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 www.irs.gov/form990.

OMB No. 1545-0047 2015 Open to Public Inspection

Α	For the	e 2015 calendar year, or tax year beginning , and ending		_	
В	Check if	applicab & Name of organization		D Employe	r identification number
	Address	change Community Law Center, Inc.			
$\overline{\Box}$	Name ch	Doing business as			320934
		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephon	
Ц	Initial ret			410-	366-0922
	Final ret terminat	ted			
	Amende	Baltimore MD 21211 F Name and address of principal officer:	Г	G Gross re	ecei β ts 554,195
Н			H(a) Is this a	aroup return	for subord te ¥ês X No
	Applicat	tion pending Kristine Dunkerton, Esq.			
		3355 Keswick, Suite 200	H(b) Are all sul		
		Baltimore MD 21211	If "No	," attach a list.	(see instructions)
1	Tax-exer	mpt status: X 501(c)(3) 501(c) () ♦ (insert no.) 4947(a)(1) or 527			
J	Website	· ♦ www.communitylaw.org	H(c) Group exe	emption numbe	er ♦
K	Form of	f organization X Corporation Trust Association Other ◆ L	Year of formatio	983	M State of legal domiciMD
F	Part I	Summary			
	1 E	Briefly describe the organization's mission or most significant activities:			
မွ		To provide legal services to community and nonprofit	organiza	tions	
an	•	throughout Maryland to promote stronger nonprofits a			
ern	•	neighborhoods.			
Governance	2 (Check this box ♦ if the organization discontinued its operations or disposed of more that		t assets	
				_	14
SS	1 1	Number of independent voting members of the governing body (Part VI, line 1b)			14
ij	5 7	Fotal number of individuals employed in calendar year 2015 (Part V, line 2a)			10
Activities &	6 7	Total number of valuate are (activate if a consequi)			498
Ă		Fotol consists discovering and account of the Port VIII and the property of the Adoleses of th			0
		Fotal unrelated business revenue from Part VIII, column (C), line 12			0
_	יום	Net unrelated business taxable income from Form 990-T, line 34	Prior Y		Current Year
-	8 (Contributions and grants (Part VIII, line 1h)		2,616	520,857
ne	9 6	(D. (1997)		0,138	21,726
Revenue	10	nvestment income (Part VIII, line 2g) nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	2	128	151
Re	10 1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1.	4,651	6,001
				7,533	548,735
		Fotal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	07	1,333	
		Grants and similar amounts paid (Part IX, column (A), lines 1–3)			0
		Benefits paid to or for members (Part IX, column (A), line 4)	E O	2 227	
xpenses	15 5	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) Professional fundraising fees (Part IX, column (A), line 11e) Fotal fundraising expenses (Part IX, column (D), line 25) ◆ 16,810	54.	3,337	529,388
eng	16a⊦	Professional fundraising fees (Part IX, column (A), line 11e)			0
	b l	l otal fundraising expenses (Part IX, column (D), line 25) ◆ Lb,810	3.4	0 600	141 505
Ш		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		0,688	141,525
	_ 18 ⊺	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		4,025	670,913
20.5	19 F	Revenue less expenses. Subtract line 18 from line 12		3,508	-122,178
Net Assets or		Fatal assets (Part V. line 1C)	Beginning of	3,073	
Ass	20 1	Total assets (Part X, line 16)			342,202 43,763
ē		Total liabilities (Part X, line 26)		2,456	
<u> </u>	L 22 N	Net assets or fund balances. Subtract line 21 from line 20	42	0,617	298,439
******	Part II	Signature Block			
		nalties of perjury, I declare that I have examined this return, including accompanying schedules and st ect, and complete. Declaration of preparer (other than officer) is based on all information of which prep			my knowledge and belief, it
	iue, come	ect, and complete. Declaration of preparer (other than officer) is based on all information of which preparer	arei rias ariy kirc	Jwieuge.	
٠.					
	gn	Signature of officer		Date	
He	ere		Preside	nt	
		Type or print name and title	ı		
_		Print/Type preparer's name Preparer's signature	Date	Check	if PTIN
Pa		Thomas R. Klein, CPA Thomas R. Klein, CPA		3/16 self-em	
	eparer	Firm's name " Malvin, Riggins & Company, P.C.	F	Firm's EIN "	54-1383985
Us	e Only	2809 Boston Street, Ste 440			
_		Firm's address "Baltimore, MD 21224		Phone no.	410-675-2727
Ма	y the IR	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

