o	r secti	ion
	301(0)(0).				Ye	s No
1	Were substantially all (90% or more) dues rec	eived nondeductible by members?			1	No
2	Did the organization make only in-house lobby				2 Yes	s
3	Did the organization agree to carry over lobbying	ng and political expenditures from the prior year?			3	No
Par		is exempt under section 501(c)(4), section ! OTH Part III-A, lines 1 and 2, are answered "				
1	Dues, assessments and similar amounts from	members	1			
2	Section 162(e) nondeductible lobbying and polexpenses for which the section 527(f) tax was	itical expenditures (do not include amounts of political spaid).				
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			
3)(1)(A) notices of nondeductible section 162(e) dues	3			
4		exceeds the amount on line 3, what portion of the excess reasonable estimate of nondeductible lobbying and	4			
5	Taxable amount of lobbying and political expen	nditures (see instructions)	5			
Pa	art IV Supplemental Information					
	ovide the descriptions required for Part I-A, line 1 (see instructions), and Part II-B, line 1 Also, con	1 , Part I-B, line 4 , Part I-C , line 5 , Part II-A (affiliated groun nplete this part for any additional information	up list),	Part II-	A , lines	1 and
	Return Reference	Explanation				

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493134061235

OMB No 1545-0047

Open to Public

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

► 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.

Supplemental Financial Statements

► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Name of the organization **Employer identification number** DELAWARE COUNTY BAR ASSOCIATION 23-1320047 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Γ Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located **\(\mathbb{F}_{\top}\)** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Revenue included in Form 990, Part VIII, line 1

Part	•••• Organizations Maintaining Co	llections of Art,	<u> Histor</u>	<u>ical Tre</u>	easures	s, or Othe	<u>er Similar Asse</u>	ets (con	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other records	s, check				_	fits	
а	Public exhibition		d 「	Loan o	rexchan	ge programs	5		
b	Scholarly research		е Г	Other					
c	Preservation for future generations								
4	Provide a description of the organization's co Part XIII	llections and explain	how the	ey further	the orga	nızatıon's e	xempt purpose in		
5	During the year, did the organization solicit of								_
	assets to be sold to raise funds rather than t								☐ No
Par	Part IV, line 9, or reported an an	ount on Form 990), Part :	X, line 2	1.			0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ıntermed	lary for	contribut	ions or o	ther assets		Yes	√ No
b	If "Yes," explain the arrangement in Part XII	I and complete the fo	ollowing	table					
							Amo	unt	
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 Fo	rm 990, Part X, line	21, for 6	scrow or	custodia	ıl account lı	ability?	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the e	explanat	ion has b	een prov	ıded ın Part	XIII		Γ
Pai	rt V Endowment Funds. Complete		answei	ed "Yes					
		(a)Current year	(b)Prio		b (c) Two		1)Three years back (e) Four ye	ars back
1a	Beginning of year balance	1,382,263		1,213,919		1,098,813			
b	Contributions	20,000		20,000		10,000			
С	Net investment earnings, gains, and losses	139,052		206,885		149,668			
d	Grants or scholarships	43,560		33,140		24,760			
e	Other expenditures for facilities and programs	9,000		14,000		9,000			
f	Administrative expenses	13,359		11,401		10,802			
g	End of year balance	1,475,396		1,382,263		1,213,919			
2	Provide the estimated percentage of the curr	ent year end balance	(line 1	g, column	(a)) held	las			
а	Board designated or quasi-endowment ►								
b	Permanent endowment ►								
C	Temporarily restricted endowment ► 100 The percentages in lines 2a, 2b, and 2c shot	000 % uld equal 100%							
За	Are there endowment funds not in the posses	ssion of the organizat	on that	are held	and adm	ınıstered for	the		
	organization by							Yes	No
	(i) unrelated organizations						3a(i) 3a(ii)	++	No No
ь	(ii) related organizations						Sa(II)	<u> </u>	
4	Describe in Part XIII the intended uses of th	•							
Par	Land, Buildings, and Equipme 11a. See Form 990, Part X, line		e orga	nızatıon	answer	ed 'Yes' to	Form 990, Part	IV, lın	e
	Description of property			a) Cost or o		Cost or other asıs (other)	(c) Accumulated depreciation	(d) Boo	k value
	_and					33,967			33,967
	Buildings					1,811,171		1	,059,570
	_easehold improvements		. \vdash			42,924			9,863
	Equipment		. \vdash			107,243			9,910
	Other					106,979			1,255
	I. Add lines 1a through 1e <i>(Column (d) must e</i>			(B), line 1	0(c).)		·	1	,114,565
		,		. ,, =	× /-7 -		Schedule D (

