DLN: 93493224012090 OMB No 1545-0047 **Return of Organization Exempt From Income Tax** Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019 C Name of organization D Employer identification number **B** Check if applicable GREATER BRIDGEPORT BAR ASSOCIATION INC ☐ Address change 06-1033620 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1057 BROAD STREET \square Amended return ☐ Application pending (203) 384-9346 City or town, state or province, country, and ZIP or foreign postal code $\mbox{BRIDGEPORT},\mbox{CT}$ $\mbox{06604}$ G Gross receipts \$ 142,853 art on and

Form	990 (2	019)				Page 2
Pa	rt III	Statement of	Program Service Acc	complishments		
		Check if Schedule	O contains a response or	note to any line in this Part I		🗆
1	Briefly					
	HE ASSOCIATION IS ENGAGED IN PROVIDING LEGAL REFERRAL SERVICES AND IN EDUCATING ITS MEMBERS ON VARIOUS COURAGING CORDIAL EXCHANGE AMONG ITS MEMBERS BY SPONSORING VARIOUS SOCIAL EVENTS Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as meast Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, expenses, and revenue, if any, for each program service reported (Code) (Expenses \$ including grants of \$) (Revenue \$ See Additional Data (Code) (Expenses \$ including grants of \$) (Revenue \$ See Additional Data (Code) (Expenses \$ including grants of \$) (Revenue \$) (Code) (Expenses \$ including grants of \$) (Revenue \$)		RIOUS LEGAL ISSUES AND			
2	Dıd th	e organization und	ertake any significant pro	gram services during the yea	r which were not listed on	
	the pr	ıor Form 990 or 99	0-EZ?			🗌 Yes 🗹 No
	If "Ye	s," describe these r	new services on Schedule	0		
3	Did th	e organization ceas	se conducting, or make si	gnificant changes in how it co	onducts, any program	
	servic	es [?]				. 🗌 Yes 🗹 No
	If "Ye	s," describe these o	thanges on Schedule O			
4	Section	n 501(c)(3) and 50	${\sf O1(c)(4)}$ organizations are	required to report the amou	ree largest program services, as m nt of grants and allocations to othe	leasured by expenses ers, the total
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	•	ldıtıonal Data	, (=\\F\\=\\\=\\\=\\\=\\\=\\\=\\\\=\\\\=\		, (,
	-					
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Ac	ditional Data				
4c	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
	Other	program services	(Describe in Schedule O)			
_			,) (Revenue \$)
4e	Total	program service	expenses ►			
			-			Form 990 (2019)

Pa	rt 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? If "Yes," complete Schedule C, Part III	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? If "Yes," complete Schedule D, Part 9	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," complete Schedule D,</i> Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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 2	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 2	11c		No

Form	990 (2019)			Page 4
Par	Checklist of Required Schedules (continued)			
			Yes	No
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		
c	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? <i>If "Yes," complete Schedule L, Part I</i>	25b		
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> , Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	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? If "Yes," complete Schedule M	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 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	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>

1a

1b

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

0

0

1c

	990 (2019)			Page 5
Pa	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
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			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	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)? If "Yes," enter the name of the foreign country	4a		No
E >	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		
эа b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No No
		5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	V	
	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	Yes	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b	Yes	
	Organizations that may receive deductible contributions under section 170(c).	7 -		
	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?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
u	The s, indicate the number of forms 5252 filed during the year 1. 1. 1.			
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 required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 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		
9	Sponsoring organizations maintaining donor advised funds.			
а	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 10b			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
Ь	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 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	44.		NI -
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess	14b		
15	parachute payment(s) during the year?	15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O	16		No

Form	990 (2019)			Page 6
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	" resp	onse to i	lines
Se	ction 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 17			
	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			
Ь	Enter the number of voting members included in line 1a, above, who are independent 1b 17			
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	Yes	
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		No
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?	7 b		No
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?	8 b	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
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	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	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			Į
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed▶			
	CT			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A 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			
10	Own website Another's website Upon request Other (explain in Schedule O)			
19 20	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 State the name, address, and telephone number of the person who possesses the organization's books and records			
20	►MATTHEW REALE 1057 BROAD STREET BRIDGEPORT, CT 06604 (203) 384-9346		orm 004	n (2019)

Part VII

PRESIDENT ELECT

(15) STEVEN A LEVY

VICE PRESIDENT

(16) ETAN HIRSCH

SECRETARY

TREASURER

(17) CHARLEEN MERCED AGOSTO

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII $\,$.