	(Expenses \$ including grants of \$) (Revenue \$)
40		\
74	1 Other program services (Describe in Schedule O.)	
	•	
	•	
4C	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4b	o (Code:) (Expenses \$ including grants of \$) (Revenue \$)
0	organizations.	
	counsel by Pro-Bono Attorneys to community associations and nong	rofit
T	The Organization provides technical resources, direct legal serv	rices and
	(Code:) (Expenses \$ 539,863 including grants of \$) (Revenue \$	21,726)
	nie total expenses, and revenue, il any, for each program service reported.	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	If "Yes," describe these changes on Schedule O.	
	services?	Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	If "Yes," describe these new services on Schedule O.	
-	prior Form 990 or 990-EZ?	Yes X No
2	Did the organization undertake any significant program services during the year which were not listed on the	
S	See Schedule O	
1		
	Check if Schedule O contains a response or note to any line in this Part III	X
	art III Statement of Program Service Accomplishments	1 ago -
-01111	m 990 (2015) Community Law Center, inc. 52-1320934	Page ∠

	•		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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	. 2	X	
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		X
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		X
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		X
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 I	6		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
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		X
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		X
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	X	
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		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	. 12a	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	44-		Х
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		X
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
. •	assistance to at far farsign individuals? If "Vac." complete Schodule E. Darte III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	10		
• •	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		Λ
12		40		x
18	Part VIII lings 1c and 8a2 If "Vos " complete Schodule C. Part II			
18 19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		

Form 990 (2015) Community Law Center, Inc.

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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		X
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		X
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? If "Yes," complete Schedule J	23		X
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 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		X
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		X
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
~	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
Ŭ	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
30	conservation contributions? If "Ves." complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
JI	Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
32	complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
သ	anations 204 7704 2 and 204 7704 22 K "Vos " anamata Cabadula D. Dort I	33		х
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	24		v
05-	or IV, and Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	X	

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V No 6 **1a** Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1c 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 2a **b** If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 2b **Note.** 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? Х b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial X 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 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Х Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 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? X 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? **7**f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. 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 13b Enter the amount of reserves on hand 13c X Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

52-1320934

Page 6

	art VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, a	and fo		Vo"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	ction A. Governing Body and Management		<u></u>	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 14			
	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 14			
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		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			i
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			ı
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow	ng:		
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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	1. \	X
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	ie Co		
		4.0	Yes	No
10a	• • • • • • • • • • • • • • • • • • • •	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	401		ı
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	37	
11a		11a	X	
b 40-	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40-	v	
12a	• • • • • • • • • • • • • • • • • • • •	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Λ	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c	х	i
12	describe in Schedule O how this was done	13	X	
13 14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	14	X	
15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by	14	- 22	
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
b	Other officers or key employees of the organization	15b		Х
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	100		
16a				
	with a taxable entity during the year?	16a		X
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		
Sec	ction C. Disclosure	•		
17	List the states with which a copy of this Form 990 is required to be filed ◆MD			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X 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.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: ◆			
	anagement 3355 Keswick Road, STE 200			
Ва	altimore MD 21211 410	-36	6-0	922

compensated employees; and former such persons.