(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•	
Part VIII Investments—Program Related. Co	mplete if the organizati	on answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	a answered 'Ves' to Form O	20 Part IV line 11d See Form 000 Part V line 15
(a) Descr		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. Complete if the orga		to Form 990, Part IV, line 11e or 11f. See
Part X Other Liabilities. Complete if the organization of the property of the	ınızatıon answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	ınızatıon answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	ınızatıon answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	ınızatıon answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	

Par		evenue per Audited Financial State vered 'Yes' to Form 990, Part IV, line 12		ts with Revenue p	er Ke	sturn Complete if
1		r support per audited financial statements			1	
2		it not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses)		2a			
b	Donated services and use of f	acılıtıes	2b			
c	Recoveries of prior year grant	s	2c			
d			2d			
e	Add lines 2a through 2d .		·		2e	
3	Subtract line 2e from line 1 .				3	
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			
C	Add lines 4a and 4b				4c	
5	Total revenue Add lines 3 and	d 4c. (This must equal Form 990, Part I, line :	12)		5	
Part		xpenses per Audited Financial Stat		nts With Expenses	per	Return. Complete
-		swered 'Yes' to Form 990, Part IV, line raudited financial statements				T
1	·				1	
2		t not on Form 990, Part IX, line 25	1 2-			
a			2a 2b		1	
b	Other losses				1	
C C			2c 2d		1	
d	Other (Describe in Part XIII)				3.	
e	Add lines 2a through 2d				2e	
3		O Dort IV line 25 but not on line 1.			3	
4		0, Part IX, line 25, but not on line 1: uded on Form 990, Part VIII, line 7b	۔ ا			
a	•		4a		1	
b			4b		4.	
с 5					4c 5	
_	XIII Supplemental Inf		: 10)			<u> </u>
		Part II, lines 3, 5, and 9, Part III, lines 1a a	nd 4	Part IV lines 1 b and 2 b		
		, lines 2d and 4b, and Part XII, lines 2d and				e any additional
ınforı	nation	_				
	Return Reference	Explanation				
PART	V, LINE 4	THE ENDOWMENT FUNDS ARE INTENDE LEGAL EDUCATION AND ENHANCE THE THE SIX PRIMARY PURPOSES (1) FOSTE ADMINISTRATION OF JUSTICE IN DELA SUPPORT THE CONTINUING EDUCATIO AND SUPPORT CONFERENCES BETWEEN AND MEMBERS OF THE ASSOCIATION, (INSTITUTIONS TO FOSTER AND SUPPO AND GOVERNMENT, (5) TO MAKE GRANPERPETUATING AND RECORDING THE HASSOCIATION AND JUSTICE SYSTEM IN OTHER PROGRAM ENABLING MEMBERS OF PROFESSION AND THE PUBLIC	RELATER AN WARE NOFT OF TOTAL	TIONSHIP BETWEEN AD SUPPORT THE IMPR COUNTY, PENNSYLVA THE ASSOCIATION'S GES IN DELAWARE CO MAKE GRANTS TO NO ACHING AND STUDY I WARD ANY PROJECT E RY AND TRADITIONS	ATTOR OVEM ANIA, MEMB UNTY, ONPRO IN THE ESTAB OF TH	RNEYS AND JUDGES ENT OF THE (2) FOSTER AND ERS, (3) FOSTER PENNSYLVANIA FIT EDUCATIONAL FIELDS OF LAW LISHING, E BAR ANIA, AND (6) ANY

