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DLN: 93493013016507

OMB No 1545-0047

Department of the Departure Treasury

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

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

- ▶ Information about Form 990 and its instructions is at <u>www IRS gov/foim990</u>

Open to Public Inspection

A Fo	or the	2015 calendar year, or tax year beginning 06-01-2015 , and ending 05-31-2016	3		
B Che	eck if ap	oplicable C Name of organization Women's Bar Association of the State of	D Emplo	yer iden	tification number
☐ Ac	ldress cl		13-30	76621	
	ame cha Itial retu	Doing business as			
FI			E Telepho	ne numb	per
	termina'	■ PO Box 936	e	362-4	
	iended i	pending City or town, state or province, country, and ZIP or foreign postal code	(212)	JUZ T	11 3
I YPI	plication	New York, NY 100240546	G Gross r	eceıpts \$	1,328,562
		F Name and address of principal officer	H(a) Is this a group	return	for
		Jacqueline P Flug ESQ PO Box 936	subordinates?		☐ Yes 🗸
		New York, NY 100240546	No H(b) Are all subordi	nates	□Yes □ No
r Ta	x-exem	pt status	included?		
y W	ebsit e	:▶ www wbasny org	H(c) Group exempt		(see instructions) nber ▶
K Forr	n of org	anization	L Year of formation 19		State of legal domicile NY
D-	rt I	Cummany			
Pa		Summary lefly describe the organization's mission or most significant activities			
	l .	COMOTE THE ADVANCEMENT OF THE STATUS OF WOMEN IN SOCIETY AN	D OF WOMEN IN THE	LEGA	L PROFESSION
Ce					
Ē					
Governance	2 C	heck this box $\blacktriangleright \ \ \ \ \ \ \ \ \ \$	fmore than 25% of its	net as	sets
		washan af waking manashana af kha mawanan hadi. (Dank VII. lina da)	1	a 1	0.0
Activities &		umber of voting members of the governing body (Part VI, line 1a)		3	99 99
∄ E		umber of independent voting members of the governing body (Part VI, line 1b) otal number of individuals employed in calendar year 2015 (Part V, line 2a).		5	0
<u>}</u>		otal number of volunteers (estimate if necessary)		6	100
Ř		otal unrelated business revenue from Part VIII, column (C), line 12		7a	0
		et unrelated business taxable income from Form 990-T, line 34		7b	
			Prior Year	<u> </u>	Current Year
	8	Contributions and grants (Part VIII, line 1h)	457,3	338	577,398
Ę	9	Program service revenue (Part VIII, line 2g)	728,3	880	700,764
Ravenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	13,6	548	20,657
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-4,6	67	12,216
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,194,6	599	1,311,035
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,0	000	2,000
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0	0
S.	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines $5-10$)		0	0
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0	0
œ.	ь	Total fundraising expenses (Part IX, column (D), line 25) ▶0			
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,126,	755	1,292,587
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,128,7	755	1,294,587
	19	Revenue less expenses Subtract line 18 from line 12	. 65,9	944	16,448
Net Assets or Fund Balances			Beginning of Current	rear	End of Year
sset	20	Total assets (Part X, line 16)	1,276,4	174	1,279,502
A P	21	Total liabilities (Part X, line 26)		41	7,710
žį	22	Net assets or fund balances Subtract line 21 from line 20	1,276,4	133	1,271,792
	t II	Signature Block			
my kr	nowled	lties of perjury, I declare that I have examined this return, in ge and belief, it is true, correct, and complete Declaration o s any knowledge			
		, -9-			
		*** ** *			

	**	* * *					
Sign							
Here	<u>Ја</u>	cqueline P Flug Esq President	P Flug Esq President				
	Ту	pe or print name and title					
Daid		Print/Type preparer's name F Paul Kiniry	Preparer's signature F Paul Kiniry				
Paid Prepare	r	Firm's name Bowers & Company CPA	I N's PLLC				
-		Firm's address ▶ 120 Madison St - 1700 AXA Tower II					
Use Onl	y	Syracuse, NY 13202					

May the IRS discuss this return with the preparer shown above? (see in

For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2015)			Page 3
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III "	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 💆	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
	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	11 c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> 2	11 d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12 a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV	Checklist of Required Schedules (continued)
21	Did th	ne organization report more than \$5,000 of grants or other

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part

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,"

IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III

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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family

22

23

24a

24b

24c

24d

25a

25b

26

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28a

28b

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35a

35b

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Yes

Form 990 (2015)

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Νo

Νo

a	rt IV Checklist of Required Schedules (continued)	
	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 Yes	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 💆 📘	İ