Page 7

Part VII 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 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, and 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

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

(A) Name and Title	(B) Average hours per week (list any	box	(C) Position (do not check more than box, unless person is bo officer and a director/tru		Position eck more than one s person is both an d a director/trustee)			(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	st compens yee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1)David Ryan						ated				
	1.00								•	
Chair	0.00	Х		Х		-		0	0	0
(2)Jason Rose	1.00									
Vice-Chair	0.00	x		х				0	0	0
(3) Janice Bowie	0.00	Λ		7.				0	<u> </u>	<u> </u>
(6)5411166 251116	1.00									
Secretary	0.00	X		х				0	0	0
(4)Robert Johnson										
	1.00									
Treasurer	0.00	X		X				0	0	0
(5)Julie Ben-Zev										
	1.00								•	•
Director	0.00	Х				-		0	0	0
(6)Barbara Bezdek	1.00									
Director	0.00	x						0	0	0
(7) Alexandra Hughe		Λ						0	<u> </u>	<u> </u>
(//IIICMAIIAIA IIAGIIC	1.00									
Director	0.00	x						0	0	0
(8) Franklin McNeil										
	1.00									
Director	0.00	X						0	0	0
(9) Joanne Nathans										
<u></u>	1.00									
Director	0.00	Х						0	0	0
(10)Alex Obaza	1 00									
Director	1.00	x						0	0	0
(11)Paul Rishar	0.00	22						0	<u> </u>	<u> </u>
(,2 @ 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1.00									
Director	0.00	х						0	0	0
DAA										- 000

Page 8

Pa	rt VII Section A. Officer	s, Directors, Ti	ruste	ees,	Key	Em	ploy	/ees	s, and Highest Compens	ated Employees (continu	ued)
	(A) Name and title		(B) (C) Average hours per week (list any hours for work than or than or than or than or than or the control of					n an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compens employee	Former	(W-2/1099-MISC)	(W-2/1099-WISC)	organization and related organizations
(12	2) Inez Robb	1.00					ated				
Diı	rector	0.00	x						0	0	0
(13	3) Brian Southa										
Diı	rector	1.00	x						0	0	o
	1) Robert Strup	Þ									-
Dia	rector	1.00	x						0	0	0
	5) Kristine Dun			q.					0	<u> </u>	0
	D./President	40.00			х				97,063	0	6,663
									3.7000		3,000
1b	Sub-total							*	97,063		6,663
c d	Total from continuation she Total (add lines 1b and 1c)							*	97,063		6,663
2	Total number of individuals (in reportable compensation from	including but no	t lim	ited			liste	d ab	-	han \$100,000 of	
3	Did the organization list any t	former officer, o	direc	tor,						ensated	Yes No
4	employee on line 1a? If "Yes For any individual listed on line organization and related organization	ne 1a, is the sur	m of	repo	ortab	le c	omp	ensa	ation and other compensa		3 X
5	individual Did any person listed on line for services rendered to the	1a receive or a	ccru	e co	mpe	nsat	tion f	rom	any unrelated organization	n or individual	5 X
Sect	tion B. Independent Contract			,	,p.	0.0	00	,			
1	Complete this table for your f compensation from the organ										tax year.
		(A) nd business addre							Descr	(B) iption of services	(C) Compensation
2	Total number of independent received more than \$100,000									0	

								400100	04/13/2010 1.40 FWF g 13
	n 990 art V		unity nt of Rev		enter, Ind	c.	52-1320934		Page 9
Г	II L V	Check if	Schedule	O contai	ns a response	or note to any li	ne in this Part VIII		
		Gillegik II	Comedane	O Ooma		(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
t s	_						revenue		512-514
ran Mu	1a	Federated camp		1a					
ΩĔ	b	Membership due	s	1b					
ifts	C.	Fundraising ever		1c					
3,5 Bis	a	Related organiza		1d	174,551				
Sign	e f	Government grants All other contribution		h - i -	1/4,331				
ributi Other	'	and similar amount	s not included	ab p ve	346,306				
2	g	Noncash contribution				520,857			
<u> </u>	n	Total. Add lines	<u> 1a−11</u>			320,037			
Program Service Revent Other Similar Amounts	2a	Fees and	Togol Com		Busn. Code	21,726	21,726		
	za b					21/120	21/120		
	C								
	4								
ащ	e								
og	f	All other progran							
<u>_</u>	a	Total. Add lines				21,726			
		Investment incor				-			
		and other similar				151			151
	4	Income from inve							
	5	Royalties			♦				
			(i) Real		(ii) Personal				
	6a	Gross rents							
	b	Less: rental exps.							
	С	Rental inc. or (loss)							
		Net rental incom Gross amount from			♦				
	1 a	sales of assets	(i) Securities	3	(ii) Other				
		other than inventor	У						
	b	Less: cost or other							
		basis & sales exps.							
		Gain or (loss)	\						
_		Net gain or (loss			10000				
Other Revenue	oa	Gross income from (not including)		-					
Ş.		of contributions	reported on						
Re		See Part IV, line	. 10	_	10,716				
her	h	Less: direct expe		a	5,460				
ŏ		Net income or (Id		ndraising ev	-	5,256			5,256
		Gross income fr				= , = = 0			-,-50
		See Part IV, line		_					
	b	Less: direct expe		b					
		Net income or (lo		ming activit	ies ♦				
		Gross sales of in							
		returns and allow							
		_							