Jenedale 2 (1 31111 33 3) 23 13		i age S
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

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Schedule I (Form 990)

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

OMB No 1545-0047

DLN: 93493134061235

Department of the Treasury

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

Inspection Employer identification number

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization DELAWARE COUNTY BAR ASSOCIATION

General Information on Grants and Assistance

23-1320047

	er Assistance to		ations and Domes	stic Governments		rganization answered Il space is needed.	i "Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) LEGAL AID OF SOUTHEASTERN PENNSYLVANIA 625 SWEDE STREET NORRISTOWN,PA 19401	23-1901014	501(C)(3)	6,750		FMV		TO PROVIDE OPERATION SUPPORT AND PROGRAMS IN DELAWARE COUNTY
(2) TEMPLE UNIVERSITY SCHOOL OF LAW 1719 N BROAD STREET PHILADELPHIA, PA 19122	23-1365971	501(C)(3)	5,000		FMV		TO PROVIDE ASSISTANCE FOR SCHOLARSHIPS
(3) WIDENER UNIVERSITY SCHOOL OF LAW 4601 CONCORD PIKE WILMINGTON, DE 19803	23-1386178	501(C)(3)	8,760		FMV		TO PROVIDE ASSISTANCE FOR SCHOLARSHIPS AND SUPPORT FOR THE CHADWICK CONSTITUTIONAL LAW FELLOWSHIP PROGRAM
(4) VILLANOVA UNIVERSITY SCHOOL OF LAW 299 NORTH SPRING MILL ROAD VILLANOVA, PA 19085	23-1352688	501(C)(3)	5,000		FMV		TO PROVIDE ASSISTANCE FOR SCHOLARSHIPS
(5) DREXEL UNIVERSITY SCHOOL OF LAW 3320 MARKET STREET PHILADELPHIA, PA 19104	23-1352630	501(C)(3)	5,000		FMV		TO PROVIDE ASSISTANCE FOR SCHOLARSHIPS
(6)							TO PROVIDE ASSISTANCE FOR SCHOLARSHIPS

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

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.										
Return Reference	Explanation									
PART I, LINE 2	THE ASSOCIATION HAS TWO FORMS OF GRANTS THE FIRST TYPE OF GRANT IS STRUCTURED AS A SCHOLARSHIP LOCAL LAW SCHOOLS ARE GIVEN GRANTS THAT ARE SPECIFICALLY ALLOCATED TO BE USED AS SCHOLARSHIPS FOR LAW STUDENTS THE STUDENTS MUST COME FROM DELAWARE COUNTY, PENNSYLVANIA AND MEET CERTAIN CRITERIA ESTABLISHED BY THE ASSOCIATION AND THE INDIVIDUAL LAW SCHOOLS THE LAW SCHOOLS SELECT THE STUDENTS TO RECEIVE THE GRANTS AND SEND UPDATES TO THE ASSOCIATION REGARDING THE USE OF FUNDS THE SECOND FORM OF GRANT IS PROGRAM BASED IN THIS TYPE, A GRANT IS GIVEN TO FURTHER PROMOTE LAW RELATED PROGRAMS THROUGHOUT DELAWARE COUNTY A REPORT IS SUBMITTED BY THE RECEIVING ORGANIZATION TO THE ASSOCIATION INDICATING HOW THE GRANT MONEY HAS BEEN USED									

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OMB No 1545-0047

2014

Open to Public Inspection

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.