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax
- 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

organization and any related organizations										
 List all of the organization's former officers, of reportable compensation from the organization 					pen	sated	emp	oloyees who receive	ed more than \$100),000
• List all of the organization's former director organization, more than \$10,000 of reportable co										
See instructions for the order in which to list the		illi tile t	Ji yan	lizat	1011 6	anu ai	ıy ı	elated organization	5	
Check this box if neither the organization no	r any related or	ganızat	ion c	omp	ens	ated a	any (current officer, dire	ctor, or trustee	
(A) Name and title	(B) Average hours per week (list any hours for related	pers and	an on on is	e bo both	t che ox, u h an or/tr	nless office ustee)	er)	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	`Misc)	` MÍSC)	related organizations
(1) JANINE M BECKER	1 00									
DIRECTOR		X						0	0	0
(2) JAMES E BUTLER DIRECTOR	1 00	×						0	0	0
(3) VICTOR M FERRANTE DIRECTOR	1 00	х						0	0	0
(4) VENOAL M FOUNTAIN JR DIRECTOR	1 00	x						0	0	0
(5) LUCAS HERNANDEZ DIRECTOR	1 00	×						0	0	0
(6) JAMES D HOROWITZ DIRECTOR	1 00	х						0	0	0
(7) THOMAS FMAXWELL JR DIRECTOR	1 00	х						0	0	0
(8) ADAM S MOCCIOLO DIRECTOR	1 00	х						0	0	0
(9) PETER B O'CONNELL DIRECTOR	1 00	х						0	0	0
(10) TIMOTHY M RAMSEY DIRECTOR	1 00	Х						0	0	0
(11) JORDAN SALA DIRECTOR	1 00	×						0	0	0
(12) JESSICA A SLIPPEN DIRECTOR	1 00	×						0	0	0
(13) MATTHEW C REALE PRESIDENT	1 00			х				0	0	0
(14) FRANK A BAILEY	1 00			Ţ					0	

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week (list any hours		oth a direct		and a		from the organization	from related organizations	compensation from the
for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations

1b Sub-Total			 ٠.	>		I
a Tatal fuam cantinuation about to D	am I/II Caatiaa	A .		-		

1b Sub-Total	 		>			
c Total from continuation sheets to P			▶ _			
d Total (add lines 1h and 1c)			•	ol	ol	0

Total number of individuals (including but not limited to those listed above) who received more than \$100,000

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

services rendered to the organization? If "Yes," complete Schedule J for such person .

(A)

Name and business address

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

from the organization Report compensation for the calendar year ending with or within the organization's tax year

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

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on

of reportable compensation from the organization > 0

Section B. Independent Contractors

compensation from the organization ▶ 0

line 1a? If "Yes," complete Schedule J for such individual .

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							l					
1b Sub-Total												

1b Sub-Total		 •	>		

		·		·		
1b Sub-Total				>		
c Total from continuation sheets to Pa	rt VII Section	۸		- ▶ □		

Yes

3

4

5

(B)

Description of services

No

No

No

Nο

(C)

Compensation

Form 990 (2019)

		(2019)	of D	lavanua						Page 9
Part	VIII				respo	onse or note to any	line in this Part VIII			🗆
		Check ii Schee	aure	o concamb d	Георо	MISC OF FIOCE TO UNITY	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
10	1a	Federated campa	igns		1a			revenue		512 - 514
ants	Ŀ	Membership dues	s .	. [1 b					
, Gr	(: Fundraising even	ts .	. [1c					
ifts, ar A		d Related organizat		Ļ	1d	13,520				
Contributions, Gifts, Grants and Other Similar Amounts		Government grants		Ļ	1e					
	f	 All other contribution and similar amounts above 			1f					
ibut Xthe	و	Noncash contributio	ns in	cluded in						
ontr nd C		lines 1a - 1f \$			1 g					
ة ت	'	h Total. Add lines :	1a-1	f	•	>	13,520			
	2-	MEMBERSHIP DUES				Business Code	83,400	83,400		
Je.						900099	·			
ven	b	LAWYER REFERRAL S	VCS			900099	11,574	11,574		
τ. Τ	c	SEMINARS				900099	7,650	7,650		
Program Service Revenue										
	d									
	e									
	_									
		All other program				100.504				
		Total. Add lines 2 Investment income				nterest, and other	1			
	S	ımılar amounts) .	•			Þ		4		4,914
		Income from invest Royalties		t of tax-exe		ond proceeds				
		,		(ı) Rea		(II) Personal				
	6a	Gross rents	6a		700)				
	b	Less rental					1			
	r	expenses Rental income	6b		361		-			
		or (loss)	6 c		339)				
	d	Net rental income	or ((ı) Securi		(II) Other	339	9		339
		Gross amount	_	(i) Securi	cies	(II) Other	1			
		from sales of assets other than inventory	7a							
	b	Less cost or other basis and sales expenses	7b							
	С	Gain or (loss)	7с							
		Net gain or (loss)]			
ae		Gross income from fu (not including \$		of						
/en		contributions reported See Part IV, line 18			8a					
Re	b	Less direct expen	ses		8b		-			
Other Revenue	С	Net income or (los	s) fr	om fundraisi	ing ev	ents				
	9a	Gross income from	gamı	ng activities						
		See Part IV, line 19			9a					
		Less direct expen Net income or (los			9b	195	J			
	·	The meanie of (100	. . , 11	om gaming		les >	1			
	10a	Gross sales of inve returns and allowa			10a					
	b	Less cost of good	s sol	d	10b		1			
	С	Net income or (los			invent		_			
	11.	Miscellaneo	us R	evenue		Business Code 90009	9 21,09	5 21,095		
		-MEMDEK EVENIS				30009	21,03	21,093		
	b									
	c									
		All other revenue				•				
		Total. Add lines 1 Total revenue. Se				•	21,09	5		
	14	тотагтемение, 5	ee in	1301 UCU10[15 1	• •	•	142,49	2 123,719		0 5,253

