Form **990** 

Department of the Treasury Internal Revenue Service

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

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

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

► Information about Form 990 and its instructions is at <a href="https://www.IRS.gov/form990">www.IRS.gov/form990</a>

OMB No 1545-0047

2015

Open to Public Inspection

A F	or the 2015 o	alendar year, or tax year beginning 01-01-2015 , and ending 12-31-2015			
<b>B</b> Ch	eck if applicable	C Name of organization Alameda County Bar Association	D Employ	er identifi	cation number
┌ Ad	dress change	Alameta County bar Association	94-12	56277	
Г №	me change	Doing business as			
┌ Ini	tıal return				
Fır	nal	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telepho	ne number	
ret	:urn/terminated	1000 Broadway	(510)	302-220	7
_	nended return	City or town, state or province, country, and ZIP or foreign postal code Oakland, CA 94607	G Gross re	ceipts \$ 6,9	33 069
Ар	plication pendin		<b>G</b> 01033 10	.сетрез ф 0,5	33,003
		F Name and address of principal officer  H(a)	Is this a group	return for	
		Tiela Chalmers 1000 Broadway Ste 480	subordinates?		□Yes □No
		Oakland, CA 94607	Are all subordii	nates	□Yes 🔽 No
		<u> </u>	If "No," attach	a lıst (se	e instructions)
	ax-exempt statu	н(с)	Group exempti	on numbe	r►
		www.acbanet.org			
			ar of formation 193	37 <b>M</b> Stat	e of legal domicile CA
Pa	irt I Sui	nmary			
e S	The prim	escribe the organization's mission or most significant activities ary programs provided by ACBA include Lawyer Referral Service, Criminal Cou datory Continuing Legal Education	rt Appointed Att	orneys Pr	ogram (CAAP)
Governance					
E.			. 250/ 61	<u> </u>	
9	2 Check	his box দ if the organization discontinued its operations or disposed of more t	nan 25% orits	net assets	5
26	3 Numbe	of voting members of the governing body (Part VI, line 1a)		з	9
Activities &	1	of independent voting members of the governing body (Part VI, line 1b)		4	9
Ĕ		imber of individuals employed in calendar year 2015 (Part V, line 2a)		5	23
্ব	6 Total n	ımber of volunteers (estimate if necessary)		6	1,300
	<b>7a</b> Total u	related business revenue from Part VIII, column (C), line 12	[	7a	5,605
	<b>b</b> Netunre	ated business taxable income from Form 990-T, line 34		7b	
			Prior Year		Current Year
٠.	8 Cont	ributions and grants (Part VIII, line 1h)	891,1	_	908,933
Ĕ	1	ram service revenue (Part VIII, line 2g)	5,739,0	_	5,874,235
Revenue	1	stment income (Part VIII, column (A), lines 3, 4, and 7d)	54,7		72,642
ш.		r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	64,1	.00	63,898
	12 Tota 12)	revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	6,749,0	51	6,919,708
	<u> </u>	ts and similar amounts paid (Part IX, column (A), lines 1-3)			0
		fits paid to or for members (Part IX, column (A), line 4)			0
		ries, other compensation, employee benefits (Part IX, column (A), lines	852,3	0.0	784,348
86	5-1	•	052,5	750	
Expenses		essional fundraising fees (Part IX, column (A), line 11e)			0
五	1	fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 0$			
	1	r expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	6,067,2	_	5,975,627
	1	expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	6,919,6		6,759,975
. 02	<b>19</b> Reve	nue less expenses Subtract line 18 from line 12	-170,5	61	159,733
8 0 20 0 20 0		Begin	ning of Current Y	'ear	End of Year
9	<b>20</b> Tota	assets (Part X, line 16)	3,245,9	87	2,756,146
Not Assets or Fund Balances		liabilities (Part X, line 26)	1,409,1	_	837,140
20	1	ssets or fund balances Subtract line 21 from line 20	1,836,7		1,919,006
	rt III Sig	nature Block			
my k		perjury, I declare that I have examined this return, including accompanying sc belief, it is true, correct, and complete Declaration of preparer (other than offic			
		cnowledge			
	**	knowledge ***	2016-10-25		
Sign	<del> </del>		2016-10-25 Date		

Preparer's signature Adele Kaneda

May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

Firm's name Frosby & Kaneda CPAs

Firm's address ► 1970 Broadway STE 930

Oakland, CA 94612

Tiela Chalmers CEO
Type or print name and title

Paid

Preparer

**Use Only** 

Print/Type preparer's name Adele Kaneda

Check ☐ If

Firm's EIN 🕨

Phone no (510) 835-2727

Date

PTIN P01664922

. ✓ Yes ☐ No

Forn	n 990 (2015)					Page
Pai	Check ıf S	ent of Program Serv chedule O contains a resp the organization's mission	onse or note t			
<u>To p</u>	romote excellence	ın the legal profession an	d to facilitate e	equal access to justice		
2	the prior Form 99	nion undertake any signific 0 or 990-EZ? e these new services on S		ervices during the year wh	nich were not listed on	「Yes ▼No
3	Did the organizat	ion cease conducting, or r	make significai	nt changes in how it condu	ucts, any program	「Yes ▼No
4	Describe the orga expenses Sectio		e accomplishr ) organization	s are required to report th	largest program services, a e amount of grants and alloc	•
	(Code	) (Expenses \$	6,033,422	ıncludıng grants of \$	) (Revenue \$	5,603,737 )
	Court Appointed Att criminal defendants		ents the Alameda	County Public Defender's office	ın providing constitutionally mand	ated representation to indige
4b	(Code	) (Expenses \$	245,432	ıncludıng grants of \$	) (Revenue \$	213,419 )
	Lawyer Referral Ser	rvice, LRS, provides the public w	th referrals to re	putable attorneys with specific e	experience in the legal specialty rec	quired by the client problem
4c	(Code	) (Expenses \$	120,489	ıncludıng grants of \$	) (Revenue \$	51,474 )
		ing Legal Education Program, Mo n enhancing the quality of legal			on of high quality programs in cont	inuing legal education to

orm	990 (2015)			Page <b>3</b>
Par	t 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?  If "Yes," complete Schedule C, Part II	4		No
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	
	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 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
	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? 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, 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		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?  If "Yes," complete Schedule D, Part X	11f	Yes	
	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
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part	17		No

IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .  $\footnotemark{\footnotemar$ 

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part 

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

Νo

Νo

18

19

20a

Yes

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		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		Νo
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		Νo
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "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 IV			
_		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? 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		Νo
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	$ \hbox{ Did the organization liquidate, terminate, or dissolve and cease operations? } \textit{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		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

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Pai	Tt 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			.୮
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 16			
	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	2 3		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	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	
<b>4</b> a	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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
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	Yes	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gift were not tax deductible?	ts <b>6b</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?	7a 7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
•	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			
h	required?	7g 7h		
8	Form 1098-C?			
	during the year?	8		No
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter			
	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 acilities			
11				
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		No
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions fo			
L.	additional information the organization must report on Schedule O	13a		No
	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			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b  9			
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		Νο
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? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	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	Yes	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	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)			
	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▶			
18	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 Own website. Another's website. Upon request. Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 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 Dianne Hatcher 1000 Broadway Ste 480 Oakland, CA 94607 (510) 302-2207

Part VII

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0 in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- ♦ List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
(1) Toni Mims-Cochran	1 00									
President	0 00	X		X				0	0	(
(2) Stephanie Sato	1 00									
President-Elect	0 00	х		Х				0	0	C
(3) Eric Handler	1 00									
Vice President	1 00	×		X				0	0	C
(4) Colin Bowen	1 00									
Director	0 00	Х						0	0	(
(5) Michael P Johnson Director	1 00	x						0	0	C
(6) Mıcha Star Liberty	1 00									
Director	0 00	X						0	0	C
(7) Pelayo A Llamas Jr	1 00	х						0	0	C
Director	0 00									
(8) Cheryl Poncini		x						o	0	C
Director	0 00									
(9) Paul Wellenkamp	1 00	l x						0	0	(
Director	0 00								Ü	
(10) Tiela Chalmers	30 00			х				124,000	0	16,020
CEO CEO	7 50 37 00					-	_			
(11) Amanda Picetti				x				36,672	0	4,613
Dir of Finance	0 50									
				-	$\vdash$		_			
							-			
							<u> </u>			
							1			

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

(A) Name and Title	hours per week (list any hours	more t	tion ( han ( on is	one l both	box, an o r/tru	heck unless officer stee)		(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
	for related organizations below dotted line)	H울 돌	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organization and related organizations
		+								
1b Sub-Total		1				<u> </u>  ►		<u> </u>	<u> </u>	
	ation sheets to Part VII,	Section A	Δ							
	and 1c)			_	_	►		160,672		20,633
2 Total number of ind	ividuals (including but no	t limited	to the	ose I	liste	d abov	e) w	ho received more th	an	

\$100,000 of reportable compensation from the organization  $\blacktriangleright$  1

			Yes	NO
3	Did the organization list any <b>former</b> 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			
	ındıvıdual	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)	(B)	(C)
Name and business address	Description of services	Compensation
Kımberly Kupferer	Legal	257,237
1900 Powell St Ste 600		
Emeryville, CA 94608		
David Byron	Legal	189,557
36275 State St		
Fremont, CA 94538		
Darryl Billups	Legal	143,719
1290 B St Ste 307		
Hayward, CA 94541		
William Linehan	Legal	135,540
William Energia	icyai -	155,540
1633 San Pablo Ave		
Oakland, CA 94612		
Darryl Stallworth	Legal	134,780
2355 Broadway Ste 303		
Oakland, CA 94612		

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 🕨 15

Part V	1 1 1	Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII										
		Check if Schedu	ıle O contains a respon	se or note to any lin	(A)	(B)	(c)	 (D)				
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514				
	1a	Federated camp	paigns 1a					312-314				
nts	b	Membership du		398,333								
ons, Gifts, Grants Similar Amounts				8,500								
S, (	С	Fundraising eve										
Giffs, iilar A	d	Related organiz										
E, E	е	Government grants	s (contributions) 1e	502,100								
tion or S	f	All other contribution	ons, gifts, grants, and <b>1f</b>		·							
tributio Other	q		ons included in lines									
Contributions, and Other Sim		1a-1f \$			000 000							
Cont and	h	Total. Add lines	s 1a-1f	▶	908,933							
<u>e</u>				Business Code								
Ke Li	2a	CAAP Attorney Fee			5,603,737	5,603,737						
28	Ь	Legal referral servi	ces		213,419	213,419						
926	С	Publication			5,605		5,605					
Ser	d	Section Income			51,474	51,474						
Program Serwce Revenue	e	A.II										
Poj	f	All other progra	m service revenue									
Δ	g	Total. Add lines	32a-2f	🛌	5,874,235							
	3		ome (including dividence		72,642			72,64				
	4		ar amounts) tment of tax-exempt bond p	<u> </u>	0							
	5				0							
		ŕ	(ı) Real	(II) Personal								
	6a	Gross rents										
	h	Less rental										
		expenses Rental income										
	С	or (loss)			,							
	d	Net rental incor	me or (loss)		0							
	7a	Gross amount	(ı) Securities	(II) Other								
	74	from sales of assets other than inventory										
	ь	Less cost or										
		other basis and sales expenses										
	c	Gain or (loss)										
	d		s)		0							
Other Revenue	8a	Ψ	uding ,500 reported on line 1c)									
ihe			a	14,910								
ō			penses b	13,361	1,549			1,54				
	c 9a			events 🕦	1,549			1,54				
	<b>L</b>	Loca dimentin	a h									
			penses <b>b</b> [ loss)from gaming activ	rities	0							
		Gross sales of	-									
		returns and allo										
	_		<b>a</b>									
			oods sold <b>b</b>	ntony	ol							
	С	Net income or (  Miscellaneous	loss) from sales of inve	Business Code	<u> </u>							
	11a			Dusilless Code	43,247			43,24				
	b	Litigation settle	ament	+	19,102			19,10				
	С	Other			13,102							
	_	All other revers	ue									
	d e		ue [ s 11a-11d	🕨								
				.  -	62,349							
	12	iotal revenue.	See Instructions	•	6,919,708	5,868,630	5,605	136,54				

