COPY

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public

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.

		ue Service	► Go to www.irs.gov/Form990 for instructions and the lates				culon			
A	For the	2019 calend	dar year, or tax year beginning , 2019, and endi	ng		, 20				
В	Check if	applicable:	C Name of organization RURAL LAW CENTER OF NEW YORK, INC.		D Employer identification number					
	Address		Doing business as			14-179281	9			
=	Name ch			Room/suite	E Teleph	none number				
=	Initial ret		22 US OVAL	101		(518) 581-54	160			
=		ım/terminated	City or town, state or province, country, and ZIP or foreign postal code							
_	Amende	28A (250) 20 (20 PM) 20 (20 PM)	PLATTSBURGH, NY 12903			receipts \$	1,280,855			
=		ion pending	F Name and address of principal officer: HEIDI DENNIS	H(a) Is this a gro	oup return fo	or subordinates?	Yes 📈 No			
Ш	Applicati	ion pending	22 US OVAL PLATTSBURGH, NY 12903	H(b) Are all su	ubordinat	es included?	Yes No			
	Tay-eyer	mpt status:	If "No," a	attach a list. (see instructions)						
_		: > rurallaw	∑ 501(c)(3)	H(c) Group ex	xemption	number ▶				
		organization:		nation: 1996	M State	of legal domici	le: NY			
	arti	Summa	Joorporation Treat Treated attent Journal							
	-	Oriefly doe	cribe the organization's mission or most significant activities: PROVI	IDES CIVIL LEGAL	ASSIS	TANCE TO				
40	1	Briefly des	LOW-INCOME PEOPLE RESIDING IN RURAL COUNTIES OF NEW YORK STA	TE.						
Activities & Governance		PRIMARILY	LOW-INCOME PEOPLE RESIDING IN RORAL COUNTIES OF NEW TOTAL							
ша		01 1 11-1-	box ▶ ☐ if the organization discontinued its operations or disposed	d of more than	25% of	its net asse	ts.			
Ve	2	Check this	box > if the organization discontinued its operations of disposor	3 01 111010 111-	3		7			
ဗိ	3	Number of	voting members of the governing body (Part VI, line 1a)	 o)	4		7			
ගේ	4	Number of	independent voting members of the governing body (Part VI, line 1b	5)	5		18			
Ţ.	5	Total numb	per of individuals employed in calendar year 2019 (Part V, line 2a)		6		78			
Ĭ.	6	Total numi	per of volunteers (estimate if necessary)	• • • •	7a					
Ä	7a	Total unrel	ated business revenue from Part VIII, column (C), line 12		7b					
	b	Net unrela	ted business taxable income from Form 990-T, line 39	Prior Yea		Curren	t Year			
						- Carron	967397			
93	8		ons and grants (Part VIII, line 1h)		200620		313390			
Š	9	Program s	ervice revenue (Part VIII, line 2g)		3600		68			
Revenue	10	Investmen	t income (Part VIII, column (A), lines 3, 4, and 7d)		45					
Œ	11	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				1280855			
	12	Total rever	nue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u> </u>	1204265 1280					
	13	Grants and	d similar amounts paid (Part IX, column (A), lines 1-3)							
	14	Benefits p	aid to or for members (Part IX, column (A), line 4)							
S	15	Salaries, o	ther compensation, employee benefits (Part IX, column (A), lines 5-10)		1039763		1079202			
Expenses	16a	Profession	nal fundraising fees (Part IX, column (A), line 11e)			at the state of th				
ber	. b		raising expenses (Part IX, column (D), line 25) ▶							
X	17	Other exp	enses (Part IX, column (A), lines 11a-11d, 11f-24e)		163851		176964			
	18	Total expe	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1203614		1256166			
	19	Revenue I	ess expenses. Subtract line 18 from line 12		651		24689			
_		Nevenue	eas expenses. Cook dot line to hell line to	Beginning of Curr	rent Year	End o	f Year			
sets or	20	Total acce	ts (Part X, line 16)		424595		456614			
SSe	20		ities (Part X, line 26)		164173		163726			
Net Ass	E 21		s or fund balances. Subtract line 21 from line 20		260422		292888			
			ure Block							
L	art II	Signati	y, I declare that I have examined this return, including accompanying schedules and sta	stements, and to the	best of	my knowledge	and belief, it is			
U	inder pen	ct and comple	te. Declaration of preparer (other than officer) is based on all information of which preparer.	arer has any knowle	dge.					
	46, 60116	T.								
Cianal Date, (/ /										
	ign	Signa	ture of officer		41	11/2021	D			
Н	ere	-	3000							
			or print name and title	POFfiller I	Check	T if PTIN				
P	Paid 1 1 1 2020 02/14/2020 02/14/20 self-employed P01464492									
	repar	er SUSAN	WOVODOBA				641830			
	lse Or	Firm's na			s EIN ▶	(518) 57				
		Firm's a	ddress ► 12 TAMARAC DRIVE, TUPPER LAKE, NY 12986	Phor	ne no.		Yes No			
N	lay the	IRS discuss	this return with the preparer shown above? (see instructions)	<u></u>	<u> </u>		990 (2019)			

Form 990 (2019)

Form	990 (2019) Page 2
Par	Statement of Program Service Accomplishments
1	Check if Schedule O contains a response or note to any line in this Part III
	PROVIDES CIVIL LEGAL SERVICES TO PRIMARILY LOW-INCOME PEOPLE RESIDING IN RURAL COUNTIES OF NEW YORK STATE.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by 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.
4a	(Code:) (Expenses \$ 1,256,166 including grants of \$) (Revenue \$ 1,280,855) PROVIDES CIVIL LEGAL SERVICES TO PRIMARILY LOW-INCOME PEOPLE RESIDING IN RURAL COUNTIES OF NEW YORK STATE.
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
19	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
1.5	
**	······································
•	
•	
	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 1,256,166