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

Name of the organization DELAWARE COUNTY BAR ASSOCIATION

Employer identification number

23-1320047

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	ALL INDIVIDUALS ARE VOTING MEMBERS OF THE ORGANIZATION WITH NO MONETARY BENEFITS INCURRED TO ANY MEMBER
FORM 990, PART VI, SECTION A, LINE 7A	THE MEMBERSHIP DOES ELECT THE MEMBERS OF THE GOVERNING BODY AT THE DCBA ANNUAL MEETING EACH DECEMBER
FORM 990, PART VI, SECTION A, LINE 7B	ANY DECISIONS RELATED TO BY-LAWS AMENDMENTS MUST BE APPROVED BY THE MEMBERSHIP AT THE ANNUAL MEETING IN DECEMBER
FORM 990, PART VI, SECTION B, LINE 11	COPIES OF THE 990 ARE PROVIDED TO ALL MEMBERS OF THE BOARD OF DIRECTORS PRIOR TO SIGNATURE BY THE TREASURER
FORM 990, PART VI, SECTION B, LINE 12C	THE DIRECTORS AND OFFICERS ARE ASKED TO SIGN "CONFLICT OF INTEREST" STATEMENTS EACH YEAR
FORM 990, PART VI, SECTION C, LINE 18	TAX FORMS ARE AVAILABLE TO THE PUBLIC UPON REQUEST AT THEIR PLACE OF BUSINESS
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST AT THEIR PLACE OF BUSINESS

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DLN: 93493134061235

2014

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization DELAWARE COUNTY BAR ASSOCIATION **Employer identification number**

23-1320047

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total ıncome	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512((13) controlle entity?	
						Yes	No
(1) DELAWARE COUNTY BAR FOUNDATION 335 W FRONT STREET MEDIA, PA 19063 23-2026189	EDUCATION OF ATTORNEYS AND LAW STUDENTS	PA	501(C)(3)		DELAWARE COUNTY BAR ASSOCIATION	Yes	

Yes No

Yes

No

(a) Name, address, and EIN of related organization (b) Primary activity I Legal domicile (state or foreign country) (state or foreign countr	Part III	Identification of Related Organizations Taxable a because it had one or more related organizations treated.					atıon ansv	vered "Ye:	s" on Form	990, Part I	V, line 34	4
		Name, address, and EIN of	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income(related, unrelated, excluded from tax under sections 512-		Share of end-of-year	Disproprtionate allocations?	Code V-UBI amount in box 20 of Schedule K-1	managing	(k) Percentage ownership

Part IV	Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV,
	line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	
		(state or foreign		corp,		assets		controlled	
		country)		or trust)				entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answer	red "Yes" on Forn	n 990, Part IV, line	e 34, 35b, or 36.		age 3
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more rel	ated organizations li	sted in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a		No
b Gift, grant, or capital contribution to related organization(s)			1b		No
c Gift, grant, or capital contribution from related organization(s)			1c	Yes	
d Loans or loan guarantees to or for related organization(s)			1d		No
e Loans or loan guarantees by related organization(s)			1e		No
f Dividends from related organization(s)			1f		No
g Sale of assets to related organization(s)			1 g		No
h Purchase of assets from related organization(s)			1h		No
i Exchange of assets with related organization(s)			1i		No
j Lease of facilities, equipment, or other assets to related organization(s)			<u>1j</u>		No
k Lease of facilities, equipment, or other assets from related organization(s)			1k		No
I Performance of services or membership or fundraising solicitations for related organization(s)			11		No
m Performance of services or membership or fundraising solicitations by related organization(s)			1m	1	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1n	Yes	
• Sharing of paid employees with related organization(s)			10		No
P Reimbursement paid to related organization(s) for expenses			1p		No
q Reimbursement paid by related organization(s) for expenses			1q		No
r Other transfer of cash or property to related organization(s)			1r		No
s Other transfer of cash or property from related organization(s)			1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	overed relationships	and transaction thresholds		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	ınvolve	d