ŒЦ	ULV	Checklist	or Require	a Scheau	ies (cont	mueu)	
1	Did th	e organızatıon	report more	than \$5,000	of grants	or other	assı

Part V	Statements	Regarding	Other	IRS Filing	s and	Tax	Compliance
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Pai	rt V	Statements Regarding Other IRS Filings and Tax Compliance Chack if Schodula O contains a response or note to any line in this Part V			
		Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a	0	1 63	110
			0		
			<u> </u>		
С		ne organization comply with backup withholding rules for reportable payments to vendors and reportable organization grounds to prize winners?	1c		
2a	_	the number of employees reported on Form W-3, Transmittal of Wage and			
	Tax S	Statements, filed for the calendar year ending with or within the year covered			
_	,	s return	9		
b		east one is reported on line 2a, did the organization file all required federal employment tax returns? If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
3a		ne organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
		es," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		110
		y time during the calendar year, did the organization have an interest in, or a signature or other authority			
		a financial account in a foreign country (such as a bank account, securities account, or other financial			
	accou	unt)?	4a		No
b		es," enter the name of the foreign country 🕨			
	See ir	nstructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
- -	,				NI -
		the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
		ny taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If"Ye	es," to line 5a or 5b, did the organization file Form 8886-T?	5c		
62	Does	the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a	-	No
O.		itation solicit any contributions that were not tax deductible as charitable contributions?			110
b		es," did the organization include with every solicitation an express statement that such contributions or gift			
		not tax deductible?	6b		
7	_	nizations that may receive deductible contributions under section 170(c).			
а		ne organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ces provided to the payor?	7a		
b		es," did the organization notify the donor of the value of the goods or services provided?	7b		
		ne organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
		orm 8282?	7 c		
d	If"Ye	es," indicate the number of Forms 8282 filed during the year			
٩	Did th	ne organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
Ū	Dia ti	to digamization receive any rando, an early of managery, to pay premiants on a personal periodic contract	7e		
f	Did th	ne organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g		organization received a contribution of qualified intellectual property, did the organization file Form 8899 a			
L	requir		7g		
п		organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 1098-C?	7h		
8		soring organizations maintaining donor advised funds.			
		donor advised fund maintained by the sponsoring organization have excess business holdings at any time githe year?			
			8		
		ne sponsoring organization make any taxable distributions under section 4966?	9a		
		ne sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10		on 501(c)(7) organizations. Enter			
		tion fees and capital contributions included on Part VIII, line 12 10a s receipts, included on Form 990, Part VIII, line 12, for public use of club	\dashv \mid		
D	Gross facilit			l	
11	Section	on 501(c)(12) organizations. Enter			
а	Gross	s income from members or shareholders			
b		s income from other sources (Do not net amounts due or paid to other sources			
	again:	st amounts due or received from them)	\dashv \mid		
12a	Section	on 4947(a)(1) non-exempt charitable trusts.Is the organization filing Form 990 in lieu of Form 1041?	12a		
b		es," enter the amount of tax-exempt interest received or accrued during the			
12	year Section		\dashv \mid		
13	Jectil	on 501(c)(29) qualified nonprofit health insurance issuers.			
а		e organization licensed to issue qualified health plans in more than one state? Note. See the instructions fol			
		ional information the organization must report on Schedule O	13a		
b		the amount of reserves the organization is required to maintain by the states of the organization is licensed to issue qualified health plans			
c		the amount of reserves on hand	\dashv \mid		
		ne organization receive any payments for indoor tanning services during the tax year?	_ 14a		No
		es," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		.,,
		, I I I I I I I I I I I I I I I I I I I			

orm	990 (2015)					Page
Par	For each "Yes" response to lines 2 through 7b below, and for a "No describe the circumstances, processes, or changes in Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See ii	nstructions.		Ob belo	[
Se	ection A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	99			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1 b	99			
2	Did any officer, director, trustee, or key employee have a family relationship or a buother officer, director, trustee, or key employee?		relationship with any	2		No
3	Did the organization delegate control over management duties customarily perform supervision of officers, directors or trustees, or key employees to a management co	,		3		No
4	Did the organization make any significant changes to its governing documents sinc filed?	e the p	orior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the o	organız	ation's assets? .	5		No
6	Did the organization have members or stockholders?			6		No
7a	Did the organization have members, stockholders, or other persons who had the pormore members of the governing body?		' '	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approvor persons other than the governing body?	al by) ı	members, stockholders,	7b		No
	Did the examination contemporary of the deciment the most one held or unitten act		adartakan durung tha			

5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		NO
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Re	eveni	ue Cod	e.)