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Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 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 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 6 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 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 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 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. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 11a Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more 11b 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 d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e 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 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a 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 \$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

Par	Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		/
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		/
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		/
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
С	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		1
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		/
Ь	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		1
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		/
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	1	
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	/	
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		/
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		/
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		<u> </u>
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		<u></u>
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		/
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u></u>
	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		<u> </u>
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		/
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		/
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	V	
Part '	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		• ;	
10	Enter the number reported in Day 2 of Farm 1000 Fath 2 11 11 11		Yes	No
b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 5 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 Did the organization comply with backing withholding rules for approach to a second to the complete second to the			
Ü	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	1	
		_	990 (2019)

Pa	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
		8		
l	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
38	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	7	1
t		3b		-
48	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		
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).	7.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			2
b	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		\angle
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		-	
ь	and services provided to the payor?	7a		\checkmark
c	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	7b	-	
·	required to file Form 8282?	7c	1	./
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
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?	13a		
b	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			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		<u></u>
16	If "Yes," see instructions and file Form 4720, Schedule N.			
10	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		<u>_</u>
	100, Complete Form 4720, Conedule O.		200	
		Form 9	99U (2	2019)

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Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions
	Check if Schedule O contains a response or note to any line in this Part VI
Sec	tion A. Governing Body and Management
4.	Yes No
ıa	Enter the number of voting members of the governing body at the end of the tax year 1a 7
	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 on Schedule O.
h	
ь	Enter the number of voting members included on line 1a, above, who are independent . 1b 7
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?
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?
5	Did the organization become aware during the year of a significant diversion of the organization's assets?
6	Did the organization have members or stockholders?
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?
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
a	The governing body?
b	Each committee with authority to act on behalf of the governing body?
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 on Schedule O
ection	on B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)
	Yes No
10a	Did the organization have local chapters, branches, or affiliates?
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?
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
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.
3	Did the organization have a written whistleblower policy?
4	Did the organization have a written document retention and destruction policy?
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?
а	The organization's CEO, Executive Director, or top management official
b	Other officers or key employees of the organization
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement
b I	f "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
ctio	organization's exempt status with respect to such arrangements?
	ist the states with which a copy of this Form 990 is required to be filed ▶ NEW YORK
8 9	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, 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. Own website Another's website Don request Other (explain on Schedule O)
V/==	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,
6	and infancial statements available to the public during the tax year.
0 8	State the name, address, and telephone number of the person who possesses the organization's books and records HEIDI DENNIS, EXECUTIVE DIRECTOR 22 US OVAL, PLATTSBURGH, NY 12903

Form	agn	(20)	10

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. See instructions for the order in which to list the persons above.

Check this box if neither the organization no	•		aniz	atio	on c	ompe	ensa	ited any current	officer, director,	or trustee.
		T			C)					
(A) Name and title	(B) Average hours per week	box,	Position (do not check more than one box, unless person is both an officer and a director/trustee)			an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	(list any hours for related organizations , below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the from the organization and related organizations
(1) SCOTT CLIPPINGER, ESQ	2								ĺ	
PRESIDENT	0	\checkmark		\checkmark						
(2) ELLEN COCCOMA	0	/								
(3) ANDREW PULRANG	2									
SECRETARY/TREASURER	0	/		1						
(4) MARGARET MURRAY	2	/								
(5) PATRICIA BENTLEY	2	/								
(6) LEWIS PAPENFUSE	2	/								
(7) WILLIAM LAUNDRY	2	/							-	
(8) HEIDI DENNIS	35	-								
EXECUTIVE DIRECTOR	0			/				119,011		
(9)										
(10)									200	
(11)										
(12)										
(13)						-		*		
(14)										

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Pa	rt VII Section A. Officers, Directors,	Trustees,	Key	Em	plo	yee	es, ai	nd I	Highest Comp	ensated Emplo	yees (continued)
	(A) Name and title	(B) Average hours per week (list any hours for	Position (do not check more than box, unless person is boi officer and a director/true or directority of direct					h an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	er .	Key employee	Highest compensated employee	er	(iv b) rood miles,	(** 2 *********************************	related organizations
(15)							_				
(16)											
(17)											
(18)											
(19)											
(20)											
(21)											
(22)											,
(23)											**************************************
(24)											
(25)											
1b	Subtotal					•	. 1	>	119011	0	0
d d	Total from continuation sheets to Part V Total (add lines 1b and 1c)				 		. I	>	119011	0	0
2	Total number of individuals (including but reportable compensation from the organiz		to the	ose	liste	ed a	bove) wh	no received more	than \$100,000	of
3	Did the organization list any former of employee on line 1a? If "Yes," complete So	ficer, direc	ctor, for suc	trus ch in	tee. ndiv	, ke	ey en	nplo	oyee, or highest	compensated	Yes No
4	For any individual listed on line 1a, is the sorganization and related organizations gindividual	sum of repartment of repartmen	ortabl n \$15	le co 50,0	omp 00?	oen:	satior "Yes	n an ," c	od other compen	sation from the ule J for such	
5	Did any person listed on line 1a receive or for services rendered to the organization?	accrue cor If "Yes," co	npen: mple	satio	on f	rom edul	any le J fo	unre	elated organizati uch person .	on or individual	5
Secti	on B. Independent Contractors										
1	Complete this table for your five highe compensation from the organization. Report	st comper t compens	nsated ation	d in for t	nder the	cale	dent endar	con yea	ntractors that rear	ceived more the ceived more the contract the ceived more thank the ceived more than the ceived more than the ceived more thank the ceived more than the ceived more than the ceived more thank the ceived more than the ceived more than the ceived more thank the ceived more than the ceived more than the ceived more thank the ceived more than the ceived more than the ceived more thank the ceived more than the ceived more than the ceived more thank the ceived more than the	nan \$100,000 of zation's tax year.
	(A) Name and business addre	ss							(B) Description of servi	ces C	(C) compensation
											0
							\dashv				
2	Total number of independent contractors received more than \$100,000 of compensations.							tho	ose listed above) who	