#### Part IX Statement of Functional Expenses

	on 501(c)(3) and 501(c)(4) organizations must complete all columns	All other organiza	ations must com	plete column (A )	
	Check if Schedule O contains a response or note to any line in t				<del>ار</del>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	181,305	112,016	69,289	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	480,075	421,861	58,214	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,080	773	307	
9	Other employee benefits	63,679	53,120	10,559	
10	Payroll taxes	58,209	47,195	11,014	
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
C	Accounting	0			
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	11,992		11,992	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	5,633,823	5,624,787	9,036	
12	Advertising and promotion	509		509	
13	Office expenses	76,465	37,922	38,543	
14	Information technology	42,726	28,237	14,489	
15	Royalties	0			
16	Occupancy	90,733	57,926	32,807	
17	Travel	35,822	8,131	27,691	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	3,196	2,061	1,135	
23	Insurance	32,831	29,024	3,807	
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	Bank fees	19,100	11,319	7,781	
b	Dues, license & service fees	12,304	3,516	8,788	
c	Miscellaneous	10,178	4,010	6,168	
d	Staff Training	5,948	3,980	1,968	
е	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	6,759,975	6,445,878	314,097	0
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)				

Form 990 (2015) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X . . . . . . . . . . . . . . . . . . (A) (B) End of year Beginning of year 1 950.455 316.673 Cash-non-interest-bearing . . . . . 1 2 Savings and temporary cash investments . 78,482 2 86,241 3 3 0 Pledges and grants receivable, net . . . 4,575 6,410 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 0 7 Notes and loans receivable, net . . . . . 7 0 0 8 Inventories for sale or use . . . 8 9 82,732 9 128,762 Prepaid expenses and deferred charges . . . 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 3,196 10c 0 b Less accumulated depreciation . 10b 1,707,442 1,895,936 11 Investments—publicly traded securities . . . 11 215,273 12 12 0 Investments—other securities See Part IV, line 11 . . . . . . 13 13 0 Investments—program-related See Part IV, line 11 . 14 14 0 323,959 201.997 15 15 Other assets See Part IV, line 11 . . . . . . 16 3,245,987 16 2,756,146 **Total assets.**Add lines 1 through 15 (must equal line 34) . **17** 133,158 17 32.619 Accounts payable and accrued expenses . 18 18 Grants payable 195.525 19 19 185,924 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . \_iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties . . . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 1,080,515 25 618,597 . . . . . . . . . . . . . . . . 1,409,198 837.140 26 26 **Total liabilities.**Add lines 17 through 25 . . . . Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 27 1.836.789 1,919,006 Unrestricted net assets . . . . . 27 28 28 Temporarily restricted net assets . . . . . 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds . . . . . . . . . 31 Paid-in or capital surplus, or land, building or equipment fund . . . . 31

Retained earnings, endowment, accumulated income, or other funds

Total liabilities and net assets/fund balances . . . . . . . . . . .

Total net assets or fund balances

32

33

34

1,919,006

2,756,146

32

33

34

1,836,789

3.245.987

	250 (2015)				raye 12
Par	t XI Reconcilliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI		•		<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>		6.9	919,708
2	Total expenses (must equal Part IX, column (A), line 25)				,
		2		6,7	759,975
3	Revenue less expenses Subtract line 2 from line 1	3		:	159,733
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				,
		4		1,8	789, 36
5	Net unrealized gains (losses) on investments	5			-77,516
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			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		1,9	919,006
Par	t XIII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII			Yes	. I No
				163	NO
1	Accounting method used to prepare the Form 990				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revious a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
	,,				
b	Were the organization's financial statements audited by an independent accountant?		2b		Νo
	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 oversign of the audit, review, or compilation of its financial statements and selection of an independent accountant		2c		No
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
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?	ne	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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DLN: 93493299005486

#### OMB No 1545-0047

**Inspection** 

#### **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

If th	Section 501(c)(3) organizations tl		under section 50	1(h)) Complete Part II-B D	o not complete Part II-A
Na	me of the organization	·		Employer ide	ntification number
Ala	meda County Bar Association			94-1256277	
Par	t I-A Complete if the or	ganization is exempt under	section 501(c		
1	Provide a description of the or	ganızatıon's dırect and ındırect politic	al campaign acti	vities in Part IV	
2	Political expenditures	·		<b>.</b>	\$
3	Volunteer hours				
Dat	t I-B Complete if the or	ganization is exempt under	section E01/c	)(3)	
1		e tax incurred by the organization und		<u>)(3).</u>	
2	•	e tax incurred by the organization und		<b>1055</b>	\$
3	•	ection 4955 tax, did it file Form 472		4933 <b>F</b>	Yes No
4a	Was a correction made?	rection 1999 tax, and it line Form 172	o for this year.		Γ Yes Γ No
b	If "Yes," describe in Part IV				, 135 , 115
		ganization is exempt under	section 501(c	), except section 50	)1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exemp	t function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	rganızatıon's funds contributed to otl	her organizations	for section 527 ▶	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 1120	)-POL, line 17b	\$
4	Did the filing organization file <b>F</b>	orm 1120-POL for this year?			☐ Yes
5	organization made payments I amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	e amount paid from irectly delivered t	m the filing organization's to a separate political orga	funds Also enter the anization, such as a
	(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 -
2					
3					
4					