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

1 <u> </u>													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	so 50 organ	(e) all partners section 01(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionat allocations?	7	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
	<u> </u>	<u> </u>	514)	Yes	No	1	<u> </u>	Yes	No		Yes	No	
									\Box	1			

Schedule R (Form 990) 2014

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014

Page **5**

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DLN: 93493134061235

OMB No 1545-0172

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

		Information at	oout Form 4562 and its se	parate instruction	ns is at <u>www.i<i>rs</i></u>	.gov/form45	<u>62.</u>	Sequence No 179
	e(s) shown on return			or activity to which	this form relates		Id	lentifying number
) E L	AWARE COUNTY B	AR ASSOCIATIO	N FORM 95	90 PAGE 10			2.	3-1320047
Pa			Certain Property U					
			isted property, compl	ete Part V bef	ore you comp	lete Part I.	Π.	
1	Maximum amount	` ,					1	500,000
2			laced in service (see ins				2	
3			rty before reduction in li	•	structions) •		3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- · · · · · · · · ·						4	
5	Dollar limitation fo	rtax year Subtra	ct line 4 from line 1 If ze	ro or less, enter	-0- If married	filing		
	separately, see ins	structions • •					5	
				(h) Cost (h	usiness use			
6	(a) Description of p	roperty	1 1 1	ly)	(c) Elected	cost	
								$oldsymbol{eta}$
7	Listed property E	nter the amount fr	om line 29		. 7			<u> </u>
8	Total elected cost	of section 179 pr	operty Add amounts in o	column (c), lines	6 and 7 • •		8	
9	Tentative deduction	n Enterthe small	er of line 5 or line 8 •				9	
10	Carryover of disall	owed deduction fro	om line 13 of your 2013	Form 4562 •			10	
11	Business income l	ımıtatıon Enter th	e smaller of business inc	ome (not less tl	han zero) or line	5 (see		
	instructions)						11	
12	Section 179 exper	nse deduction Add	d lines 9 and 10, but do i	not enter more tl	han line 11		12	
			015 Add lines 9 and 10		. ► 13			
			below for listed prope					
			Allowance and Othe			nclude listed	prope	rty) (See instructions)
14			ualified property (other th					
	the tax year (see i	nstructions) •					14	5,070
15	Property subject to	section 168(f)(1) election · ·				15	
			,)				16	500
			Do not include listed		ee instruction	s.)		
				ection A				
17	MACRS deductions	s for assets place	d in service in tax years	beginning before	2014 • • •		17	43,43
18	If you are electing	to group any asse	ets placed in service duri	ng the tax year	into one or mor	e general		•
	asset accounts, ch	neck here				. ▶□		
	Section B-As	sets Placed in	Service During 20	14 Tax Year	Using the G	eneral De	preci	iation System
			(c) Basıs for					
(a) Classification of	(b) Month and	•	(d) Recovery	(-) ((6) M - H		(g)Depreciation
•	property	year placed in service	(business/investment use	period	(e) Convention	n (f) Meth	noa	deduction
		3617166	only—see instructions)					
L9a	3-year property							
b	5-year property							
c :	7-year property		See Add'l Data					
d	10-year property							
е	15-year property							
f	20-year property							
g	25-year property			25 yrs		S/L		
h	Residential rental			27 5 yrs	ММ	S/L		
	property			27 5 yrs	ММ	S/L		
	lonresidential real			39 yrs	ММ	S/L		
	property		<u> </u>		MM	S/L		
		ion C—Assets Pla	ced in Service During 201	L4 Tax Year Usin ⊤	g the Alternati │		on Sys	stem
	Class life	-		12	1	S/L		
	12-year	+		12 yrs	8484	S/L		
	40-year		tions \	40 yrs	MM	S/L		
		ary (see instruc					34	T
	isted property Ente						21	
22 1			14 through 17, lines 19				_	
_	·		your return Partnerships	· ·		ıctıons • •	22	49,73
	For assets shown ab portion of the basis a		service during the curre tion 263A costs .	nt year, enter th	e . 23			