Yes No **10a** Did the organization have local chapters, branches, or affiliates? . 10a Yes **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b Yes 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 Yes **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Yes **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12h Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe **12**c Yes 13 Did the organization have a written whistleblower policy? 13 Nο Did the organization have a written document retention and destruction policy? . . . 14 Νo 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? a The organization's CEO, Executive Director, or top management official . . . 15a Nο 15b Nο If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a Νo **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
 - Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

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

 Linda A Chiaverini PO Box 936 New York, NY 100240546 (212) 362-4445

16b

Part VII

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) ANDREA F COMPOSTO	5 00								_	
President				×				0	0	(
(2) JACQUELINE P FLUG President - Elect	5 00			х				0	0	(
(3) AMY BALDWIN LITTMAN Vice President	5 00			х				0	0	(
(4) AMY SALTZMAN Vice President	5 00			х				0	0	(
(5) GRETA K KOLCON VIce PResident	5 00			х				0	0	(
(6) ANNE E JOYNT Corresponding Secretary	5 00			×				0	0	(
(7) DEIRDRE HAY Recording Secretary	5 00			х				0	0	(
(8) LEYLA KIOSSE Treasurer	5 00			х				0	0	(
(9) IRENE V VILLACCI Immediate Past President	5 00			х				0	0	(

art VII	Section A.	Officers,	Directors,	Trustees,	Key Employees,	and Highest	Compensated Employees (cor	ntınued)

											Г
	(A) Name and Title	(B) Average hours per week (list any hours	more t	(C) sition (do not check than one box, unless on is both an officer a director/trustee)			unless officer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
1b c	Sub-Total	ts to Part VII, S	ection A	· .	•		. •				1
d	Total (add lines 1b and 1c) .						>		0	0	0
2	Total number of individuals (ir \$100,000 of reportable comp						d abov	e) wl	no received more th	aan	

- 3
 - Did the organization list any former officer, director or trustee, key employee, or highest compensated employee
 - on line 1a? If "Yes," complete Schedule J for such individual .
 - For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the
 - organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such ındıvıdual .
 - Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person . . .
 - 5

Section B. Independent Contractors

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

Name and business address	Description of services	Compensation

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0

Yes

3

4

No

Νo

Νo

Νo

Form 99		15)						Page 9
Part V	Ш	Statement o						_
		Check If Schedu	ile O contains a respon	se or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
v 8	1 a	Federated camp	paigns 1a					
Grants smounts	ь	Membership du	es 1b	485,172				
5 1	с	Fundraising eve	ents 1c	92,226				
ifts. ar A	d	Related organiz	ations 1d					
⊒ E	e	Government grants	s (contributions) 1e					
ons Sil	f	All other contribution	ons, gifts, grants, and 1f					
Contributions, Giffs, Grants and Other Similar Amounts		similar amounts no						
	g	1a-1f \$	ons included in lines					
S G	h	Total. Add lines	3 1a-1f		577,398			
<u>ə</u>				Business Code				
4.5	2a	Installation Dinner		611430	469,419	469,419		
á	b	Convention		611430	95,133	95,133		
AC C	C	CLE		611430	34,216	34,216		
3	d	Other Program Inco Judges Reception	ome	900099	23,540	23,540		
ram	e f		ım service revenue	611430	23,200 55,256	23,200 55,256		
Program Service Revenue						33,230		
	д 3		s 2a-2f ome (including dividence		700,764			
			ar amounts)		20,657			20,657
	4		tment of tax-exempt bond p	· · ·	81			81
	5	Royalties	(ı) Real	(II) Personal	01			61
	6a	Gross rents	(I) Keal	(II) I CISOIIai				
	ь	Less rental						
	_	expenses Rental income						
	С	or (loss)						
	d	Net rental incor	ne or (loss) (I) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) o thei				
	b c	Less cost or other basis and sales expenses Gain or (loss)						
	d •		s)	· · · · >				
Other Revenue	, oa	Ψ	uding ,226 reported on line 1c)					
her	L .	Less direction	a penses b	29,662				
ō	l		loss) from fundraising e	17,527 events >	12,135			12,135
			rom gaming activities	·				
	ь	Less directex	penses b					
	с	Net income or (loss) from gaming activ	rities				
	10a	Gross sales of	inventory, less	-				
		returns and allo	wances . a					
	b c	Less cost of go	oods sold . . b し loss) from sales of inve	ntory				
		Miscellaneous		Business Code				
	11a							
	b							
	С							
	d	All other revenu	L	_				
	e		3 11a-11d	•				
	12	Total revenue.	See Instructions	•	1,311,035	700,764	0	32,873