6,152 Form **990** (2015)

0

745

b Less: cost of goods sold

c Net income or (loss) from sales of inventory Miscellaneous Revenue

11a Miscellaneous

d All other revenue e Total. Add lines 11a–11d

12 Total revenue. See instructions.

Busn. Code

745

745

548,735

21,726

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (A) (B) Program service (C) (D) Fundraising Do not include amounts reported on lines 6b, Total expenses Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV. line 21 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 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 97,063 74,098 11,133 11,832 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages ... 352,640 292,600 60,040 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 45,285 36,975 7,176 1,134 9 34,400 5,453 Payroll taxes 28,096 851 10 Fees for services (non-employees): a Management **b** Legal 9,000 9,000 c Accounting Professional fundraising services. See Part IV, line 17 Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column 6,817 5,000 1,817 (A) amount, list line 11g expenses on Schedule O.) 12 Advertising and promotion 19,211 $2,\overline{711}$ 434 Office expenses 16,066 13 Information technology 14 Royalties 59,980 48,920 9,495 1,565 Occupancy 16 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 11,594 9,456 1,835 303 Depreciation, depletion, and amortization 22 5,981 4,878 947 156 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.) 1,692 10,690 8,719 279 Equipment Rental Miscellaneous 10,378 8,207 2,060 111 5,563 4,537 881 145 Telephone $2,\overline{311}$ Dues and Subscriptions 2,311 e All other expenses 539,863 670,913 114,240 25 Total functional expenses. Add lines 1 through 24e 16,810 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check h ei following SOP 98-2 (ASC 958-720).

Part	Check if Schedule O contains a response or	note to any line	e in this Part X							
				(A) Beginning of year		(B) End of year				
1	Cash—non-interest bearing			139,483		75,267				
2	Savings and temporary cash investments			150,320		150 , 076				
3	Pledges and grants receivable, net			95,000		53 , 687				
4	Accounts receivable, net		22,585	4	20,407					
5		ectors,								
	trustees, key employees, and highest compensate									
	Complete Part II of Schedule L		5							
6	Loans and other receivables from other disqualified									
	4958(f)(1)), persons described in section 4958(c)(3	B)(B), and cont	ributing employers and	t						
	sponsoring organizations of section 501(c)(9) volume									
SIS	organizations (see instructions). Complete Part II of	organizations (see instructions). Complete Part II of Schedule L								
Assets 7	Notes and loans receivable, net				7					
8 🏲	Inventories for sale or use				8					
9	Prepaid expenses and deferred charges		L	20,578	9	19,252				
10	Da Land, buildings, and equipment: cost or									
	other basis. Complete Part VI of Schedule D	10a	117,575							
	other basis. Complete Part VI of Schedule D b Less: accumulated depreciation	10b	94,062	35 , 107	10c	23,513				
11	Investments—publicly traded securities	L		11						
12				12						
13				13						
14				14						
15				15						
16		line 34)		463,073	16	342,202				
17	Accounts payable and accrued expenses		36,538	17	37,924					
18			5,918	18	5,839					
19					19					
20					20					
21		t IV of Schedu	le D		21					
g 22										
	trustees, key employees, highest compensated em									
a D	disqualified persons. Complete Part II of Schedule				22					
j 23	Secured mortgages and notes payable to unrelated				23					
24		nird parties			24					
25										
	parties, and other liabilities not included on lines 17	7-24). Complet	e Part X							
	of Schedule D				25					
26				42,456	26	43,763				
20	Organizations that follow SFAS 117 (ASC 958),	check here ◆	X and							
9 2	complete lines 27 through 29, and lines 33 and									
27	Unrestricted net assets			196,940	27	230,125				
28				223,677	28	68,314				
29	Permanently restricted net assets		29							
ב	Organizations that do not follow SFAS 117 (AS	C 958), check	here d and							
5	complete lines 30 through 34.									
ğ 30	Conital stack or truck principal, or accurant fronds				30					
27 28 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20	***				31					
32					32					
z 33				420,617	33	298,439				
34				463,073		342,202				