ŀ	e C (Form 990 or 990-EZ) 2015						Page <b>2</b>
1	CI-A Complete if the organization is under section 501(h)).	exempt under	section 501(	c)(3) and f	ilec	l Form 5768	(election
c	ck 🕨 🗆 if the filing organization belongs to an af		list in Part IV ea	ch affiliated g	roup	member's name	e, address, EIN,
c	expenses, and share of excess lobbying ck F if the filing organization checked box A a		l" provisions app	olv			
	Limits on Lobbying			·· /		(a) Filing	(b) Affiliated
	(The term "expenditures" means					organization's totals	group totals
	al lobbying expenditures to influence public opinions	on (grass roots					
	oring) al lobbying expenditures to influence a legislative	e body (direct lobb	yıng)				
t	al lobbying expenditures (add lines 1a and 1b)						
h	ner exempt purpose expenditures						
t	al exempt purpose expenditures (add lines 1c and	d 1d)					
b	bying nontaxable amount Enter the amount from	the following table	ın both columns				
t	he amount on line 1e, column (a) or (b) is:	e lobbying nontaxal	ole amount is:				
t	over \$500,000 20°	% of the amount on li	ne 1e				
_	r \$500,000 but not over \$1,000,000 \$1	00,000 plus 15% of the	e excess over \$500 (	000			
		75,000 plus 10% of the	<u> </u>				
		25,000 plus 5% of the		<u></u>			
		,000,000					
_	h \$17,000,000 \$1,	,000,000					
a	ssroots nontaxable amount (enter 25% of line 1f	·)					
h	otract line 1g from line 1a  If zero or less, enter -0	) <b>-</b>					
b	otract line 1f from line 1c If zero or less, enter -0	-					
	here is an amount other than zero on either line 1  orting section 4911 tax for this year?	h or line 11, did the	organization file	Form 4720			
,,	orting section 4911 tax for this year?		Г	Yes	_ N	o	
			<u>'</u>		,		
	4-Year Aver	aging Period U	Inder section	501(h)			
	(Some organizations that made a sec	tion 501(h) el	ection do not	have to co			e five
	columns below. See the	separate instr	uctions for li	nes 2a thro	oug	h 2f.)	
	Lobbying Expend	itures During	4-Year Avera	ging Perio	d		
	Calendar year (or fiscal year beginning in)	(a)2012	<b>(b)</b> 2013	<b>(c)</b> 2014		<b>(d)</b> 2015	(e) Total
2	bbying nontaxable amount						
_	, , ,				$\dashv$		
	bbying ceiling amount						
_	50% of line 2a, column(e))				$\dashv$		
o	otal lobbying expenditures						
_					十		
r	assroots nontaxable amount						
0	50% of line 2a, column(e)) stal lobbying expenditures						

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

**f** Grassroots lobbying expenditures

Jene	dale 6 (101111 330 01 330 EZ) 2013				гс	iye 🥥
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	TOI				
For o	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)		
roi e activ			No		A moun	t
		Yes		·		
1	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					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	01(c	)(5),	or s	ectio	n
_			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		-	2	Yes	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	<u> </u>	Νo
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	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).					
а	Current year	2a				
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	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)	5	•			

Part IV Supplemental Information

Return Reference

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

Explanation

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OMB No 1545-0047

Open to Public

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

## **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. ► Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

	me of the organization		Empl	loyer identification number
Mar	neda County Bar Association		94-1	.256277
Pa	<b>Organizations Maintaining Donor</b> Complete if the organization answere	Advised Funds or Other Similar Ford "Yes" on Form 990, Part IV, line 6.		
	Total number at end of year	(a) Donor advised funds	(b)	Funds and other accounts
	Aggregate value of contributions to (during year)			
	Aggregate value of grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor a funds are the organization's property, subject to t	<u> </u>	or advi	sed <b>∀es                                   </b>
	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?			
a	tt III Conservation Easements. Comple	ete if the organization answered "Yes" o	n Forn	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by th  Preservation of land for public use (e.g., recre  Protection of natural habitat  Preservation of open space  Complete lines 2a through 2d if the organization leasement on the last day of the tax year	ation or education)	certified	cally important land area d historic structure n of a conservation
	·			Held at the End of the Year
1	Total number of conservation easements		2a	
	Total acreage restricted by conservation easeme	ents	2b	
	Number of conservation easements on a certified	historic structure included in (a)	2c	
	Number of conservation easements included in (c historic structure listed in the National Register	e) acquired after 8/17/06, and not on a	2d	
	Number of conservation easements modified, traitax year -	nsferred, released, extinguished, or terminate	ed by th	e organization during the
	Number of states where property subject to cons	ervation easement is located ►		
	Does the organization have a written policy regar violations, and enforcement of the conservation e		dling of	☐ Yes ☐ No
	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of violations, and enforci	ing cons	servation easements during the
	<b>*</b>			
	A mount of expenses incurred in monitoring, inspe	ecting, handling of violations, and enforcing c	onserva	ation easements during the year
	Does each conservation easement reported on lin (B)(i) and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of sec	tion 17	0 (h)(4)
	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financial		
i	TIII Organizations Maintaining Collec	tions of Art, Historical Treasures,	or Oth	ner Similar Assets.
	Complete if the organization answere	ed "Yes" on Form 990, Part IV, line 8.		
	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the foots	assets held for public exhibition, education,	or resea	arch in furtherance of public
	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	assets held for public exhibition, education,		
(	i) Revenue included on Form 990, Part VIII, line 1	L	<b>►</b> \$_	
i	i) Assets included in Form 990, Part X			
	If the organization received or held works of art, he following amounts required to be reported under S		or financ	
	Revenue included on Form 990, Part VIII, line 1			<b>►</b> \$