Form	990 (20	19)	RUF	RAL LAVV	CEN	14-1792819 Page						
-		Statement of Re	eveni	II.					****	1 490		
LL	L. C.	Check if Schedule			espor	se or note to a	ny line in this P	art VIII	10 10 100 1007 85 10	Г		
		· · · · · · · · · · · · · · · · · · ·	-	orrealing a r	JOPOI	100 01 11010 10 0	(A)	(B)	(C)	(D)		
						51	Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under		
								function revenue	business revenue	sections 512–514		
10 10	1a	Federated campaig	ane		1a	T	Privile Commence of the second	Property of the control of the contr				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	-		1b							
Siz 6	C	Fundraising events			10		The second secon	OCH THE STREET STREET	The state of the s			
ts,	d	Related organization			1d		**************************************	The state of the s	1990-1990 1991-1991-1991			
ia gi	e	Government grants			1e	676468	V Company of the second		Section 1			
SL E	f	All other contribution	63	100		0,0400		Transfer Village III				
tio X					1f	290929		male and the second				
the library	g				255525	Maria de la companya		The state of the s	Property of the Control of the Contr			
Contributions, Gifts, Grants and Other Similar Amounts	9	lines 1a-1f			1g	s	13300					
a Co	h	Total. Add lines 1a					967397	The state of the s				
	<u> </u>	rotali / too mileo i ta				Business Code	307007	THE	HILLER OF THE STATE OF THE STAT			
9	2a	FEES FOR SERVICES	S			541100	313390	313390				
۳ <u>چ</u>	b											
Se	C				•••••							
gram Sen Revenue	d											
gra	е											
Program Service Revenue	f	All other program s										
_	g	Total. Add lines 2a				>	313390					
	3	Investment income						and the second s				
		other similar amour					68			68		
	4	Income from investr										
	5	Royalties			•	entre de la company de la comp						
				(i) Real		(ii) Personal		The state of the s	To the second of			
	6a	Gross rents	6a		0			THE PROPERTY OF STREET OF	Table of the state	15 15 10 10 10 10 10 10 10 10 10 10 10 10 10		
	b	Less: rental expenses	6b									
	С	Rental income or (loss)	6c									
	d	Net rental income o	r (loss	3)		>						
	7a	Gross amount from		(ī) Securiti	ies	(ii) Other	The state of the s					
		sales of assets										
		other than inventory	7a					Man and a state of the state of		7 - 2 - 1 - 2 - 4 - 1 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3		
e	b	Less: cost or other basis	50 H 360						Control of the state of the sta	TO STATE OF THE ST		
Revenue		and sales expenses :	7b					TOTAL DESIGNATION OF THE PARTY				
3e		Gain or (loss)	7c									
100		Net gain or (loss)			• ;	<u> </u>	e ment		and the second s			
Other	8a	Gross income from		ndraising		2	•	ti tier alle state de la companya de	2000			
0		events (not including										
		of contributions rep				*						
	*	1c). See Part IV, line			8a				A CONTRACT OF STREET	Action of the second se		
	b	Less: direct expens			8b		Ref.		The state of the s	STATE OF THE STATE		
	C	Net income or (loss)			g ever	nts >	period of the second			1210		
200	9a	Gross income f						AND THE STATE OF T	UNITED THE STATE OF THE STATE O	(81%)		
		activities. See Part I			9a	*			en e	COLUMN TO THE TAX THE TAX TO THE		
		Less: direct expense			9b		The second of the second second second	TOTAL CONTRACT OF THE STATE OF		Circuit of the property of the		
		Net income or (loss)			tivities	s >						
100	10a	Gross sales of in		The second second second	10a		Maria de Arron y Cal			The second secon		
	L	returns and allowand		-	10b		2151 - 21		Village Control of the Control of th			
		Less: cost of goods Net income or (loss)				v >						
		rectification (loss)	110111	Jaics Of III	CITO	Business Code						
Miscellaneous Revenue	11a				-	303mess 0008						
nec	b b											
scellaneo Revenue										· · · · · · · · · · · · · · · · · · ·		
Sce	d	All other revenue	•							1		
Ξ		Total. Add lines 11a			٠ [>				The state of the s		
	12	Total revenue. See			• •		1280855	313390	0	68		
							1200000	0,0000				

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 . . (D) Fundraising (A) Total expenses (C) Management and Do not include amounts reported on lines 6b, 7b, (B) Program service 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 119011 101159 17852 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 7 Other salaries and wages ., 736418 625955 110463 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 24323 20675 9 Other employee benefits 126070 107159 18911 10 73380 62373 11007 Fees for services (nonemployees): 11 Management Legal Accounting 6500 5525 975 5000 4250 750 Professional fundraising services. See Part IV, line 17 Investment management fees Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . 7525 6396 1129 Advertising and promotion 12 Office expenses 13 27460 23341 4119 Information technology . . . 14 3910 3323 587 Royalties 15 16 56075 47664 8411 17 19115 16248 2867 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 20 136 116 20 Payments to affiliates 21 22 Depreciation, depletion, and amortization . 1079 917 162 23 12196 10367 1829 Other expenses. Itemize expenses not covered 24 above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) PUBLICATIONS, DUES, LIBRARY 12159 10335 1824 EQUIPMENT RENTAL, ACQUISITIONS 10422 8859 1563 PROFESSIONAL DEVELOPMENT C 13773 11707 2066 e All other expenses 1372 242 1614 Total functional expenses. Add lines 1 through 24e 25 1256166 1067741 188425 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)

m 990 (2019)				