Form **990** (2015)

	1330 (2013) Community Law Collecty IIIC. 32 1320331			ı aç	<u> </u>
Pa	art XI Reconciliation 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			735
2	Total expenses (must equal Part IX, column (A), line 25)	2			913
3	Revenue less expenses. Subtract line 2 from line 1	3	-12	<u> 22 , :</u>	<u> 178</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	42	<u>20,6</u>	<u>617</u>
5	Net unrealized gains (losses) on investments	5			
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	29	8,4	439
Pa	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	X 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	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
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?		3a		X
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** (2015)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

♦ Attach to Form 990 or Form 990-EZ.

2015

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

♦ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.golv/\$pact990.

Employer identification number Community Law Center, Inc. 52-1320934 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.) 8 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization (i) Name of supported (iii) Type of organization (v) Amount of monetary (vi) Amount of organization listed in your governing other support (see (described on lines 1-9 support (see above (see instructions)) document? instructions) instructions) Yes Nο (A) (B)

(C)

(D)

(E)

Schedule A (Form 990 or 990-EZ) 2015 Community Law Center, Inc. 52-1320934 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 553,766 534,896 583,967 642,616 520,857 2,836,102 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 553,766 534,896 583,967 642,616 520,857 2,836,102 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 1,207,199 Public support. Subtract line 5 from line 4. 1,628,903 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total Amounts from line 4 553,766 534,896 583,967 642,616 520,857 2,836,102 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 518 160 104 128 151 1,061 sources Net income from unrelated business activities, whether or not the business is regularly carried on

	(Explain in Part VI.)	984	2,673	919	737	745	6,058				
11	Total support. Add lines 7 through 10						2,843,221				
12	12 Gross receipts from related activities, etc. (see instructions) 12 21,73										
13	First five years. If the Form 990 is for th	e organization's fire	st, second, third,	fourth, or fifth tax	year as a section	501(c)(3)					
	organization, check this box and stop here										
Section C. Computation of Public Support Percentage											

Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 14 57.29% Public support percentage from 2014 Schedule A, Part II, line 14 15 53.07% 16a 33 1/3% support test—2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this

box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

b 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2015

Other income. Do not include gain or loss from the sale of capital assets

Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ii tilo organization fallo to	quanty united	10010	a bolotti, pload	, c cop.o.c .	u,	
	tion A. Public Support						
Cale	endar year (or fiscal year beginning i	n) (a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and member fees received. (Do not include any "unus grants.")	rship sual					
2	Gross receipts from admissions, merchasold or services performed, or facilities furnished in any activity that is related organization's tax-exempt purpose						
3	Gross receipts from activities that are no unrelated trade or business under sector						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,00 or 1% of the amount on line 13 for the						
С	Add lines 7a and 7b						_
8	Public support. (Subtract line 7c from						
	line 6.)						
	tion B. Total Support					ı	
Cale	endar year (or fiscal year beginning i	n) (a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans royalties and income from similar source						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, wheth or not the business is regularly carried or						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	•	rst, second, third,	fourth, or fifth tax	year as a section	n 501(c)(3)	
	organization, check this box and stop her						>
Sec	tion C. Computation of Public S						
15	Public support percentage for 2015 (line 8	3, column (f) divid	ed by line 13, co	lumn (f))		15	%
16	Public support percentage from 2014 Sch					16	%_
	tion D. Computation of Investme						
17	Investment income percentage for 2015 (13, column (f))			%_
18	Investment income percentage from 2014						%_
19a	33 1/3% support tests—2015. If the orga						. —
	17 is not more than 33 1/3%, check this b	-	-				▶ ∐
b	33 1/3% support tests—2014. If the orga						
	line 18 is not more than 33 1/3%, check th		=				>
20	Private foundation. If the organization di	g not check a box	x on line 14. 19a.	or 19b. check this	s nox and see ins	Tructions	