**b** Assets included in Form 990, Part X

Part		ganizations Maintaining ontinued)	Collections of A	Art, Hi	storica	l Treas	sures, o	r Otl	ner Simil	ar A	ssets
3		organization's acquisition, accentices (check all that apply)	ession, and other re	cords, c						int us	e of its
а	☐ Publi	c exhibition		d	┌ Lo	oan or ex	change p	rograi	ms		
b	┌ Scho	larly research		е	$\Gamma$ 0	ther					
c	┌ Prese	ervation for future generations									
4	Provide a Part XIII	description of the organization's	s collections and ex	plain ho	ow they fu	rther the	e organıza	tıon's	exempt pu	rpose	ı ın
5	During the	e year, did the organization solic	it or receive donati	ons of a	ırt, hıstorı	ical trea	sures or o	thers	ımılar _	_	_
		be sold to raise funds rather tha		as part	of the org	ganızatıd	n's collec	tion?		Yes	i
Par	Co	scrow and Custodial Arra emplete if the organization a irt X, line 21.		n Form	990, Pa	ırt IV, lı	ine 9, or	repo	rted an ar	nour	nt on Form 990,
1a		ganization an agent, trustee, cus on Form 990, Part X?	todian or other inte	rmediar	y for cont	ributions	s or other	asset		_ Yes	;
b	If"Yes	," explain the arrangement in Pa	art XIII and comple	te the fo	ollowing ta	able				Am	ount
c	Beginn	ing balance						1c			
d	A ddıtıo	ons during the year					Γ	1d			
е	Dıstrıb	utions during the year						1e			
f	Ending	balance						1f			
2a	Did the oi	rganızatıon ınclude an amount oı	n Form 990, Part X,	line 21	, for escr	ow or cus	stodial ac	count	liability? 「	Yes	i
ь		explain the arrangement in Part									
Pai	rt V Er	ndowment Funds. Comple	_					_			
	D		(a)Current year	(b)F	Prior year	<b>b (c)</b> ⊤	wo years ba	ack (c	<b>1)</b> Three years	back	(e)Four years back
1a b	Contribut	g of year balance tions									
c	Net inves losses	stment earnings, gains, and									
d	Grants o	rscholarships									
e	Other ex and progi	penditures for facilities rams									
f	 Administ	rative expenses						+			
g		ear balance									
2		he estimated percentage of the o	current year end bal	lance (li	ne 1g, co	lumn (a)	) held as	<u> </u>			1
а		signated or quasi-endowment 🕨	•	,							
b		nt endowment ►									
С	•	rily restricted endowment Fernander in the control of the control	should equal 100%								
За	Are there organizat	endowment funds not in the posion by	session of the orga	nızatıor		held and	l admınıst	ered f	or the	<u> </u>	Yes No
b	(ii) relate If "Yes" o	ted organizations		 uıred on	 Schedule	₽ R? .				За	a(i) a(ii) 3b
4		ın Part XIII the intended uses o		endowr	ment fund	S					
Par		and, Buildings, and Equip complete if the organization a		Form	990 Par	t TV lın	e 11a Se	e Fo	rm 990 P	art )	Cline 10
		Description of property	miswered res to		Cost or c	other basis stment)		ı er bası	Accur	mulate	d (d)Book value
1a	Land .						<u> </u>				
b	Buildings			[							
C	Leasehold	improvements		. [							
d	Equipment	:		. L							
					, ·	- د جد د	<u> </u>				
ıota	ı. Add lines	s 1a through 1e <i>(Column (d) mus</i>	t equal Form 990, Pa	rt X, col	umn (B), li	ine 10(c)	.)				D (Form 990) 2015

See Form 990, Part X, line 12.  (a) Description of security or category		( <b>b)</b> Book value		1ethod of valuation
(including name of security) <b>1)</b> Financial derivatives			Cost or e	nd-of-year market value
2)Closely-held equity interests				
<b>3)</b> 0 ther				
art VIII Investments—Program Related.	•			
Complete if the organization answered	l 'Yes' on Form 99	0, Part IV, line $11c{S}$	ee Form 990	Part X, line 13.
(a) Description of investment		<b>(b)</b> Book value		lethod of valuation nd-of-year market value
			C 031 01 E	nd-or-year market value
	-			
otal. (Column (b) must equal Form 990, Part X, col (B) line 13 )	<b>*</b>			
Part IX Other Assets. Complete if the organization	on answered 'Yes' on	Form 990, Part IV, line	11d See Form	990, Part X, line 15
(a) Desc	ription			(b) Book value
1) Deposit 2) Due from ACBA VLSC				9,247
otal. (Column (b) must equal Form 990, Part X, col.(B) line	15.)			323,959
Part X Other Liabilities. Complete if the org	anızatıon answere	d 'Yes' on Form 990,	Part IV, line	11e or 11f.
See Form 990, Part X, line 25.  (a) Description of liability	(b) Book value			
ederal income taxes				
AAP program payables	618,	597		
		_		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	<b>►</b> 618,	597 <b> </b>		