orm 990 (2019)				Page :
Part IX Statement of Functional Expenses		All		
Section 501(c)(3) and 501(c)(4) organizations must co		_		umn (A) □
Check if Schedule O contains a response or note to any		(B)	(c)	⊔ (D)
o not include amounts reported on lines 6b, o, 8b, 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	2,135			
2 Grants and other assistance to domestic individuals See Part IV, line 22				
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				
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	75,054			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
0 Payroll taxes	8,923			
Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	425			
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
2 Advertising and promotion				
3 Office expenses	23,790			
1 Information technology				
5 Royalties				
6 Occupancy	34,898			
7 Travel				
Payments of travel or entertainment expenses for any federal, state, or local public officials				
9 Conferences, conventions, and meetings	2,076			
0 Interest				
1 Payments to affiliates				
2 Depreciation, depletion, and amortization	1,302			
3 Insurance	2,797			
4 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)				
a MEMBER EVENTS	22,828			
b				
с				
d				
e All other expenses				
5 Total functional expenses. Add lines 1 through 24e	174,228			
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)				

Form 990 (2019)

2

3

Assets

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

30

31

32

33

ō 29

Assets

(B)

End of year

Page **11**

7,121

70,421

2,287

151,883

40.001

0

0

191.711

191,711

231,712

Form 990 (2019)

b Less accumulated depreciation

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Intangible assets .

Grants payable .

Deferred revenue . .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Investments—other securities See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D

or family member of any of these persons

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow FASB ASC 958, check here

Organizations that do not follow FASB ASC 958, check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

Investments—program-related See Part IV, line 11

Cash-non-interest-bearing	
Savings and temporary cash investments	
Pledges and grants receivable, net	
Accounts receivable, net	

Check if Schedule O contains a response or note to any line in this Part IX . . .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled

20,920

entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). Notes and loans receivable, net . . Inventories for sale or use . Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other 10a 23,207 basis Complete Part VI of Schedule D

10b Investments—publicly traded securities .

Beginning of year

2,465

91,542

3,589

118,703

216,299

9.246

9.246

26

27

28

30

31

32

33

0 29

0

207.053

207,053

216,299

1

2

3 4

5

6

Liabilities Fund Balances

Form	990 (2019)				Page 12
Pai	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			142,492
2	Total expenses (must equal Part IX, column (A), line 25)	2			174,228
3	Revenue less expenses Subtract line 2 from line 1	3			-31,736
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			207,053
5	Net unrealized gains (losses) on investments	5			16,394
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	<u> </u>		191,711
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				✓
				Yes	No
1	MODIFIED TO A CONTROL OF THE CONTROL				
	Accounting method used to prepare the Form 990				
	Schedule O		1	l	I
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 reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2 b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basıs,			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule C	,		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii Audit Act and OMB Circular A-133?	ngle	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

Form **990** (2019)

Additional Data

Software ID: Software Version:

EIN: 06-1033620

Form 990, Part III, Line 4a:

AREAS OF THE PRACTICE OF LAW

Form 990 (2019)

Name: GREATER BRIDGEPORT BAR ASSOCIATION INC.