F	art >				
		Check if Schedule O contains a response or note to any line in this Pa	art X		<u>, C</u>
-			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	11134	1	2987
	2	Savings and temporary cash investments	84612	2	10987
	3	Pledges and grants receivable, net	309370	3	28900
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,		3	
		trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	And the state of t
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).		6	A201 (19) (19) (19) (19) (19) (19) (19) (19
SI	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
ď	9	Prepaid expenses and deferred charges	, 18154	9	10519
	10a	Land, buildings, and equipment: cost or other		100 T	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		basis. Complete Part VI of Schedule D 10a 18386			Farmer and the second s
		Less: accumulated depreciation 10b 4147	1325	10c	14239
	11	Investments—publicly traded securities		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	, ·
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	3100
	16	Total assets. Add lines 1 through 15 (must equal line 33)	424595	16	456614
	18	Accounts payable and accrued expenses	4287	17	50
	19	Grants payable	159886	19	162676
	20	Tax-exempt bond liabilities	159886	20	163676
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to any current or former officer, director,			The state of the s
Liabilities	22	trustee, key employee, creator or founder, substantial contributor, or 35%		en le le	
ig		controlled entity or family member of any of these persons		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties	:	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
- 1	26	Total liabilities. Add lines 17 through 25	164173	26	163726
S		Organizations that follow FASB ASC 958, check here ▶ □			The Company of the Co
2		and complete lines 27, 28, 32, and 33.			
aa	27	Net assets without donor restrictions	260422	27	292888
8	28	Net assets with donor restrictions		28	
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33.			
0	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds		31	
et	32	Total net assets or fund balances	260422	32	292888
Ž	33	Total liabilities and net assets/fund balances	424595	33	456614
					Form 990 (2019)

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Form 990 (2019) Page 12 Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI . . . 1280855 2 Total expenses (must equal Part IX, column (A), line 25) . . . 2 1256166 3 24689 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 4 260422 5 5 6 6 7 7 8 7777 Other changes in net assets or fund balances (explain on Schedule O) 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 292888 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Yes Accounting method used to prepare the Form 990:
Cash 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? . . . 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? 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: ☐ 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 oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain on 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the 3a 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 on Schedule O and describe any steps taken to undergo such audits. 3b

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.

2019

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

lame	ame of the organization Employer Identification Number										
RUR	URAL LAW CENTER OF NEW YORK, INC. 14-1792819										
	Reason for Public Cha	rity Status (All	organizations mus	t comple	te this p	art.) See instruction	ons.				
	organization is not a private founda	tion because it	is: (For lines 1 through	12, che	ck only or	ne box.)					
1	A church, convention of churc										
2	☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)										
3											
4	The state of the s										
	hospital's name, city, and state					A.TTO SYSTEM M					
5	An organization operated for	the benefit of a	college or university	owned o	r operate	ed by a government	al unit described in				
	section 170(b)(1)(A)(iv). (Complete Part II.)										
6	The state of the s										
7	the second public										
	described in section 170(b)(1)				7.0						
8	A community trust described in	section 170(b))(1)(A)(vi). (Complete	Part II.)							
9	An agricultural research organi				erated in	conjunction with a la	and-grant college				
	or university or a non-land-gra	nt college of agr	iculture (see instruction	ons). Ente	r the nan	ne, city, and state of	the college or				
	university:		• A Million, S. & P. Derick (M. 1994) (M.	•							
10	An organization that normally r	eceives: (1) mor	e than 331/3% of its si	upport fro	m contril	outions, membership	o fees, and gross				
	receipts from activities related support from gross investment	to its exempt fu	nctions - subject to c	ertain exc	eptions,	and (2) no more than	n 331/3% of its				
	acquired by the organization at	fter June 30, 197	75. See section 509(a	1)(2), (Cor	nolete Pa	art III.)	pagi icagéa				
11	An organization organized and										
	An organization organized and						ry out the purposes				
-	of one or more publicly suppo	rted organization	ns described in secti	on 509(a)(1) or se	ection 509(a)(2). See	e section 509(a)(3).				
	Check the box in lines 12a throi	ugh 12d that des	scribes the type of sup	porting o	rganizatio	on and complete line	s 1,2e, 12f, and 12g.				
а	-										
-	the supported organization	(s) the power to	regularly appoint or e	lect a ma	jority of t	he directors or trust	ees of the				
	supporting organization. You										
b	☐ Type II. A supporting organ	ization supervis	ed or controlled in co	nnection	with its s	upported organization	on(s), by having				
~	control or management of t	he supporting o	rganization vested in	the same	persons	that control or mana	age the supported				
	organization(s). You must of										
С	Type III functionally integr	ated. A support	ting organization oper	ated in c	onnection	with, and functiona	ally integrated with,				
-	its supported organization(s	s) (see instructio	ns). You must compl	lete Part	IV, Secti	ons A, D, and E.					
d	☐ Type III non-functionally in	ntegrated. A su	poorting organization	operated	in conne	ection with its suppo	orted organization(s)				
-	that is not functionally integ	rated. The organ	nization generally mus	st satisfy	a distribu	ition requirement an	d an attentiveness				
	requirement (see instruction										
е	☐ Check this box if the organi	zation received	a written determination	on from th	e IRS tha	at it is a Type I. Type	e II. Type III				
·	functionally integrated, or T	ype III non-func	tionally integrated sur	porting o	organizati	on.					
f	Enter the number of supported o										
g	B 11 H (-11-11-11-11-11-11-11-11-11-11-11-11-11	a reference and and an analysis of the second									
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of				
			(described on lines 1-10	listed in you docur	r governing	support (see	other support (see instructions)				
			above (see instructions))	docui	nent/	instructions)	msaucaons)				
				Yes	No						
۸,											
4)											
3)											
رد											
C)											
D)											
E)					İ						