Part IX Statement of Functional Expenses

Section 501(c)(3) and $501(c)(4$) organizations mus	t complete all columns	All other organizations	must complete column (A)

on 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	

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and				
	domestic governments See Part IV, line 21	2,000	2,000		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15				
4	and 16				
5	Compensation of current officers, directors, trustees, and				
3	key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management	224,081	152,375	71,706	
b	Legal				
С	Accounting	12,000		12,000	
d	Lobbying	7,338	7,338		
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	2,425		2,425	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	17,122	17,122		
12	Advertising and promotion	36,684	21,431	15,253	
13	Office expenses	49,992	24,879	25,113	
14	Information technology				
15	Royalties				
16	Occupancy	4,208		4,208	
17	Travel	47,197	47,197		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	191,164	175,094	16,070	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	24,368	9,747	14,621	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Installation Dinner	426,180	426,180		
b	Newsletter	48,935	48,935		
c	Judges Reception	46,500	46,500		
d	Donations & Contributio	44,221	44,221		
е	All other expenses	110,172	93,448	16,724	
25	Total functional expenses. Add lines 1 through 24e	1,294,587	1,116,467	178,120	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

OIIII :	990 (2	2013)				Page II
Par	t X	Balance Sheet	h D+ V			_
		Check if Schedule O contains a response or note to any line in t	nis Part X	(A)	· ·	(B)
	1	Cash-non-interest-bearing		Beginning of year 636.859	1	End of year 614.508
	2	Savings and temporary cash investments		361.996	2	391.609
	3			301,990	3	391,009
	4	Pledges and grants receivable, net			4	
	5	Accounts receivable, net			-	
	5	trustees, key employees, and highest compensated employee II of				
		Schedule L			5	
Assets	6	Loans and other receivables from other disqualified persons (section 4958(f)(1)), persons described in section 4958(c)(3) contributing employers and sponsoring organizations of section voluntary employees' beneficiary organizations (see instruction Part II of Schedule L	(B), and on 501(c)(9)		6	
A Si	7	Notes and loans receivable, net			7	
	8	·			8	
		Inventories for sale or use			9	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a			
	ь	Less accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11		277,619	12	273,385
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV , line 11			15	
	16	Total assets.Add lines 1 through 15 (must equal line 34) .		1,276,474	16	1,279,502
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Sch	nedule D		21	
lities	22	Loans and other payables to current and former officers, direc key employees, highest compensated employees, and disqua				
<u></u>		persons Complete Part II of Schedule L			22	
Liabi	23	Secured mortgages and notes payable to unrelated third parti	es		23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to reland other liabilities not included on lines 17-24) Complete Part X of Schedule D	ated third parties,			
				41	25	7,710
	26	Total liabilities. Add lines 17 through 25		41	26	7,710
Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ lines 27 through 29, and lines 33 and 34.				
lan I	27	Unrestricted net assets		998,814	27	998,407
ဋ	28	Temporarily restricted net assets		277,619	28	273,385
덛	29	Permanently restricted net assets		, 11	29	,
		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.	here ▶ ┌ and			
S)	30	Capital stock or trust principal, or current funds			30	
Net Assets or	31	Paid-in or capital surplus, or land, building or equipment fund			31	
As	32	Retained earnings, endowment, accumulated income, or other			32	
Vet	33	Total net assets or fund balances		1,276,433	33	1,271,792
_	34	Total liabilities and net assets/fund balances		1,276,474	34	1,279,502
	1			.,2.0,.,1	٠. ا	Form 990 (2015)

2a

2b

2c

3a

3b

Νo

Νo

Nο

Form 990 (2015)

If the organization changed its method of accounting from a prior year or checked "Other," explain in

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

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?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in

Both consolidated and separate basis

Both consolidated and separate basis

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Consolidated basis

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

DLN: 93493013016507

Employer identification number

13-3076621

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

Women's Bar Association of the State of

Service

New York

Part I-A

Political Campaign and Lobbying Activities

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

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

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

www.irs.gov/form990.