SEMINARS ARE ARRANGED & OTHER SERVICES ARE PROVIDED FOR MEMBERS OF THE BAR ASSOCIATION FOR PURPOSES OF SOCIALIZATION & EDUCATION IN VARIOUS

Form 990, Part III, Line 4b: THE ASSOCIATION ASSISTS THE PUBLIC BY REFERRING THOSE IN NEED OF LEGAL SERVICES TO MEMBER ATTORNEYS PRACTICING IN THE AREA OF LAW NEEDED BY THE PERSON BEING REFERRED

SCHEDULE C

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

DLN: 93493224012090

Open to Public

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

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

Inspection

• 5 • 5 f the • 5 • 5 f the (Prox	Section 501(c) (other than section 5 Section 527 organizations Completer organization answered "Yes" of Section 501(c)(3) organizations that Section 501(c)(3) organizations that	n Form 990, Part IV, Line 4, or Form thave filed Form 5768 (election unde thave NOT filed Form 5768 (election n Form 990, Part IV, Line 5 (Proxy 1 s), then	arts I-A and C below 1990-EZ, Part VI, III r section 501(h)) Counder section 501(h	ne 47 (Lobbying Active complete Part II-A Do non)) Complete Part II-B	/ities), ot com Do no	plete Part II-l t complete Pa	art II-A
	ne of the organization			Employer	identi	fication nun	ber
GRE	ATER BRIDGEPORT BAR ASSOCIATION I	NC			_		
Dar	t I-A Complete if the orga	nization is exempt under sect	ion EO1(c) or is	06-103362		tion	
1		ization's direct and indirect political o					
2	Political campaign activity expend	itures (see instructions)		•	\$		
3	Volunteer hours for political camp	· ·		•	,		
Par		nization is exempt under sect	ion 501(c)(3).				
1	Enter the amount of any excise ta	ax incurred by the organization under	section 4955	•	\$		
2		ex incurred by organization managers		•	\$		
3	If the organization incurred a sect	tion 4955 tax, did it file Form 4720 fo	or this year?		,		□ No
4a	Was a correction made?					_	_
ь	If "Yes," describe in Part IV					☐ Yes	∐ No
		nization is exempt under sect	ion 501(c), exc	ept section 501(c)	(3).		
1	Enter the amount directly expend	ed by the filing organization for section	on 527 exempt func	tion activities >	\$		
2	Enter the amount of the filing org function activities	anization's funds contributed to other	r organizations for s	ection 527 exempt	\$		
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and	on Form 1120-POL,	, line 17b	\$		
4	Did the filing organization file For	m 1120-POL for this year?			Τ,		□ No
5	organization made payments For of political contributions received	employer identification number (EIN) each organization listed, enter the a that were promptly and directly deliv ee (PAC) If additional space is neede	mount paid from the ered to a separate p	e filing organization's fu political organization, si	unds A	Also enter the	amount
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fre filing organization funds If none, ent -0-	's	(e) Amount contributions and promp directly delives separate proganization enter	received otly and ered to a political If none,
1							
2							
3							
4							
5							
6							
For P	aperwork Reduction Act Notice, see	l the instructions for Form 990 or 990-F	7. Cat	No E00946 Schodul	o C (Fo	rm 000 or 000	LEZ) 2010

activity

Volunteers?

Part IV

Return Reference

Supplemental Information

instructions), and Part II-B, line 1 Also, complete this part for any additional information

1

(b)

Amount

(a)

Yes | No

Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 Yes 1 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? No Did the organization agree to carry over lobbying and political expenditures from the prior year? Nο Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year C Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions)

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

SCHEDULE D

DLN: 93493224012090

OMB No 1545-0047

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Department of the Treasury Internal Revenue Service

(Form 990)

► Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Inspection

	f the organization BRIDGEPORT BAR ASSOCIATION INC			Employer ide	entification number
				06-1033620	
Part I				Accounts.	
	Complete if the organization answered "Ye			(l-) F	
Takal	I wormshow at any of warm	(a) Donor advised f	unas	(B) Fund	s and other accounts
	I number at end of year				
	regate value of contributions to (during year)				
	regate value of grants from (during year)				
	regate value at end of year				
	the organization inform all donors and donor adviso anization's property, subject to the organization's ex		eld in donor adv	ised funds are	the Yes N
char	the organization inform all grantees, donors, and do ritable purposes and not for the benefit of the donor ate benefit?	onor advisors in writing that g or donor advisor, or for any o	rant funds can b other purpose co	e used only fo nferring imper	r missible Yes N
art II	Conservation Easements. Complete if the organization answered "Ye	s" on Form 990. Part IV. I	ıne 7.		
Purn	pose(s) of conservation easements held by the organ				
	Preservation of land for public use (e.g., recreation		servation of an h	ustorically imp	ortant land area
	Protection of natural habitat	. –	servation of a ce		
	Preservation of open space		servation or a ce	ranca mstoric	Structure
	nplete lines 2a through 2d if the organization held a ement on the last day of the tax year	qualified conservation contrib	ution in the form		ation at the End of the Year
	Il number of conservation easements		1	2a	it the End of the Year
Total	I acreage restricted by conservation easements		-	2b	
	ber of conservation easements on a certified histori	c structure included in (a)	_	2c	
Num	aber of conservation easements included in (c) acquicture listed in the National Register	` '		2d	
Num	nber of conservation easements modified, transferre year >	d, released, extinguished, or	terminated by th	ne organizatior	during the
Num	nber of states where property subject to conservatio	n easement is located ►			
	s the organization have a written policy regarding the enforcement of the conservation easements it holds		tion, handling of	violations,	☐ Yes ☐ No
Staf	f and volunteer hours devoted to monitoring, inspec	ting, handling of violations, a	nd enforcing cor	servation ease	ements during the year
Amo ► \$	ount of expenses incurred in monitoring, inspecting,	handling of violations, and er	nforcing conserva	ation easemen	ts during the year
Does	s each conservation easement reported on line 2(d)	above satisfy the requiremen	nts of section 170	O(h)(4)(B)(ı)	
and	section 170(h)(4)(B)(II)?				🗌 Yes 🔲 No
bala	art XIII, describe how the organization reports cons ance sheet, and include, if applicable, the text of the organization's accounting for conservation easemen	footnote to the organization's			
rt III	-	of Art, Historical Treas		r Similar As	ssets.
art,	ne organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for vide, in Part XIII, the text of the footnote to its finan	6 (ASC 958), not to report in public exhibition, education, e	its revenue state or research in fui		
histo	ne organization elected, as permitted under SFAS 11 orical treasures, or other similar assets held for pub owing amounts relating to these items				•
	venue included on Form 990, Part VIII, line 1			▶ \$	
	ets included in Form 990, Part X			▶ \$	
. If th	ne organization received or held works of art, historic swing amounts required to be reported under SFAS:				
	enue included on Form 990, Part VIII, line 1	110 (ADC 930) relating to the	JC ICCIIIJ	▶ \$	
	ets included in Form 990, Part X			• · — ▶ \$	
	rwork Reduction Act Notice, see the Instruction	ne for Form 990	Cat No E		edule D (Form 990) 2

d Equipment .

Sche	edule D (Form 990) 2019								Page 2
Par	t IIII Organizations Maintain	ing Collections o	f Art, Histori	ical Trea	sures, or	Other	Similar As	sets (co	ontinued)
3	Using the organization's acquisition, items (check all that apply)	accession, and other	records, check	any of the	following t	hat are a	significant u	se of its	collection
а	Public exhibition		d	☐ Lo	an or excha	ange prog	ırams		
b	Scholarly research		e	☐ Ot	her				
c	Preservation for future genera	tions							
4	Provide a description of the organiza Part XIII	tion's collections and	explain how the	ey further	the organiz	ation's ex	kempt purpos	ie in	
5	During the year, did the organization assets to be sold to raise funds rathe		•				ılar	☐ Yes	s □ No
Pa	rt IV Escrow and Custodial A Complete if the organizat X, line 21.		" on Form 990), Part IV	, line 9, or	reporte	d an amou	nt on Fo	orm 990, Part
1a	Is the organization an agent, trustee included on Form 990, Part X?	e, custodian or other	intermediary for	contribut	ions or othe	er assets	not	☐ Y es	s □ No
ь	If "Yes," explain the arrangement in	Part VIII and comple	ate the following	table	[Δr	nount	
c	Beginning balance	Tare XIII and comple	ite the following	table	ŀ	1c			
d	<u> </u>					1d			
е	Distributions during the year					1e			
f	Ending balance				l	1f			
2a	Did the organization include an amo	unt on Form 990. Par	t X. line 21. for	escrow or	custodial a	ccount lia	bility?	☐ Yes	. D No
	If "Yes," explain the arrangement in						·	_	
	art V Endowment Funds.								
	Complete if the organizat								
4_	Barraga of ware balance	(a) Currer	it year (b) F	Prior year	(c) Two y	ears back	(d) Three yea	rs back (e) Four years back
	Beginning of year balance				1				
	Contributions								
	Net investment earnings, gains, and l	osses			-				
	Grants or scholarships Other expenditures for facilities and programs				1				
f	Administrative expenses								
	End of year balance								
2	Provide the estimated percentage of	the current year end	balance (line 1	a. column	(a)) held a	s			
- а	Board designated or quasi-endowme	•		9,	(-),	-			
ь	Permanent endowment ►								
С	Temporarily restricted endowment ▶	•							
Ĭ	The percentages on lines 2a, 2b, and)%						
3а	Are there endowment funds not in thorogenization by	ne possession of the o	organization tha	t are held	and admini	stered fo	r the		Yes No
	(i) unrelated organizations							3a(· · · · · · · · · · · · · · · · · · ·
	(ii) related organizations							3a(
	If "Yes" on 3a(II), are the related orgonical Describe in Part XIII the intended us		•					31	D
4 ::E1	rt VI Land, Buildings, and Ed		i s endowment	iulius					
e	Complete if the organizat		" on Form 990), Part IV	, line 11a.	See For	m 990, Par	t X, lıne	e 10.
		Cost or other basis (investment)	(b) Cost or other				lepreciation		I) Book value
1.2	Land								
	Buildings								
	Leasehold improvements								
-					i				