Part		evenue per Audited Financial Statements With Revenu nization answered 'Yes' on Form 990, Part IV, line 12a.	e per Re	turn
1	·	r support per audited financial statements	1	
2	A mounts included on line 1 bu	t not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses)	on investments   2a		
b		acilities		
c	Recoveries of prior year grants	s		
d	Other (Describe in Part XIII )			
e	Add lines <b>2a</b> through <b>2d</b>		2e	
3	Subtract line ${f 2e}$ from line ${f 1}$ .		3	
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII )	4b		
C	Add lines <b>4a</b> and <b>4b</b>	<del></del> .	4c	
5	Total revenue Add lines 3 and	d <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	
Part		xpenses per Audited Financial Statements With Expensions answered 'Yes' on Form 990, Part IV, line 12a.	ses per l	Return.
1	Total expenses and losses pe	r audited financial statements	1	
2	Amounts included on line 1 bu	t not on Form 990, Part IX, line 25		
а	Donated services and use of fa	acilities		
b	Prior year adjustments			
C	Otherlosses			
d	Other (Describe in Part XIII )			
e	Add lines <b>2a</b> through <b>2d</b>		2e	
3	Subtract line ${f 2e}$ from line ${f 1}$ .		3	
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:		
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII )	4b		
C			4c	
5	Total expenses Add lines <b>3</b> ai	nd <b>4c.</b> (This must equal Form 990, Part I, line 18) . . . . .	. 5	
Part	XIII Supplemental Inf	ormation		
Part \	de the descriptions required for /, line 4, Part X, line 2, Part XI, nation	Part II, lines $3,5$ , and $9$ , Part III, lines $1a$ and $4$ , Part IV, lines $1b$ and lines $2d$ and $4b$ , and Part XII, lines $2d$ and $4b$ Also complete this part	l 2b, t to provid	any additional
	Return Reference	Explanation		
Part X	FIN48 Footnote	The Internal Revenue Service and the California Franchise Tax Board Organization is exempt from federal and state income taxes under Int 501(c)(6) and the California Revenue and Taxation Code Section 237 evaluated its current tax positions as of December 31, 2015 and is nuncertain tax positions for which a reserve would be necessary	ernal Reve 701(e) The	nue Code Section e Organization has

Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2015

DLN: 93493299005486

OMB No 1545-0047

Open to Public Inspection

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ.

**Supplemental Information Regarding** 

**Fundraising or Gaming Activities** 

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

**Employer identification number** Name of the organization Alameda County Bar Association 94-1256277 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Internet and email solicitations f Solicitation of government grants **a** ☐ Special fundraising events Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (ii) Activity (iv) Gross receipts (v) A mount paid to (vi) A mount paid to (iii) Did ındıvıdual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? Yes No 1 10 Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II	Fundraising	Events
	i dilalabiliq	

Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 o
fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross
receipts greater than \$5,000

	receipts greater than \$5,000		Г		1
		(a)Event #1	<b>(b)</b> Event #2	(c)O ther events	(d) Total events
		Golf Tournament	Service Awards		(add col <b>(a)</b> through
		(event type)	(event type)	(total number)	col <b>(c)</b> )
Ф					
2					
Revenue	1 Gross receipts	13,040	10,370		23,410
_	<b>2</b> Less Contributions	8,500			8,500
	3 Gross income (line 1 minus line 2)	4 540	10.370		14.010
		4,540	10,370		14,910
	<b>4</b> Cash prizes				
	<b>5</b> Noncash prizes	506	204		710
မွာ က	<b>6</b> Rent/facility costs	2,176	310		2,486
ğ	<b>7</b> Food and beverages	1,833	7,807		9,640
Expenses	8 Entertainment		525		5 2 5
Direct	9 Other direct expenses				
ă	10 Direct expense summary Add lines	4 through 9 ın column (d	)		13,361
	<b>11</b> Net income summary Subtract line :	10 from line 3, column (c	)		1,549
Par	t III Gaming.	, ,	<u>,                                      </u>		1 -7
	Complete if the organization Form 990-EZ, line 6a.	n answered "Yes" on f	Form 990, Part IV, line	19, or reported mo	re than \$15,000 on
Revenue		(a)Bıngo	( <b>b)</b> Pull tabs/Instant bingo/progressive bingo	(c)O ther gaming	(d) Total gaming (add col (a) through col (c))
<del>Д</del>	1 Gross revenue				
Ses	2 Cash prizes				
Expense	3 Noncash prizes				
Direct	4 Rent/facility costs				
	5 Other direct expenses				
		Yes %	┌ Yes % No	Г Yes <u>%</u> Г No	
	<b>6</b> Volunteerlabor				
	7 Direct expense summary Add lines	2 through 5 in column (c	)		
	8 Net gaming income summary Subtra	act line 7 from line 1, col	umn (d)		
9	Enter the atota(a) in which the arganization	stion conducts gaming as	atuutio o		
a	Enter the state(s) in which the organization licensed to conduct				┌Yes ┌No
b	If "No," explain				
10a	Were any of the organization's gaming l	licenses revoked, suspe	nded or terminated during	the tax year?	┌Yes ┌No
b	If "Yes," explain				

Schedule	G (Form	990	or 990-EZ	201

Page	3
------	---

11	Does the organization conduct gaming	activities with nonmem	bers?	Yes	No
12	Is the organization a grantor, beneficia	ary or trustee of a trust o	or a member of a partnership or other entit	ty	
	formed to administer charitable gamin	g?		ГYes Г	No
13	Indicate the percentage of gaming act	ıvıty conducted ın			
а	The organization's facility			13a	%
b	An outside facility			13b	%
14	An outside facility  Enter the name and address of the person who prepares the organization's gaming/special events book  Name  Address  Oces the organization have a contract with a third party from whom the organization receives gaming revenue?  If "Yes," enter the amount of gaming revenue received by the organization  If "Yes," enter name and address of the third party  Name  Address  Gaming manager information  Name  Ocescription of services provided  Director/officer   Employee   Independent contractor  Mandatory distributions  Is the organization required under state law to make charitable distributions from the gaming proceeds		s and records		
	Name <b>▶</b>				
15a					
	<u>-</u>	men a emia parcy nom v	mom the organization receives gaining	□Yes □	No
h		avanua racaiyad by tha	organization <b>b</b> r d		110
				and the	
_					
	if Yes, enter name and address of th	e third party			
	Name 🟲				
	Address ►				
16	Gaming manager information				
	Name 🕨				
	Description of services provided				
	Director/officer	— Employee			
	) Director/officer	Employee	i independent contractor		
17	Mandatory distributions				
	·	e law to make charitable	e distributions from the gaming proceeds	to	
	retain the state gaming license?		5 5.	ГYes Г	No
ь	• •	red under state law dist	ributed to other exempt organizations or s		
	in the organization's own exempt activ			•	
Pa	rt IV Supplemental Information	on. Provide the explain the explain the state of the stat	anations required by Part I, line 2b, as applicable. Also complete this pa		(v); and
	Return Reference		Explanation		
		L	· · · · · · · · · · · · · · · · · · ·		