2015
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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

• Section 501(c)(4), (5), or (6) organizations Complete Part III

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

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

-	Flovide a description of the of	gamzacion's direct and munect point	car campaign act	.ivities iii rait Iv	
2	Political expenditures			>	\$
3	Volunteer hours				-
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization un	der section 4955	5 •	\$
2	Enter the amount of any excise	e tax incurred by organization manag	jers under sectio	n 4955 >	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 472	20 for this year?		☐ Yes ☐ No
4 a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under	section 501(c), except section 50	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ection 527 exem	pt function activities 🕨	\$
2	9	organization's funds contributed to o	ther organization	s for section 527	
_	exempt function activities				\$
3		tures Add lines 1 and 2 Enter here	and on Form 112	10-POL, line 1/b ►	\$
4	Did the filing organization file F	orm 1120-POL for this year?			Yes No
	amount of political contribution separate segregated fund or a	For each organization listed, enter the ns received that were promptly and of political action committee (PAC) If	lirectly delivered	to a separate political orga	nızatıon, such as a
	(a) Name	(b) A ddress	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2					
3					
4					
5					
6					
For F	Paperwork Reduction Act Notice, se	 ee the instructions for Form 990 or 990	D-EZ.		ı Form 990 or 990-EZ) 2015

	art II-	A	Complete if the organization is exempt under section $501(c)(3)$ and file under section $501(h)$.	ed Form 5768	(election
	Check	•	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated groexpenses, and share of excess lobbying expenditures)	up member's name	e, address, EIN
i	Check	•	if the filing organization checked box A and "limited control" provisions apply		
			Limite on Lobbying Evnanditures	(a) Filing	(b) Affiliated

	Limits on Lobb	box A and "limited control" provisions apply bying Expenditures means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a b	Total lobbying expenditures to influence public lobbying) Total lobbying expenditures to influence a legi	, ,		
c	Total lobbying expenditures (add lines 1a and	1 b)		
d	Other exempt purpose expenditures			
e	Total exempt purpose expenditures (add lines	1c and 1d)		
f	Lobbying nontaxable amount Enter the amoun	t from the following table in both columns		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of	line 1f)		
h	Subtract line 1g from line 1a If zero or less, en	nter - 0 -		
i	Subtract line 1f from line 1c If zero or less, en	ter -0-		
j	If there is an amount other than zero on either reporting section 4911 tax for this year?	line 1h or line 1i, did the organization file Form 472		
		☐ Y e s	├ No	

columns below. See the separate instructions for lines 2a through 2f.) **Lobbying Expenditures During 4-Year Averaging Period** Calendar year (or fiscal year **(b)**2013 (d)2015 (a)2012 (c)2014 (e) Total beginning in) Lobbying nontaxable amount 2a Lobbying ceiling amount (150% of line 2a, column(e)) c Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2015				Ρa	age 3
Part II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	тои				
or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)	
ctivity	Yes	No		moun	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	165				
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements?			-		
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
j Total Add lines 1c through 1i					
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d 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 $501(c)(6)$.	501 (c)(5),	or s	ectio	n
301(0)(0).				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		ſ	1		No
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		F	2		Νο
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		ŀ	3		Νο
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."	No" (t III-	·A,
1 Dues, assessments and similar amounts from members	1			485	5,172
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		ļ		_	7 220
a Current year	2a			•	7,338
b Carryover from last year	2b				
c Total	2c			7	7,338
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				0
5 Taxable amount of lobbying and political expenditures (see instructions)	5			-	7,338
Part IV Supplemental Information	1				

Part III-B Line 5

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B. line 1. Also, complete this part for any additional information

2 (see histiactions), and Farth-B, file 1. Also, complete this part for any additional information						
Return Reference	Explanation					

Form 990-T has been filed and the tax has been paid

DLN: 93493013016507

OMB No 1545-0047

SCHEDULE D

Department of the

Treasury

(Form 990)