23,207

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) .

2,287

2,287

0

20,920

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, (a) Description of security or category	Part IV, lıı	ne 11l		Part X, line 12.
	(including name of security)	Book value			f-year market value
	l derivatives				
	held equity interests				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	n (b) must equal Form 990, Part X, col (B) line 12)	•			
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, I	Part IV, lır	ne 110	c. See Form 990,	Part X, line 13.
	(a) Description of investment			(b) Book value	(c) Method of valuation Cost or end-of-year market
(1)					value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	The second secon				
Part IX	n (b) must equal Form 990, Part X, col (B) line 13) Other Assets.				
	Complete if the organization answered 'Yes' on Form 990, P (a) Description	art IV, lın	e 11d	. See Form 990, Pa	(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colu Part X	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities.				. •
1.	Complete if the organization answered 'Yes' on Form 990, P (a) Description of liability	art IV, lın	e 11e	or 11f.See Form	990, Part X, line 25. (b) Book value
(1) Federal	income taxes				(b) book value
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 25) or uncertain tax positions In Part XIII, provide the text of the footnot	te to the or	ganızat	tion's financial state	<u> </u>
	's liability for uncertain tax positions under FIN 48 (ASC 740). Check		-		<u> </u>

Schedule D (Form 990) 2019

	Complete if the organi	ization answered 'Yes' on Form 990, Pari	t IV, li	ine 12a.		
1	Total revenue, gains, and other s	upport per audited financial statements .			1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on i	nvestments	2a			
b	Donated services and use of facili	ities	2b			
С	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1 .				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII) .		4b			
С	Add lines 4a and 4b		٠.		4c	
5	Total revenue Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12)			5	
Par		penses per Audited Financial Statem			Return	1.
1	Total expenses and losses per au-	ization answered 'Yes' on Form 990, Pari dited financial statements	t 1V, II	ine 12a.	1	
2	Amounts included on line 1 but no				-	
∠ a		ities	2a	I		
_			2a 2b		\dashv \mid	
b	, ,					
C	Other losses		2c		_	
d	Other (Describe in Part XIII) .		2d		┦╻┃	
e	•				2e	
3					3	
4	,	Part IX, line 25, but not on line 1:	1 -	ı		
a	•	d on Form 990, Part VIII, line 7b	4a		_	
Ь	,		4b		_	
С					4c	
5		4c. (This must equal Form 990, Part I, line 18) .		5	
	t XIII Supplemental Info					
Pro	vide the descriptions required for P lines 2d and 4b, and Part XII, lines	art II, lines 3, 5, and 9, Part III, lines 1a and s 2d and 4b Also complete this part to provide	4, Pari any a	t IV, lines 1b and 2b, Pa idditional information	rt V, line	4, Part X, line 2, Part
	Return Reference		Ex	planation		
See /	Addıtıonal Data Table					
					_	

Page 4

Page 5		chedule D (Form 990) 2019	
	ormation (continued)	Part XIII Supplemental Info	Part XIII
	Explanation	Return Reference	Re

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

ND ARE NOT SUBJECT TO THE AUDIT PROCESS

EIN: 06-1033620

Name: GREATER BRIDGEPORT BAR ASSOCIATION INC

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE THE ASSOC IATION TO EVALUATE TAX POSITIONS TAKEN AND TO RECOGNIZE A TAX LIABILITY FOR ANY UNCERTAIN TAX POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE INTE RNAL REVENUE SERVICE THE ASSOCIATION IS SUBJECT TO ROUTINE AUDITS BY TAX AUTHORITIES, HOW EVER, THERE ARE CURRENTLY NO AUDITS FOR ANY PERIODS IN PROGRESS THE ASSOCIATION BELIEVES