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 967397 5689195 1180142 1173312 1167724 1200620 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. . . . 1180142 1173312 1167724 1200620 967397 5689195 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) Public support. Subtract line 5 from line 4 5689195 Section B. Total Support (c) 2017 (a) 2015 (b) 2016 (d) 2018 (e) 2019 (f) Total Calendar year (or fiscal year beginning in) ▶ Amounts from line 4 5689195 1180142 1173312 1167724 1200620 967397 Gross income from interest, dividends. payments received on securities loans, rents, royalties, and income from similar sources 267 Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part VI.) 42610 58870 4250 313390 422720 11 Total support. Add lines 7 through 10 6112182 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 93.08 % Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) 14 14 15 Public support percentage from 2018 Schedule A, Part II, line 14 97.12 % 15 331/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test-2019. 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 10%-facts-and-circumstances test - 2018. 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Page 3

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

Support Solidadis for Significant and State of S
(Complete only if you checked the box on line 10 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.)

	If the organization fails to qualify	under the te	sts listed be	low, please c	omplete Part	11.)	
Sect	ion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the				}		
	organization's tax-exempt purpose			1			
3	Gross receipts from activities that are not an		·				
•	unrelated trade or business under section 513	N/A					
4	Tax revenues levied for the	14/0					
7	organization's benefit and either paid to					8	
	or expended on its behalf						
-	95 CAR					-	
5	The value of services or facilities	1					
	furnished by a governmental unit to the						
	organization without charge						<u> </u>
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 \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨 📗	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,	1					
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses	1					
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether	1					
	or not the business is regularly carried on	N/A			8		
12	Other income. Do not include gain or						
1000 0	loss from the sale of capital assets	1					
	(Explain in Part VI.)	1					
13	Total support. (Add lines 9, 10c, 11,						
0.000	and 12.)						
14	First five years. If the Form 990 is for the	organization'	s first, second	d third fourth	or fifth tax ve	ar as a sectio	n 501(c)(3)
0.0	organization, check this box and stop here						
Secti	on C. Computation of Public Support						
15	Public support percentage for 2019 (line 8,			3 column (f)		15	%
16	Public support percentage from 2018 Sche					16	%
	on D. Computation of Investment Inc						
17	Investment income percentage for 2019 (lin			v line 13. colu	mn (f))	17	%
18	Investment income percentage from 2018					18	%
19a	331/3% support tests—2019. If the organiz	ation did not	check the box	on line 14 ar	nd line 15 is m		
iva	17 is not more than 331/3%, check this box a	nd stop here	The organization	on qualifies as a	a publicly suppo	orted organizati	on . ▶ 🗍
b	331/3% support tests—2018. If the organiza						
D	line 18 is not more than 331/3%, check this be						
20	Private foundation. If the organization did						
40	rivate idunuation, il the ordanization did	HOL CHECK & D	UA UN IIIIE 14.	13a, UI 13U, C	HIGGE HIIS DOX	und doo mattu	0UIU F

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

sect	ion A. Ail Supporting Organizations		1./	
	Are all of the organization's supported organizations listed by name in the organization's governing		Yes	No
1	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.	1		
2	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).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	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.	3b		
С	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 out in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a	-	
b	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.	4b		
С	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) purposes.	4c		
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).	5a		
b	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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		5111
6	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.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).	7		
8	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).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more 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 .	9a		
b	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 .	9b		
С	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.	9c		
l0a	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.	10a		
b	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.)	10b		

Sched	ule A (Form 990 or 990-EZ) 2019 RURAL LAW CENTER OF NY 14-1792819			Page 5
Part				
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	11a		
	below, the governing body of a supported organization?	11b		
	A family member of a person described in (a) above?	11c		_
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	110	-	
Secti	on B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
	0 22 22 2		Yes	No_
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	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?	1		
2	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).	2		
3	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 organizations played in this regard.	3		
Section	on E. Type III Functionally Integrated Supporting Organizations			
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in the organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (satisfies Test. Answer (a) and (b) below.			ions).
а	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.	2 a		
	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.	2b		
	Parent of Supported Organizations. Answer (a) and (b) below. 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.	За		
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.	3b		

RURAL LAW CENTER OF NY

Page 6

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	gar	nizations IN/A	
1 Check here if the organization satisfied the Integral Part Test as a qualifyir instructions. All other Type III non-functionally integrated supporting organization.			
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	16		
c Fair market value of other non-exempt-use assets	10		
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	4	
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-functionall	y int	egrated Type III supporti	ng organization (see

Schedule A (Form 990 or 990-EZ) 2019

Pa	Type III Non-Functionally Integrated 509(a)	(3) Supporting Organ	nizations (continued)	
Se	ction D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers ex	kempt purposes of supp	orted	
_	organizations, in excess of income from activity	40 10 10 NO NO		
3	, and the second	poses of supported orga	anizations	
4	The state of the s			
5	The state of the s			
6	The state of the s			
7				
8	Distributions to attentive supported organizations to which (provide details in Part VI). See instructions.			
9	The state of the s			
10	Line 8 amount divided by line 9 amount			
Sec	tion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а		5		
b	From 2015			All of the second
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i_	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from			
	Section D, line 7:			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
15360	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.		,	
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
С	Excess from 2017			
d	Excess from 2018			2 94 2
е	Excess from 2019	-		

Schedule A (Form 990 or 990-EZ) 2019

14-1792819

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2t 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
N/A	

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SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

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.