Supplemental Financial Statements

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

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

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Na Wo	nar Revenue Service Ime of the organization omen's Bar Association of the State of w York			oyer identification	number	_
Pā		r Advised Funds or Other Similar F		or Accounts.		-
	Complete if the organization answere	ed "Yes" on Form 990, Part IV, line 6.				_
1	Total number at end of year	(a) Donor advised funds	(b)	Funds and other acc	ounts	_
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 a funds are the organization's property, subject to the	<u> </u>	nor advis	_	res □ N	0
6	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?			r purpose	· ∕es	0
Pa	rt III Conservation Easements. Comple	ete if the organization answered "Yes"	on Forn	n 990, Part IV, lın	e 7.	
1	Purpose(s) of conservation easements held by th	ne organization (check all that apply)				
	Preservation of land for public use (e.g., recreeducation)		an histor	rically important land	d area	
	Protection of natural habitat	·		d historic structure	i alea	
	Preservation of open space	, reservation or c		a motorre otractare		
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conservation contribution in	the form	of a conservation		
	·			Held at the End	of the Year	
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easeme	ents	2b			
C	Number of conservation easements on a certified	2 c			_	
d	Number of conservation easements included in (o historic structure listed in the National Register	c) acquired after 8/17/06, and not on a	2d			
3	Number of conservation easements modified, trai	nsferred, released, extinguished, or terminat	ed by the	e organization durin	g the	
	tax year ▶					
4	Number of states where property subject to cons	ervation easement is located >				
5	Does the organization have a written policy regar violations, and enforcement of the conservation e		ndling of	☐ Yes	☐ No	
6	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of violations, and enforc	ing cons	servation easements	during the	
	<u> </u>					
7	A mount of expenses incurred in monitoring, insperience.	ecting, handling of violations, and enforcing (conserva	ition easements dur	ing the year	
В	Does each conservation easement reported on III (B)(I) and section $170(h)(4)(B)(II)^{7}$	ne 2(d) above satisfy the requirements of se	ction 17	0(h)(4) Yes	┌ No	
9	In Part XIII, describe how the organization repor balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financia		•		
aı		ctions of Art, Historical Treasures, ed "Yes" on Form 990, Part IV, line 8.	or Oth	ner Similar Asse	ets.	
1a	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footi	assets held for public exhibition, education,	, or resea	arch in furtherance o		
b						
((i) Revenue included on Form 990, Part VIII, line 1	1	▶ \$		_	
	ii) Assets included in Form 990, Part X					
2	If the organization received or held works of art, he following amounts required to be reported under S		for financ			

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

	edule D (Form 990) 2015					Page 2
Par	Organizations Maintaining (continued)	Collections of A	Art, Historical	Treasures, or (Other Similar A	ssets
3	Using the organization's acquisition, according to the collection items (check all that apply)	ession, and other re	cords, check any o	of the following that	are a significant us	e of its
а	Public exhibition d Loan or exchange programs					
b	Scholarly research		e	her		
c	Preservation for future generations					
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII					
5	During the year, did the organization soli assets to be sold to raise funds rather th					s No
Pa	rt IV Escrow and Custodial Arra Complete if the organization a Part X, line 21.		n Form 990, Par	t IV, line 9, or re	ported an amoun	t on Form 990,
1a	Is the organization an agent, trustee, cus included on Form 990, Part X?	stodian or other inte	rmediary for contri	butions or other ass	sets not	s
b	If "Yes," explain the arrangement in P	art XIII and comple	te the following tab	ole	Am	ount
c	Beginning balance	-		10		
d	Additions during the year			1d		
е	Distributions during the year			1e		
f	Ending balance			1f		
2a	Did the organization include an amount o	n Form 990, Part X,	line 21, for escrov	w or custodial accou	int liability? Tye s	s No
b	If "Yes," explain the arrangement in Part	XIII Check here if	the explanation ha	as been provided in	Part XIII	
Pa	rt V Endowment Funds. Comple	te if the organiza	tion answered "`	Yes" to Form 990	, Part IV, line 10.	ı
		(a)Current year	(b) Prior year	b (c) Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance					
b	Contributions					
c	Net investment earnings, gains, and losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance					
2	Provide the estimated percentage of the	current year end bal	ance (line 1g, coli	ımn (a)) held as		
а	Board designated or quasi-endowment >					
b	Permanent endowment ►					
c						
За	Are there endowment funds not in the pos organization by	ssession of the orga	nızatıon that are h	eld and administere	d for the	Yes No
	(i) unrelated organizations				За	(i)
b	(ii) related organizations If "Yes" on 3a(ii), are the related organiz			 R [?]		(ii) Bb
4	Describe in Part XIII the intended uses		endowment funds			
Pa	rt VI Land, Buildings, and Equip Complete if the organization a		Form 990 Part	IV line 11a See	Form 990 Part V	line 10
	Description of property	answered les to	Cost or otl	her basis (b) ment) Cost or other l	Accumulated	d (d)Book value
1~	Land			(other)		
	Land					
	Leasehold improvements		·. ·			
	Equipment					
	Other					
T -4-	Add lines to through to (Column (d) mus	- t F 000 B-	-t V1 (D) 1	- 10(-)		1