Page 4

Part IV **Supporting Organizations**

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? С
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2 3a		
3b		
3с		
4a		
4b		
4c		
_5a		
5b 5c		
6		
8		
9a		
9b		
9с		
10a		
10b orm 990 c	or 990-E	Z) 2015

Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?

Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).

By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organization's supported organization's played in this regard.

Section E. Type III Functionally-Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):
- **a** The organization satisfied the Activities Test. Complete **line 2** below.
- **b** The organization is the parent of each of its supported organizations. Complete **line 3** below.
- **c** The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer (a) and (b) below.
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

	Yes	No
2a		
2b		
3a		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Organiz	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust	on Nov. 20,	1970. See instruction	ns. All
other Type III non-functionally integrated supporting organizations must complete	Sections A	through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount		Current Year	
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally-inte	- 1000	e III supporting organiz	ation (see

Schedule A (Form 990 or 990-EZ) 2015

instructions).

Schedule A (Form 990 or 990-EZ) 2015

and 4c.

а

Breakdown of line 7:

c Excess from 2013
 d Excess from 2014
 e Excess from 2015

Excess distributions carryover to 2016. Add lines 3j

Schedule A (F	orm 990 or 990)-EZ) 2015 Cc	mmunity	Law Center	r, Inc.	5:	2-1320934	Page 8
Part VI	Suppleme III, line 12;	ntal Informa Part IV, Sec	ation. Provide tion A, lines 1	the explanation, 2, 3b, 3c, 4b,	ns required by 4c, 5a, 6, 9a,	[,] Part II, line 1 9b, 9c, 11a, 1	0; Part II, line 17 1b, and 11c; Par	a or 17b; Part t IV, Section
	3a and 3b;	Part V, line	1; Part V, Sec		Part V, Section	on D, lines 5, 6	rt IV, Section E, l 5, and 8; and Par tructions.)	
Part I				me Detail				
Miscel	laneous	Income		\$	6.	,058		

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.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Ivaille	to the organization		Limployer identification number
	ommunity Law Center, Inc.		52-1320934
Pa	art I Organizations Maintaining Donor Advised F	Funds or Other Similar Funds	or Accounts.
	Complete if the organization answered "Yes" or	on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing	that the assets held in donor advised	
	funds are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors	s in writing that grant funds can be used	
	only for charitable purposes and not for the benefit of the donor or d		
	conferring impermissible private benefit?		Yes No
Pa	art II Conservation Easements.		
	Complete if the organization answered "Yes" or		
1	Purpose(s) of conservation easements held by the organization (che		
	Preservation of land for public use (e.g., recreation or education) Preservation of a historically im	portant land area
	Protection of natural habitat	Preservation of a certified histo	ric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified cor	nservation contribution in the form of a c	
	easement on the last day of the tax year.		Held at the End of the Tax Year
a			
b			2b
C			2c
d	(1)	17/06, and not on a	
_			
3	Number of conservation easements modified, transferred, released,	extinguished, or terminated by the orga	anization during the
	tax year •	is located.	
4	Number of states where property subject to conservation easement Does the organization have a written policy regarding the periodic m		
5	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handlin		
Ū	^	g of violations, and emoreing conservat	ion casements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of	violations, and enforcing conservation e	easements during the year
-	◆ \$	The contraction of the contraction of the contraction of	accome daming and year
8	Does each conservation easement reported on line 2(d) above satis	sfy the requirements of section 170(h)(4)(B)(i)
9	In Part XIII, describe how the organization reports conservation ease		
	balance sheet, and include, if applicable, the text of the footnote to t	the organization's financial statements t	hat describes the
	organization's accounting for conservation easements.		
Pa	art III Organizations Maintaining Collections of A		ner Similar Assets.
	Complete if the organization answered "Yes" or	on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958)), not to report in its revenue statement	and balance sheet
	works of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in	furtherance of
	public service, provide, in Part XIII, the text of the footnote to its fina		
b	, ,	•	
	works of art, historical treasures, or other similar assets held for pub		furtherance of
	public service, provide the following amounts relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		
_			
2	If the organization received or held works of art, historical treasures,		n, provide the
	following amounts required to be reported under SFAS 116 (ASC 95)		A A
a			
b	Assets included in Form 990. Part X		▼ \$