2019

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service South Service Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then 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 Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization Employer identification number RURAL LAW CENTER OF NEW YORK, INC. 14-1792819 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities") Volunteer hours for political campaign activities (see instructions) . . . 3 Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 . . Enter the amount of any excise tax incurred by organization managers under section 4955 . . . > b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received and funds. If none, enter -0-. promptly and directly delivered to a separate political organization. If none, enter -0-. (1) (2)(3) (4)(5)

(6)

Sch	edule C (Form 990 or 990-62) 2019			127 (129 A 2010 MARC 1 MARC 1 MARC 1 MARC 1 1 MA		Page
	rt II-A Complete if the organiza section 501(h)).					ection under
A	Check ▶ ☐ if the filing organization be	elongs to an af	filiated group (and lis	st in Part IV each af	filiated group memb	er's name,
	address, EIN, expenses, a	ind share of ex	cess lobbying expen	nditures).		
В	Check if the filing organization ch			provisions apply.		
	Limits on L	obbying Expe	nditures		(a) Filing	(b) Affiliated
	(The term "expenditures"	means amou	ints paid or incurre	d.)	organization's totals	group totals
1	remarkation to minde	nce public opir	nion (grassroots lobb	ying)		
ł	b Total lobbying expenditures to influence a legislative body (direct lobbying)					
(c Total lobbying expenditures (add lines 1a and 1b)				5000	
(d Other exempt purpose expenditures				1251166	77.
	e Total exempt purpose expenditures (add lines 1c and 1d)					
f	Lobbying nontaxable amount. Ente columns.	er the amoun	t from the following	ng table in both	200617	
	If the amount on line 1e, column (a) or (b	is: The lobby	ing nontaxable amou	int is:	2000.	
	Not over \$500,000		e amount on line 1e.			
	Over \$500,000 but not over \$1,000,000		olus 15% of the excess	s over \$500 000		
	Over \$1,000,000 but not over \$1,500,000		olus 10% of the excess			
	Over \$1,500,000 but not over \$17,000.000		olus 5% of the excess			
	Over \$17,000,000	\$1,000,000).	275. 07,000,000.		
g		25% of line 1f			50154	
h	9 14: 11 20: 0 0	less, enter -0			0	
i	Subtract line 1f from line 1c. If zero or	less, enter -0-			0	
j	If there is an amount other than zer reporting section 4911 tax for this year	o on either li	ne 1h or line 1i, di	d the organization	file Form 4720	Yes No
			g Period Under Se	otion FO1/h)	· · · · · · <u>-</u>	10310
	(Some organizations that made a s	ection 501(h)	election do not hav structions for lines	ve to complete all	of the five columns	s below.
	Lobbyir	ng Expenditur	es During 4-Year A	veraging Period		
	Calendar year (or fiscal year	(a) 2016			4,004.0	
	beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))					1
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					1000
е	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					-

Schedule C (Form 990 or 990-EZ) 2019

or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)	
escription of the lobbying activity.	Yes	No	Aı	noun	t
 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: Volunteers? 					
Paid start 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?		/			
Grants to other organizations for lobbying purposes?		~			500
g Direct contact with legislators, their staffs, government officials, or a legislative body?	V	1			-
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		/	-		
i Other activities?		/			
j Total. Add lines 1c through 1i					500
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		4			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		-			
a If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), o	rsec	tion		
Were substantially all (90% or more) dues received pondeductible by members?				Yes	No
and the second desired thought by the thought by	$\star - \epsilon$		1		
			2	_	
	orior y	ear'?	3		
COmplete if the organization is exempt under coation 504/5//4/ coation 504/5/	/E\ -				
Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes."	(5) 0	react	tion I-A, Iir	ne 3,	is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes."	(5) 0	r sect Part II	tion I-A, Iir	ne 3,	is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts)	(5), or (b) P	react	tion I-A, Iir	ne 3,	is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	(5), o (b) P	r sect	tion I-A, Iir	ne 3,	is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	(5), or (b) P	r sect Part II	tion I-A, Iir	ne 3,	is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total	(5), or (b) P	r sect Part III	tion I-A, Iir	ne 3,	is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	(5), or	r sect Part II	tion I-A, Iir	ie 3,	is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the section 162(e) dues.	(5), or	r sect Part III	tion I-A, Iir	ne 3,	is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of t excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expensions.	(5), or	r sect Part III	tion I-A, Iir	ne 3,	is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of t excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbyin and political expenditure next year?	(5), or (b) F	r sect Part III	tion I-A, Iir	ne 3,	is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of t excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	(5), or (b) F	r sect Part III	tion I-A, Iir	ne 3,	is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of t excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	(5), or (b) F	r sect Part III 1 2a 2b 2c 3	l-A, lir		
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of t excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groundide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groundide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groundide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groundide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groundide the descriptions)	(5), or (b) F	r sect Part III 1 2a 2b 2c 3	l-A, lir		
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Part IV	Supplemental Information	(continued)