	Investments—Other Securities. (See Form 990, Part X, line 12.	Complete if the org	anızatıon answered 'Yes	on Form 990, Part IV, line 11b.
	(a) Description of security or categor (including name of security)	ory	(b) Book value	(c)Method of valuation Cost or end-of-year market value
	al derivatives -held equity interests			
(3)Other	y Traded Mutual Funds		236,521	F
	/ Traded Equities		36,864	F
(b) Fublicity	7 Fraueu Equities		30,804	'
	nn (b) must equal Form 990, Part X, col (B) line 12)		273,385	
Part VIII	Investments—Program Related. Complete if the organization answer	ed 'Yes' on Form 9	90, Part IV, line 11c. _{See}	e Form 990, Part X, line 13.
	(a) Description of investment		(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Colum	onn (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organiza	tion answered 'Yes' o	n Form 990 Part IV line 1	1d See Form 990 Part X line 15
		scription	mroim 990/raic1v, inc 1	(b) Book value
Total. (Colu	ımn (b) must equal Form 990, Part X, col (B) lin	ne 15)		•
	Other Liabilities. Complete if the o See Form 990, Part X, line 25.			
1.	(a) Description of liability	(b) Book valu	ıe	
Federal inc	ome taxes			
CREDIT CA	ARDS	7	,710	
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 25)	b 7	,710	
	for uncertain tax positions In Part XIII, pro n's liability for uncertain tax positions under			
XIII _				

Schedule D (Form 990) 2015

Pari		venue per Audited Financial Statements With Revenue programme (Yes' on Form 990, Part IV, line 12a.	er R	eturn
1	Total revenue, gains, and other	support per audited financial statements	1	
2	Amounts included on line 1 but	not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) o	n investments 2a		
b	Donated services and use of fa	cilities 2b		
c	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 inclu	ded on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line 12)	5	
<u> </u>	Complete if the organ	penses per Audited Financial Statements With Expenses zation answered 'Yes' on Form 990, Part IV, line 12a. audited financial statements	per 1	Keturn.
2		not on Form 990, Part IX, line 25		
a		cilities 2a		
a b	Prior year adjustments			
c	Other losses			
d				
e			2e	
3	ū		3	
, 1), Part IX, line 25, but not on line 1 :		
a		ded on Form 990, Part VIII, line 7b 4a		
b	•	4b		
c	· · ·		4c	
5		d 4c. (This must equal Form 990, Part I, line 18)	5	
	Total expenses Add lines 3 an	d 4c. (This must equal form 990, Falt 1, fille 10)		
Part	XIII Supplemental Info	ormation		
Part		Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		de any additional
	Return Reference	Explanation		

Schedule D (Form 990) 2015	Page 5	
Part XIII Supplemental Informatio	n (continued)	
Return Reference	Explanation	

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DLN: 93493013016507

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ

OMB No 1545-0047

2015

Open to Public Inspection

nternal Revenue Service	► Information about Sch	nedule G (Form 990 or 9	90-EZ) and its instructions is a	www irs gou	v/form990	Inspection
lame of the organization Vomen's Bar Association Iew York					Employer idea	ntification number
	ng Activities. Comple Z filers are not requir	_		on Form	990, Part IV	, line 17.
1 Indicate whether th	e organization raised fund	ds through any of t	he following activities C	heck all th	nat apply	
a Mail solicitation	ns		e Solicitation of n	on-govern	ment grants	
b Internet and en	Internet and email solicitations f Solicitation of gover			overnment	t grants	
c Phone solicitat	ions		g Special fundrais	ing events	5	
d In-person solic	itations					
	n have a written or oral ag sted in Form 990, Part V					es No
	n highest paid individuals I at least \$5,000 by the o		aisers) pursuant to agree	ements und	der which the fo	undraiser is
(i) Name and address individual or entity (fundraiser		(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(or ret	ount paid to tained by) ser listed in ol (i)	(vi) A mount paid to (or retained by) organization
_		Yes No				
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
otal o		•				
3 List all states in whic registration or licensi	h the organization is regi ing	stered or licensed	to solicit contributions c	r has beer	n notified it is e	exempt from

D TT	Formal value latera	F
Part II	Fundraising	Events

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

		(a)Event #1 Golf Outing	(b) Event #2	(c)O ther events	(d) Total events
		(event type)	(event type)	(total number)	(add col (a) through col (c))
Reverkie	1 Gross receipts	13,469			13,469
	2 Less Contributions	13,469			13,469
	4 Cash prizes				
တ္	6 Rent/facility costs				
Expenses	7 Food and beverages				
ਨੂੰ ਹ	9 Other direct expenses	7,670			7,670
	10 Direct expense summary Add lines 4	through 9 in column (d)		7,670
	11 Net income summary Subtract line 1	0 from line 3, column (c)		5,799
Par	rt III Gaming. Complete if the organization Form 990-EZ, line 6a.	answered "Yes" on F	Form 990, Part IV, line	e 19, or reported mo	re than \$15,000 on
Revernie		(a)Bingo	(b)Pull tabs/Instant bingo/progressive bingo	(c)O ther gaming	(d) Total gaming (add col (a) through col (c))
~ —	1 Gross revenue				
Expenses	2 Cash prizes				
ă	3 Noncash prizes				
red Cired	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	│ Yes%		│ Yes <u>%</u> │ No	
	7 Direct expense summary Add lines 2	2 through 5 ın column (c)		
	8 Net gaming income summary Subtra	ct line 7 from line 1, col	umn (d)	•	
9 a	Enter the state(s) in which the organiza				⊤Yes
b	If "No," explain				
.0a	Were any of the organization's gaming li				
b				•	1 .55 110