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on 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

OMB No 1545-0047

DLN: 93493299005486

Inspection

www.irs.gov/form990. Name of the organization **Employer identification number** Alameda County Bar Association 94-1256277 990 Schedule O, Supplemental Information Return Reference **Explanation** Form 990, Part III, Line 4d Other OTHER PROGRAM SERVICES 4 Other Program Services included activities of the Community Projects Program Services Description Committee which acts as a forum for legal service providers to share knowledge and expertise and help improve the delivery of legal services in Alameda County as well as activities of the Judicial Appointments Evaluation Committee, the East Bay Diversity Bar Coalition and the Judicial Liaison Committee 1 Classes Membership shall be divided into five classes Active, Non-Practicing, Judicia Form 990, Part VI, Line 6 Explanation of Classes of Members I, Affiliate, Law Student 2 Active Members A lawyer who is a member in good standing of or Shareholder the State Bar of California, or who is admitted to practice and in good standing in the Ba r of any other state in the United States, and who resides in or maintains one or more law offices in any county in California or who is in-house counsel for a corporation or emplo yed by a government entity located in California shall become an Active Member upon the ap proval of his or her application by the Chief Executive Officer or designee 3 Non-Practi cing Members. Any lawyer who ceases the active practice of law or any Judicial Member who retires from the judiciary without resuming the active practice of law, and is listed as i nactive with the State Bar of California or the Bar of any other state in the United State s, shall become a Non-Practicing Member upon the approval of his or her application by the Chief Executive Officer or designee 4 Judicial Members Any judge of the Superior Court of California, County of Alameda, or any judge or justice of the Court of Appeal or the S upreme Court of the State of California or of any of the Courts of the United States, shall I become a Judicial Member upon the approval of his or her application by the Chief Execut ive Officer or designee 5 Affiliate Members A legal administrator, legal assistant, law school graduate, paralegal, accountant employed by a lawyer or law firm, expert witness, investigator, trial consultant, real estate agent or other professional who resides in or maintains one or more offices in any county in California shall become an Affiliate Member upon the approval of his or her application by the Chief Executive Officer or designee 6 Law Student Members A person who is enrolled in a law school in the State of California located in any county shall become a Law Student Member upon the approval of his or her a pplication by the Chief Executive Officer or designee 1 Annual Election Officers and Directors shall be elected by the Board of Directors duri Form 990, Part VI, Line 7a How Members or Shareholders Elect ng the month of October each year 2 Nominating Committee A Nominating Committee consist Governing Body ing of seven Active Members of the Association shall be appointed by the Board of Director s at its June meeting each year. The committee shall consist of the immediate Past-Preside nt, who shall serve as the committee chair, the President, the President-Elect, one member of the Barristers Section, one member of the Association who is also a member of an ident ity bar association, and two general members of the Association who shall not be members o f the Board In appointing the Nominating Committee, the Board shall also specify the part icular, high, conceptual-level competencies that the Board feels will be important to gove rn ACBA and direct it effectively in the next few years. The Nominating Committee shall me et at the call of the Chief Executive Officer of the Association It shall nominate one me mber of the Association for the office of President-⊟ect, one member of the Association f or the office of Vice-President and one member for each Director whose term will expire on December 31st The Nominating Committee shall forward names of the proposed candidates to the Chief Executive Officer not later than August 24th Once the Board has approved a sla te of officers and directors, the Chief Executive Officer shall cause the names of the can didates to be published in a legal new spaper in Alameda County and on the ACBA wiebsite not later than five business days after the September Board meeting and to be posted in a con spicuous place in the office of the Association 3 Nomination Guidelines. In making its n ominations, the Nominating Committee shall prioritize candidates who meet the particular c ompetencies specified by the Board of Directors for the coming years. The Nominating Commi ttee also shall evaluate each candidate, taking into consideration the following criteria each candidate's personal abilities, judgment and leadership qualities, each candidate's years as a member of the Association, the duration, scope, quality and recentness of each candidate's participation in the activities and affairs of the Association, each candidate 's history and quality of support for the programs and projects of the Volunteer Legal Ser vices Corporation or similar organizations, and, candidates who demonstrate core competenc ies of diversity, inclusiveness, governance and leadership 4 Additional Nominations Add itional nominations for the offices of President-Elect or of Vice-President or for the pos ition of Director may be made only by filing with the Chief Executive Officer on or before 5 00 p m on the 15th calendar day after the posting of the slate in the legal publicatio ns per paragraph 2 above A written nomination must be signed by at least thirty-five Acti ve Members in good standing as certified by the Chief Executive Officer as of August 24th of that year A report of any such additional nomination, or nominations, shall be posted on the ACBA website, posted in an e-mail blast to members, submitted for publication in a legal new spaper in Alameda County and shall be posted in a conspicuous place in the office of the Association within five business days following the Additional Nominations deadlin e A Voting In the event of additional nominations, the elections may be conducted elect ronically or by mail ballot. Elections shall be conducted in a method that ensures confide ntiality and one vote per active member. A plurality of votes cast shall be sufficient to elect any candidate for the office of President-Elect or of Vice-President. In any contest for the vacant seats on the Board of Directors, those nominees receiving the highest numb er of votes shall be deemed elected, to be a valid ballot, the number of candidates receiv ing votes must equal the number of vacant seats on the board B in the event of no additi onal nominations, the nominees proposed by the Nominating Committee and approved by the Bo ard of Directors shall be declared elected without ballot Form 990. Part VI. Line 7b No bylaws may be adopted, amended, or repealed by the Board of Directors if such adoption, Describe Decisions of Governing amendment, or repeal would materially and adversely affect the rights of Members as to vo Body Approval by Members or ting, dissolution, redemption, or transfer Shareholders Form 990. Part VI. Line 11b Form Copies of the 990 are sent to all board members electronically, and they are asked to review them and 990 Review Process contact staff if they have questions Form 990, Part VI, Line 12c Officers, directors and key employees are required to disclose any interests that could gi Explanation of Monitoring and ve rise to conflicts as they arise. Each year the Board of Directors receives the ACBA Byl. Enforcement of Conflicts aws during board orientation. The conflicts of interest policy is discussed and officers a nd directors are asked if they are aware of any potential conflicts Form 990, Part VI, Line 15a The ACBA board goes through this procedure, using a task force of the ACBA board. All memb Compensation Review & Approval ers of the VLSC and ACBA boards are surveyed anonymously, as well as staff, and this feedb Process - CEO, Top Management ack developed by the task force into a written evaluation for the CEO Periodically, the t