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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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name	of the organization		Employer identification number
	Law Center of NY		14-1792819
000	ort I Organizations Maintaining Donor Adv	ised Funds or Other Similar Fund	The state of the s
	Complete if the organization answered "	Yes" on Form 990 Part IV line 6	of Accounts.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	N/A	
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		d in donor advised
	funds are the organization's property, subject to the	organization's exclusive legal control?	? Yes 🗆 No
6	Did the organization inform all grantees, donors, ar	nd donor advisors in writing that grant	funds can be used
	only for charitable purposes and not for the benefit	t of the donor or donor advisor, or for	any other purpose
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	conferring impermissible private benefit?		Yes 🗌 No
Рa	Conservation Easements.		
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the o		
	Preservation of land for public use (for example, recrea	ation or education)	a historically important land area
	Protection of natural habitat	□ Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held	d a qualified conservation contribution	in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
a			
b	Total acreage restricted by conservation easements		. 2b
C	Number of conservation easements on a certified his	storic structure included in (a)	. 2c
d	Number of conservation easements included in (c		
_			
3	Number of conservation easements modified, transf	erred, released, extinguished, or termi	nated by the organization during the
4	tax year ►	ation and an article and the	
5	Does the organization have a written policy rega	rding the posiedic monitories income	aki baadiiaa af
	violations, and enforcement of the conservation ease	ements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecti	ng, handling of violations, and enforcing o	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting,	handling of violations, and enforcing co	onservation easements during the year
	▶\$	3	
В	Does each conservation easement reported on line 2(d) above satisfy the requirements of se	ection 170(b)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports con	nservation easements in its revenue ar	nd expense statement and
	balance sheet, and include, if applicable, the text of t	he footnote to the organization's finan-	cial statements that describes the
	organization's accounting for conservation easement	S.	
art		of Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Ye	es" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB	ASC 958, not to report in its revenue	statement and balance sheet works
	of art, historical treasures, or other similar assets h	eld for public exhibition, education, of	or research in furtherance of public
	service, provide in Part XIII the text of the footnote to	its financial statements that describes	these items.
b	If the organization elected, as permitted under FASB art, historical treasures, or other similar assets held for	ASC 958, to report in its revenue sta	itement and balance sheet works of
	provide the following amounts relating to these items	:	aron in furtherance of public service,
	(i) Revenue included on Form 990, Part VIII, line 1		► ¢ NI/A
	(ii) Assets included in Form 990, Part X		
)	If the organization received or held works of and h	intorinal transumanthi'	Ψ
	If the organization received or held works of art, hi following amounts required to be reported under FAS	B ASC 958 relating to those items:	ssets for financial gain, provide the
а	Revenue included on Form 990, Part VIII, line 1	5 7.50 550 relating to triese items:	\$
b	Assets included in Form 990, Part X		> \$

THE REAL PROPERTY.	art III Organizations Maintainin	a Callactions o	f Art Lliat	la ria a I	Terrore	O4h C''l A	Page 2
3		, accession, and	other recor	ds, che	ck any of the foll	owing that make s	ignificant use of its
	Public exhibition	<i>)</i> .	d [☐ Loar	or exchange pro	gram	
1	Scholarly research						
(Preservation for future generation						
4	Provide a description of the organiza						
5	During the year, did the organization assets to be sold to raise funds rather	er than to be main	donations tained as pa	of art, art of th	historical treasu e organization's	res, or other simila collection?	Yes No
Pa	TEN Escrow and Custodial Arr	angements.			*		
	Complete if the organization	n answered "Yes	s" on Form	1 990,	Part IV, line 9, c	r reported an am	ount on Form
	990, Part X, line 21.					-	
1a	Is the organization an agent, trustee included on Form 990, Part X?	e, custodian or ot	her interme	ediary f	or contributions	or other assets no	t Ov Ov
b	If "Yes," explain the arrangement in F	Part XIII and comp	lete the follo	 owina t	ahla		☐ Yes ☐ No
	, , , , , , , , , , , , , , , , , , , ,	arra domp	icto tric roin	ownig (able.	I An	nount
С					1	С	N/A
d	Additions during the year				1	d	
е	Distributions during the year		* * * *		1	е	
f	Ending balance				[1	f	
2a	Did the organization include an amount	nt on Form 990, P	art X, line 2	1, for e	scrow or custodi	al account liability?	☐ Yes ☐ No
b	If "Yes," explain the arrangement in P Endowment Funds.	art XIII. Check her	e if the exp	lanatio	n has been provid	led on Part XIII .	🗆
اعما	The state of the s	anamarad "Va-	"	200 5	2		
	Complete if the organization	(a) Current year	(b) Prior			T	
1a	Beginning of year balance	N/A	(b) Prior	year	(c) Two years back	(d) Three years back	(e) Four years back
b	Contributions	IVA				-	
С	Net investment earnings, gains, and				· · · · · · · · · · · · · · · · · · ·		
	losses						
d	-						
е	Other expenditures for facilities and						*
	programs						
f	Administrative expenses						
g	End of year balance [
2	Provide the estimated percentage of the	ne current year en	d balance (line 1g,	column (a)) held	as:	
a	Board designated or quasi-endowmen	t >	%				
b	Permanent endowment ▶	%					
С	Term endowment ▶ %						
	The percentages on lines 2a, 2b, and 2						
3a	Are there endowment funds not in the organization by:						Yes No
	(i) Unrelated organizations						3a(i)
	(ii) Related organizations						3a(ii)
b	If "Yes" on line 3a(ii), are the related org	ganizations listed	as required	on Scl	nedule R?		3b
4	Describe in Part XIII the intended uses	of the organization	n's endowr	nent fu	nds.		

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land				
b	Buildings				
	Leasehold improvements		6544		6544
d	Equipment		11842	4147	7695
е	Other				
otal.	Add lines 1a through 1e. (Column (d) must	equal Form 990, Part	X, column (B), line 10c	:.)	14239

Part VII	Investments – Other Securities. Complete if the organization answered "Yes" on For	m 990 Part IV I	ine 11b. See Forr	n 990. Part X. line 12.
-	(a) Description of security or category (including name of security)	(b) Book value	(c) Me	ethod of valuation: d-of-year market value
(1) Financia	I derivatives		N/A	
A STATE OF THE STA	neld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(G) (H)				
*************	mn (b) must equal Form 990, Part X, col. (B) line 12.) . ▶			
Part VIII	Investments - Program Related.			
	Complete if the organization answered "Yes" on Form	m 990, Part IV, li	ne 11c. See Form	990, Part X, line 13.
	(a) Description of investment	(b) Scok value	(c) Me	thod of valuation: d-of-year market value
				1-01-year market value
(1)			N/A	
(2)				
(3)				•
(4)				
(6)				
(7)				
(8)				
(9)	,	-		
Total. (Colur	nn (b) must equal Form 990, Part X, col. (B) line 13.) . 🕨			
Part IX:	Other Assets.			
	Complete if the organization answered "Yes" on Form	n 990, Part IV, Iir	ne 11d. See Form	
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum				
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on Form	n 990, Part IV, Iir	ne 11e or 11f. Se	e Form 990, Part X,
	line 25.			
1.	(a) Description of liability			(b) Book value
(1) Federal inc	come taxes			N/A
(2)				
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line 25.)			
	uncertain tax positions. In Part XIII, provide the text of the footnot			ents that reports the
organization's	liability for uncertain tax positions under FASB ASC 740. Check	here if the text of th	e footnote has been	provided in Part XIII .