117,575

Schedule D (Form 990) 2015

23,513

23,513

94,062

b Buildingsc Leasehold improvements

d Equipment

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

	Form 990) 2015 Community Law Cente	r, inc.	52-1320934	Page .
Part VII	Investments—Other Securities. Complete if the organization answered "Yes	" on Form 990. Part I\	/. line 11b. See Form 99	0. Part X. line 12.
	(a) Description of security or category	(b) Book value	(c) Method of v	
	(including name of security)	(a) 2001. Talias	Cost or end-of-year	
(1) Financial			•	
(2) Closely-h	derivatives	• •		
(2) Other	eld equity interests	• •		
(3) Other				
(B)				
(D)				
(E)				
(F)				
(G)				
/⊔\				
	nn (b) must equal Form 990, Part X, col. (B) line 12.) ◆			
Part VIII				
	Complete if the organization answered "Yes	" on Form 990. Part I	/. line 11c. See Form 99	0. Part X. line 13.
	(a) Description of investment	(b) Book value	(c) Method of v	
	(-)	(4) = 2 = 2 = 2	Cost or end-of-year	
(1)				
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 13.) ◆			
Part IX	Other Assets.			
	Complete if the organization answered "Yes	" on Form 990, Part I	/, line 11d. See Form 99	0, Part X, line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line 15.)		◆	
Part X	Other Liabilities.	" - 000 - 10		000 B +)/
	Complete if the organization answered "Yes	s" on Form 990, Part I	V, line 11e or 11f. See Fo	orm 990, Part X,
	line 25.			
1.	(a) Description of liability	(b) Book value	_	
(1) Federal	income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	on (b) must equal Form 000 Port V and (D) line 05 \			
i otai. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 25.) 🔷			

Schedule D (F	Form 990) 2015	Community	Law	Center,	Inc.	52-1320934	Page 5
Part XIII	Suppleme	Community ntal Information	(contir	nued)			
				,			
• • • • • • • • • • • • • • • • • • • •							

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No. 1545-0047
2015

Department of the Treasury Internal Revenue Service

◆ Attach to Form 990 or 990-EZ.

Open to Public

Name of the organization

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

Community Law Center, Inc.

Form 990 - Organization's Mission

Employer identification number 52-1320934

Community Law Center empowers communities and nonprofits that lack the financial resources to pay for private legal representation. Community Law Center makes an important and unique contribution to the region as it utilizes its expertise and effectiveness in using the law to overcome or mitigate many of the social, economic, and environmental problems that plague neighborhoods. Through our programs, we have assisted in the formation and growth of hundreds of community associations and nonprofits, facilitated the revitalization of blighted land and vacant structures, reduced crime and nuisance activities stemming from residential and commercial properties, and helped communities and nonprofits accomplish their goals and achieve their missions.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

The Form 990 is reviewed by the Finance and audit committee and circulated to the entire Board of Directors for approval before filing it to the IRS.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

Board members are asked to sign a copy of the conflict of interest policy

annually.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

The Organization's Compensation Committee compares the Executive Director's

compensation package with compensation data for similar positions at

similarly situated organizations using data collected from a variety of