ask force also reviews the salaries of CEOs in comparable agencies

Officers on the Board of Directors serve in a volunteer capacity. The Executives of Califo

able salary levels for other officers and key employees. See response to Line 15a for addi-

The ACBA Bylaws, which includes our conflicts of interest policy, are available on our web

from the financial statements It is noted in A Year in Review and on our website that our financial statements and other governing documents are available upon reuqest and contact

site The ACBA publishes an annual magazine, A Year in Review, which includes information

rnia Law Association(ECLA) each year does a salary survey that assists in assessing compar

Form 990, Part VI, Line 15b

Compensation Review and

Key Employees

Available

Approval Process for Officers and

Form 990, Part VI, Line 19 Other Organization Documents Publicly

tional detail

information for these are provided

► Attach to Form 990.

DLN: 93493299005486

# 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.

Complete if the organization answered "Yes" on Form 990, Part 1V, line 33, 34, 35b, 36, or 37,

▶ Information about Schedule R (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2015

Open to Public Inspection

Name of the organization Alameda County Bar Association					identification numl	ber		
Part I Identification of Disregarded Entities Complete	ıf the organization	answered "Yes" or	n Form 990, Par	94-12562 t IV, line 33.	2//			
(a)  Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d)	(e) End-of-year assets	(f) Direct controlli entity	ng		
Part II Identification of Related Tax-Exempt Organiza or more related tax-exempt organizations during the	tax year.						•	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	Public charity (if section 501	status Direct o	<b>f)</b> ontrolling itity	Section (13) co enti	512(l
(1)Alameda County Bar Assoc VLSC 1000 Broadway Ste 480 Oakland, CA 94607 94-2963695	Pro Bono Legal Service	СА	501(c)(3)	7	Alameda Cou	unty Bar Assoc	:	No
For Panerwork Reduction Act Notice see the Instructions for Form 990		Cat No. 501	35V		Schodu	le R (Form	990) 3	015

lle R (Form 990) 2015													Page :
III Identification of Related ( because it had one or more i						ation answ	ered "Ye	s" on	Form	990, Part I	V, lır	ıe 34	;
<b>(a)</b> Name, address, and Ei related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	controlling incor entity ur excl ta	(e) Predominant income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-year assets		n) prtionate ations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		(k) Percent owners	
					514)			Yes	No		Yes	No	
IV Identification of Related (34 because it had one or mo							ation ansv	wered	"Yes'	" on Form 9	€90, I	Part	IV, line
<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)		(d) Direct controll entity	(e) Type of entit (C corp, S corp, or trust)		total Share e of	(g) of end- year ssets		(h) ercentage ownership	Section (b) cont	(i) on 512 (13) trolled tity?	
											Yes		No

Name, address, and EIN of related organization	Primary activity		Share of total income	Share of end- of-year assets	Percentage ownership	Section 512 (b)(13) controlled entity?			
							Yes N		_
								+	
									1
	·		•			Schedu	le R (Form 9	90) 20	<u> </u>

(5)Alameda County Bar Assoc VLSC

Part V Transactions With Related Organizations Complete if the organization answ	vered "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 orgranization engage in any of the following transactions with one or more	related organizations lis	sted in Parts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b		No
f c Gıft, grant, or capital contribution from related organization(s)				1c		No
<b>d</b> Loans or loan guarantees to or for related organization(s)				1d	Yes	
e Loans or loan guarantees by related organization(s)				1e		No
<b>f</b> Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				1g		No
<b>h</b> Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				1i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j	Yes	
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	Yes	
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
f n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	
o Sharing of paid employees with related organization(s)				10	Yes	
$oldsymbol{p}$ Reimbursement paid to related organization(s) for expenses				1р		No
<b>q</b> Reimbursement paid by related organization(s) for expenses				1q	Yes	
r Other transfer of cash or property to related organization(s)				1r		No
<b>s</b> 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 complet	te this line, including co	vered relationships	and transaction thresholds			
(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	( <b>d)</b> Method of determining am	ount II	nvolved	
(1)Alameda County Bar Assoc VLSC	d	314,712	Receivable			
(2)Alameda County Bar Assoc VLSC	1	15,593	FMV			
(3)Alameda County Bar Assoc VLSC	n		Included w J&Q			
(4)Alameda County Bar Assoc VLSC	0		Included w Q			

273,921

FMV

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

revenue) that was not a related organization. See instructions r													
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations	_	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		<b>(k)</b> Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
											l	1	I
												$\vdash$	
												<u> </u>	

Part VII Supplemental Information

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

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