Pa	Reconciliation of Revenue per Audited Financial Statements With Revenue per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	Return.
1	Total revenue, gains, and other support per audited financial statements	1000000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1280855
a	Networklined editor (Inc.)	
b	Donated applies and use of facility	
c	Perceveries of prior year greats	.
	Recoveries of prior year grants	.
d	Other (Describe in Part XIII.)	
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII.)	
C	Add lines 4a and 4b	4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 1280855
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses pe	- Potum
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	r neturn.
1	Intal expenses and losses per guidited figure interest.	
2	Amounts included as lies 1 but and as 5	1 1256166
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a	Donated services and use of facilities	1
Ь	Prior year adjustments	
С	Other losses	
d	Other (Describe in Part XIII.)	
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3 .
а	nvestment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII.)	
c	Add lines 4a and 4b	
		4c
-	otal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 1256166
2; Part .	the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; (I, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional info	ormation.
	,	

Schedule D (Fo		Page 5
Part XIII	Supplemental Information (continued)	
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	•••••••••••••••••••••••••••••••••••••••	
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SCHEDULE L

Transactions With Interested Persons

(Form 990 or 990-EZ) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2019

	nal Revenue Service	► Go	to www.irs.gov	/Form	990 for ins	tructions an	od the la	test information.				upen Inspe	TO PL ction	iblic
Name	e of the organization								oyer id	entifica	ation n	umber		
RU	RAL LAW CENTER O									14	-1792	819		
Pa	Excess Ber Complete if	nefit Transaction the organization	ons (section 50 n answered "Y	01(c)(3 'es" o	3), section on Form 9	501(c)(4) 90, Part IV	, and s	section 501(c)(29 25a or 25b, or Fo) orga orm 99	nizati 30-EZ	ons o	only). t V, lin	e 40t).
1	(a) Name of disqualifie		(b) Relationship									•	T	rrected
	(a) Traine or disqualine	so person			nization	•		(c) Description	on of tra	ansactio	on		Yes	No
(1)	N/A					DIVOW BLOOKS (NOV.)						covered to the second		
(2)			_											
(3)														
(4)														
(5)	-													
(6)														
2	Enter the amount under section 495	of tax incurre	d by the orga	inizati	ion mana	gers or d	isquali	fied persons du	uring 1	the ye	ear			
2		0									> ;	\$		
3	Enter the amount	of tax, if any, or	i line 2, above	, reim	bursed by	y the orga	nizatio	on			> :	\$		
Par	III I amenda am	1/	<u></u>											
Lett		d/or From Inter	rested Person	1S.	Eorm 00	0 E7 Dad	6 1 / 1: a	e 38a or Form 9	00 0	157	Ľ C			
	organization	reported an am	ount on Form	990. I	Part X. lin	e 5 6 or 2	t V, IIN 22	e 38a or Form 9	90, Pa	art IV,	line 2	b; or	if the	
				Т		1			-		Т			
(a) N	ame of interested person	(b) Relationship with organization	(c) Purpose of loan		Loan to or	(e) Orig		(f) Balance due	(g) In (deiault?				
		With organization	loan		rom the anization?	principal a	mount					pard or nittee?	agreei	ment?
				To	From				-	Γ		_		
(1)	N/A			10	Hom				Yes	No	Yes	No	Yes	No
(2)									-			-		-
(3)														-
(4)						1000			<u> </u>					
(5)														
(6)							-							_
(7)														3
(8)														
(9)														
(10)														
Total							. ▶	\$						
Part i	Ⅲ Grants or Ass	sistance Benef e organization a	iting Intereste	ed Pe	rsons							-		
/-1.5	the state of the s			7			1	•						
(a) i	Name of interested person		hip between interended the organization		(c) Amount	of assistance	(0	d) Type of assistance	9	(e)	Purpo	se of as	sistanc	e:e
(1) N	N/A													
(2)														
(3)														
(4)							-							
(5)										-				
(6)	_													
(7)				_					-					
(8)					7					_				
(9)														

(10)

(a) Name of interested person		(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing organization revenues?	
					Yes	No
1)	ALLEN PELLERIN CONSTRUCTION	HUSBAND OF FISCAL	1300	USED FURNITURE		/
2)		DIRECTOR				
	HEIDI DENNIS	EXECUTIVE DIRECTOR	6100	DESK, FILE CABINET,	-	/
4) 5)				BOOKSHELVES, COMPUTER	1	
3) 6)				CHAIRS		
_	TRACY COLVARD-PELLERIN	FIGURE DIDECTOR				
3)	TRACT COLVARD-FELLERIN	FISCAL DIRECTOR	2100	FILE CABINET, DESK, CHAIRS		/
9)					-	
ý)					+ -	_
art	V. Supplemental Information.					
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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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization	Employer identification number
RURAL LAW CENTER OF NEW YORK, INC.	Employer identification number
Total, III.	14-1792819
FORM 990 SECTION A LINE 8a and 8b. Minutes documented contemporaneously at meetings.	
	X
FORM 990 SECTION B LINE 11a Reviewed at Board Meeting	
FORM 990 SECTION B, LINE 12c: Periodically reviewed at Board meetings.	
FORM 990 PART VI SECTION B LINE 15 Exectutive director's salary included in review by independent persons and com	nparability data
FORM 990 PART VI SECTION C LINE 19: Upon request.	
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