Form 4562 (2014) Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, 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 24a Do you have evider										"Yes," is						
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(o Cost o	i) r other sıs	Basis for (busines	(e)	ation	(f) Recove period		(g) 1ethod/ nventior	n	(f Depred dedu			(i) Electe section cost	179
25Special depreciation allo	•		ty placed	ın service d	during the	tax year	and u	ised mo	ore than	25						
26 Property used more	•		usiness	use						1 ==						
,		%														
		%									_					
27 Property used 50%	n orless in a		ness IIs	.e												
zr i roperty used 50 %	0 01 1033 111 0	%	11033 43						S/L -							
		%							S/L -					\exists		
		%			<u> </u>				S/L -							
28 Add amounts in co						ne 21,	page	1	28							
29 Add amounts in co	olumn (ı), lın					•		• •			•	•	29			
Complete this section	for vehicles	used by a sol	e propri	—Infor	tner, or o	ther "n	nore 1	than 5	% ow	ner," or	relat	ed per	son			
If you provided vehicles to	your employee	es, first answer th	e questio		a)		neet a b)	n exce	ption to (c)	complet		d)		_		(f)
30 Total business/in year (do not inclu			ng the •	Vehi	•		cle 2	<u> </u>	/ehicle	e 3	Vehi	•	-	e) icle 5		icle 6
31 Total commuting	mıles drıven	during the yea	ır .													
32 Total other person	nal(noncomn	nuting) miles d	rıven													
33 Total miles driven through 32	during the y	ear Add lines	30													
34 Was the vehicle a	vailable for p	personal use	-	Yes	No	Yes	No	Ye	es	No	Yes	No	Yes	No	Yes	No
during off-duty ho	urs? .		_											+		1
35 Was the vehicle u	sed primaril	y by a more tha	an 5%													
36 Is another vehicle		r personal use	2 .													
Section Answer these question 5% owners or related	ns to determ		t an exc												not mo	re tha
37 Do you maintain a employees?	written poli	cy statement t	hat prof	nibits all i	personal • •	use of	vehi	cles,ı	ncludı • •	ng com	mutir	ig, by	your	Y	'es	No
38 Do you maintain a employees? See t																
39 Do you treat all us																
40 Do you provide movehicles, and reta	ore than five	vehicles to yo	ur empl			rmatio	n fro	m you	r empl	oyees	about	the us	se of			
41 Do you meet the r				automobi	le demor	nstratio	n us	e?(Se	e inst	ruction	s).				+	
Note: If your answ	ver to 37, 38,	39, 40, or 41 is	"Yes,"	do not con	mplete Se	ection B	for tl	he cov	ered ve	ehicles.						
	rtization															
(a) Description of c	osts	(b) Date amortization		(c A mort a mo	ızable			(d) Code ection		(e) mortiz perioc	ation for			(f) ortizati this ye		
42 A mortization of as	ete that he	begins	r 2014	tav voor	(see inc	tructic	ne \			percen	caye					
42 A mortization of co	vata tilat beg	jiiis uuriiig you	1 2014	cax year	(see IIIS	i uctioi	115)		Т							
	+		-			_			-+							
43 A mortization of co	oto that has	inn hofore	. 2014	+av ::a==						Т	43					
44 Total. Add amoun	_	•		•	ere to re	port	•			: :	43					
		,, === me m		****			-	- •		1						

Additional Data

Software ID: Software Version:

EIN: 23-1320047

Name: DELAWARE COUNTY BAR ASSOCIATION

Form 4562, Part III, Line 19, Section B—Assets Placed in Service During 2014 Tax Year Using the General Depreciation System:

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g)Depreciation deduction
	c 7-year property		2,694	7 0	HY	200 DB	385
Ţ	c 7-year property]	2,375	7 0	HY	200 DB	339