THAT THE INCOME TAX RETURNS FOR YEARS ENDED DECEMBER 31, 2015 AND PRIOR ARE CLOSED YEARS A

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SCHEDUL (Form 990 or EZ)	990-EZ ions on n.	2019 Open to Public Inspection						
	antation ORT BAR ASSOCIATION INC	-	n		Employer identi 06-1033620	fication number		
Return Reference	o, supplemental 2		••	Explanation				
FORM 990, PART VI, SECTION A, LINE 2	RT VI, AT PRACTICE LAW IN THE GREATER BRIDGEPORT, CT AREA AS A RESULT, THE OFFICERS & DIRECTORS CTION A. MAY DEAL WITH ONE ANOTHER IN THE NORMAL COURSE OF THEIR BUSINESS ACTIVITIES							

Return Explanation
Reference

LINE 6

FORM 990, PART VI, RAL PROGRAM AND IN THE EDUCATIONAL AND SOCIAL EVENTS SPONSORED BY THE ASSOCIATION SECTION A.

Return Explanation

FORM 990, MEMBERS IN GOOD STANDING VOTE FOR BOARD MEMBERS YEARLY TO THREE YEAR TERMS
PART VI,
SECTION A,
LINE 7A

Return Explanation
Reference

FORM 990,	FORM 990 IS REVIEWED WITH THE EXECUTIVE DIRECTOR AND BY ALL MEMBERS OF THE EXECUTIVE BOARD PRIOR
PART VI,	TO FILING OF THE RETURN
SECTION B,	
LINE 11B	

Return Explanation
Reference

FORM 990, OFFICERS & DIRECTORS COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT ANNUALLY THAT IS PART VI, MAINTAINED BY THE ASSOCIATION AS PART OF ITS RECORDKEEPING PROCESS
SECTION B.

990 Schedule O, Supplemental Information

LINE 12C

Return Explanation

FORM 990, THE EXECUTIVE BOARD REVIEWS THE EXECUTIVE DIRECTOR COMPENSATION YEARLY DURING THE BUDGET P ROCESS THIS REVIEW CONSIDERS, AMONG OTHER THINGS, THE JOB DUTIES PERFORMED, LENGTH OF SER SECTION B, VICE AND RELEVANT COMPENSATION DATA FROM THE GEOGRAPHIC AREA

Return Explanation
Reference

FORM 990, PART VI, SECTION C, LINE 19

Return Explanation

Kelelelice	
FORM 990,	BASIS OF ACCOUNTING THE ASSOCIATION MAINTAINS ITS BOOKS AND RECORDS AND FILES ITS TAX RETURN ON
PART XII,	THE MODIFIED CASH BASIS OF ACCOUNTING
LINE 1	

Return Explanation
Reference

HE INDEPENDENT ACCOUNTANT

LINE 2C

FORM 990,	OVERSIGHT RESPONSIBILITY THERE HAS BEEN NO CHANGE IN THE OVERSIGHT RESPONSIBILITY THE BOA
PART XII	RD OF DIRECTORS ASSUMES RESPONSIBILITY FOR THE ACCOUNTING PROCESS INCLUDING SELECTION OF T

efile GRAPHIC print - Do	NOT PROCESS	As Filed Data -										DLN: 93493	224012	090
SCHEDULE R (Form 990)	> (nization ar	zations a swered "Yes Attach to	s" on Form Form 990.	n 990, Parl	IV, line 33	, 34, 35b,		37.			19		
Department of the Treasury Internal Revenue Service		► Go to <u>ww</u>	v.irs.gov/	<u>Form990</u> for	instructio	ns and the	e latest info	rmation.				Open to Inspe	ction	
Name of the organization GREATER BRIDGEPORT BAR ASSOCI	ATION INC								Emp	loyer identif	icatior	number		
Part I Identification	of Distogranded E	ntities. Complete if	the organ	nation and	word "Vo	c" on Forn	000 Part	· IV Jupo 3		033620				
	(a) EIN (if applicable) of disn	<u> </u>	the organ	(b)	 	(Legal dom	c) nicile (state	(d)		(e) End-of-year as	sets	(f Dırect co ent	ntrolling	
Part II Identification related tax-exer	of Related Tax-Ex npt organizations di		is. Compl	ete if the or	ganızatıon	answered	d "Yes" on I	Form 990	, Part I	V, line 34 be	ecause	t had one or	more	
Name, address, an	(a) d EIN of related organızatı	ion	Prim	(b) ary activity	Legal dom	c) nicile (state n country)	(d) Exempt Cod		Public cl	(e) harity status on 501(c)(3))	Dii	(f) rect controlling entity	Section (13) cor enti	512(b) trolled
													103	
For Paperwork Reduction Ac	t Notice, see the Ins	structions for Form 9	90.		Ca	t No 5013	35Y				Sche	edule R (Form	990) 20	19