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493013016507 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 2015 Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number Women's Bar Association of the State of 13-3076621 New York Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient Part II that received more than \$5,000 Part II can be duplicated if additional space is needed (d) A mount of cash (a) Name and address of **(b)** EIN (c) IRC section (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government (book, FMV, assistance appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2015

Schedule I (Form 990) 2015

programs hosted by the Foundation in support of their mission must be obtained from the Board

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Explanation Return Reference Part I, Line 2 Staff members of this 501(c)(3) organization determine which families have the greatest need and ensure that all donated unwrapped toys and gifts for

children are distributed directly to these parents. Staff supervise the gift distribution to parents at all times Part I, Line 2 The Board oversees all financial activities of the Foundation (a 501(c)(3) organization), and ensures that the appropriate guidelines for grants are being adhered to Grant subcommittees are in place to oversee and vote on grant expenditures, and final approval for expenses related to other events and

Schedule I (Form 990) 2015

Page 2

Additional Data

Software ID: Software Version:

EIN: 13-3076621

Name: Women's Bar Association of the State of

New York

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

i orini 330,3chedule 1, Pai	t II, Grants and	Other Assistant	c to boiliestic org	umzaciona ana b	Cilicatic Governing	.11(3)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOOD SHEPHERD SERVICES 305 7TH AVENUE 9TH FLOOR NEW YORK,NY 10003	13-5598710	501(c)(3)	6,240				TO PROVIDE HOLIDAY TOYS AND GIFTS FOR THE CHILDREN OF INTIMATE PARTNER VIOLENCE SURVIVORS PARTICIPATING IN OUR RESIDENTIAL AND NON- RESIDENTIAL SERVICES WHO CANNOT AFFORD TO PROVIDE THESE THEMSELVES
NEW YORK WOMENS BAR ASSOCIATION FOUNDATION INC PO BOX 2635 NEW YORK,NY 10108	13-3877078	501(c)(3)	8,888				TO ASSIST WITH THE FUNDING OF VARIOUS EVENTS HOSTED BY THE FOUNDATION IN FURTHERANCE OF THE GOALS TO ELIMINATE GENDER BIAS AND OTHER FORMS OF DISCRIMINATION FROM THE LEGAL SYSTEM AND PROFESSION, AND TO PROMOTE SOCIAL AND ECONOMIC EQUALITY, SAFETY, AND WELL-BEING, AS WELL AS ADDRESS UNMET LEGAL NEEDS OF WOMEN AND CHILDREN

Supplemental Information to Form 990 or 990-EZ

13-3076621

2015

Open to Public Inspection

(Form 990 or

Department of the

Internal Revenue

Name of the organization

Women's Bar Association of the State of

990-EZ)

Treasury

Service

New York

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ.

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

990 Schedule O, Supplemental Information

Employer identification number

Return Reference	Explanation
Form 990, Part VI, Section B, line 11	The officers review the return before it is signed
Form 990, Part VI, Section B, line 12c	In connection with any actual or possible conflict of interest, a director, officer, or ke y employee has a duty to disclose the existence of a financial interest and/or related par ty transaction. Prior to the initial election of any Director and annually thereafter, suc h Director shall disclose any actual or possible conflict of interest. Disclosure is accomplished by providing a written description of the facts comprising the actual or possible conflict of interest. An annual disclosure statement is circulated by the Association to a ll persons to whom the conflict of interest policy applies. Written disclosures are filled with the recording secretary and then forwarded to the President. Disclosures are brought to the attention of the Executive Committee by the President at the next meeting. If the President in consultation with the officers believes it warranted, a special meeting of the executive committee is called to discuss any disclosure notice and address its content. If a member of the Association has reasonable cause to believe a Director, Officer, or Key Employee has failed to disclose an actual or possible conflict of interest or related part y transaction, such member shall inform the recording secretary for processing in accordance with association procedures.

990 Schedule O. Supplemental Information Return Reference Explanation Form 990, Part VI, Section C, line The bylaw's are available on the association's wiebsite. Other governing documents available upon

request