(a) Name, address, and EIN of related organization	Name, address, and EIN of		(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predomin. Income(relate unrelate excluded f tax unde sections 5 514)	ated, total inco rd, rom er	(g) Share of me end-of-year assets	Disprop alloca	itions?	(i) Code V-U amount in 20 of Schedule I (Form 106	BI Ger pa (-1 (-5)	(j) leral or naging rtner?	
								Yes	No		Ye	S No	-
											-	+	
												+	
											_	_	
					1		l l				- 1	1	1
							nswered "Ye	s" on F	Form 9	990, Part	IV, lır	e 34	
Identification of Related Organia because it had one or more related (a) Name, address, and EIN of related organization		a corporation L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling		(f) Share of total	Share	(g) e of end- year assets	-of- Pe	IV, lir (h) rcentage		(i) Section (13) con entit
because it had one or more related (a) Name, address, and EIN of related organization	organizations treated as (b) Primary activity LESSOR OF NON	L do (state	on or tru: (c) egal micile	Direct	(d) controlling entity	(e) Type of entity (C corp, S corp	(f) Share of total	Share	(g) e of end- year	-of- Pe	(h)		(i) Section 5 (13) con
because it had one or more related (a) Name, address, and EIN of related organization FIELD COUNTY LAWYER REFERRAL SERVICE INC OAD STREET FORT, CT 06604	organizations treated as (b) Primary activity	L do (state	on or tru: (c) egal micile or foreign untry)	Direct GREATI	(d) controlling entity	(e) Type of entity (C corp, S corp	(f) Share of total	Share	(g) e of end- year	-of- Pe	(h) rcentage inership		(i) Section 5 (13) con entit
because it had one or more related (a) Name, address, and EIN of related organization IELD COUNTY LAWYER REFERRAL SERVICE INC DAD STREET ORT, CT 06604	organizations treated as (b) Primary activity LESSOR OF NON FINANCIAL INTANGIBLE	L do (state	on or tru: (c) egal micile or foreign untry)	Direct GREATI	(d) controlling entity ER EPORT BAR	(e) Type of entity (C corp, S corp	(f) Share of total	Share	(g) e of end- year	-of- Pe	(h) rcentage inership		(i) Section 5 (13) con entit
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(a) Name, address, and EIN of	organizations treated as (b) Primary activity LESSOR OF NON FINANCIAL INTANGIBLE	L do (state	on or tru: (c) egal micile or foreign untry)	Direct GREATI	(d) controlling entity ER EPORT BAR	(e) Type of entity (C corp, S corp	(f) Share of total	Share	(g) e of end- year	-of- Pe	(h) rcentage inership		(i) Section 5 (13) con entit

Schedule R (Form 990) 2019		Pa	ge 3
Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
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 related organizations listed 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		No
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	\neg	No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1 i		No
	1	\rightarrow	

a	Loans or loan guarantees to or for related organization(s)	"	NO
е	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)	1j	No
		\Box	

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)	1 i	No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s) $\dots \dots \dots$	1j	No
	П	
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l 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	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	10	No
p Reimbursement paid to related organization(s) for expenses	1 p	No
q Reimbursement paid by related organization(s) for expenses	1 q	No

3				1 2 1	
h Purchase of assets from related organization(s)			· •	1h	No
i Exchange of assets with related organization(s)			Ī	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)				1j	No
${f k}$ 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
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	No
o Sharing of paid employees with related organization(s)				10	No
p Reimbursement paid to related organization(s) for expenses				1 p	No
q Reimbursement paid by related organization(s) for expenses				1q	No
${f r}$ Other transfer of cash or property to related organization(s)				1r	No
${f s}$ 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 covered re	elationships and tran	saction thresholds	•	_
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining ar	nount involve	ed

Schedule R (Form 990) 2019

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

was not a related organization. See instructions regarding exclusion for certain investment partnerships															
(a) Name, address, and EIN of entity	(b) Primary activity	domicile	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	te	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	nt in box managing 20 partner? chedule K-1		managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No			
													_		
													_		
										Schedul	e R (Form	199	0) 2019		

Schedule R (Fo	rm 990) 2019	Page 1	ge 5						
Part VII	Supplemental Information								
	Provide additional infor	mation for responses to questions on Schedule R (see instructions)							
Return Reference		Explanation							