

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016Open to Public
Inspection**A** For the 2016 calendar year, or tax year beginning **JUL 1, 2016** and ending **JUN 30, 2017****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization**COMMUNITY SERVICE SOCIETY OF NEW YORK**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

633 THIRD AVENUE, 10TH FLOOR

City or town, state or province, country, and ZIP or foreign postal code

NEW YORK, NY 10017**F** Name and address of principal officer: **DAVID R. JONES****SAME AS C ABOVE****D** Employer identification number**13-5562202****E** Telephone number**212-254-8900****G** Gross receipts \$ **70,856,321.****H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

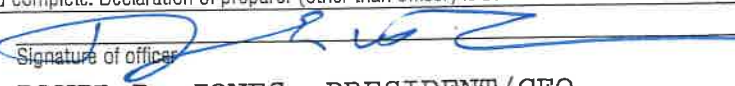
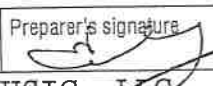
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **WWW.CSSNY.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1939** **M** State of legal domicile: **NY****Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE MISSION OF THE COMMUNITY SERVICE SOCIETY OF NEW YORK (CSS) IS TO IDENTIFY PROBLEMS WHICH		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	30
	4	Number of independent voting members of the governing body (Part VI, line 1b)	30
	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	169
	6	Total number of volunteers (estimate if necessary)	2125
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	20,308,291.
	9	Program service revenue (Part VIII, line 2g)	166,117.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,287,548.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	21,761,956.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	612,790.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15,494,039.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	65,500.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,197,557.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,480,220.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	32,652,549.
	19	Revenue less expenses. Subtract line 18 from line 12	-10,890,593.
	20	Total assets (Part X, line 16)	241,342,826.
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)	47,246,289.
	22	Net assets or fund balances. Subtract line 21 from line 20	194,096,537.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer: 		Date: 12/20/17		
	Type or print name and title: DAVID R. JONES, PRESIDENT/CEO				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature: 	Date: 12-16-17	Check if self-employed <input type="checkbox"/>	PTIN: P00988228
	Firm's name ▶ DORFMAN ABRAMS MUSIC, LLC	Firm's EIN ▶ 22-1655803			
	Firm's address ▶ 250 PEHLE AVE., SUITE 702 SADDLE BROOK, NJ 07663	Phone no. 201-403-9750			

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

632001 11-11-16 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2016)**SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION**

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ **X**

- 1** Briefly describe the organization's mission:
THE MISSION OF THE COMMUNITY SERVICE SOCIETY OF NEW YORK (CSS) IS TO IDENTIFY PROBLEMS WHICH CREATE A PERMANENT POVERTY CLASS IN NEW YORK CITY, AND TO ADVOCATE THE SYSTEMIC CHANGES REQUIRED TO ELIMINATE SUCH PROBLEMS. CSS WILL FOCUS ON ENABLING, EMPOWERING AND PROMOTING
- 2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☒ **X** Yes ☐ No
 If "Yes," describe these new services on Schedule O.
- 3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ **X** No
 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 \$ **17,084,107.** including grants of \$ **132,818.**) (Revenue \$)
CSS'S HEALTH INITIATIVES DEPARTMENT CONDUCTS HEALTH COVERAGE POLICY RESEARCH, ADVOCATES FOR QUALITY AFFORDABLE COVERAGE FOR ALL, AND PROVIDES EDUCATION AND DIRECT HEALTH COVERAGE ASSISTANCE TO NEW YORK CONSUMERS. CSS'S HEALTH COVERAGE-RELATED DIRECT SERVICES PROGRAMS INCLUDE: COMMUNITY HEALTH ADVOCATES; THE CSS NAVIGATOR NETWORK; THE INDEPENDENT CONSUMER ADVOCACY NETWORK; THE ABD-FE PROGRAM; AND HARLEM HEALTH ADVOCACY PROJECT. FOR MANY OF THESE PROJECTS, CSS SUBCONTRACTS WITH NETWORKS OF COMMUNITY-BASED ORGANIZATIONS TO SERVE CONSUMERS ACROSS NEW YORK STATE. TOGETHER, IN FY 2017, CSS'S HEALTH COVERAGE DIRECT SERVICES PROGRAMS SERVED CONSUMERS IN OVER 100,000 DIRECT ASSISTANCE CASES. THE HEALTH INITIATIVES DEPARTMENT HAS 25 TRAINED AND ACTIVE VOLUNTEERS.
- 4b** (Code:) (Expenses \$ **1,674,901.** including grants of \$) (Revenue \$)
RETIRED & SENIOR VOLUNTEER PROGRAM (RSVP)
RSVP DEPLOYED SOME 2,500 VOLUNTEERS THROUGHOUT THE FIVE BOROUGHES TO MEET CRITICAL COMMUNITY NEEDS THROUGHOUT A NETWORK OF 280 ORGANIZATIONS. THEY CONTRIBUTED APPROXIMATELY 500,000 HOURS OF UNPAID SERVICE.
EXTENSIVELY TRAINED RSVP VOLUNTEER FINANCIAL COACHES HELPED OVER 700 LOW-INCOME CLIENTS WITH ISSUES RELATED TO BANKING, BUDGETING, REVIEWING AND CORRECTING CREDIT REPORTS, MANAGING DEBT, STUDENT LOANS, AND SETTING FINANCIAL GOALS. VOLUNTEERS PROVIDED COMPANIONSHIP, CAMARADERIE, SOCIAL SUPPORT AND MEDICAL ESCORTING TO VETERANS MAKING SURE THAT PATIENTS HAVE A MORE POSITIVE, PRODUCTIVE, AND LESS STRESSFUL EXPERIENCE WHILE AT THE VA FACILITIES. TWO HUNDRED AND THIRTY
- 4c** (Code:) (Expenses \$ **584,935.** including grants of \$ **35.**) (Revenue \$ **103,677.**)
THE BENEFITS PLUS LEARNING CENTER IS DESIGNED TO EDUCATE SOCIAL SERVICE PROFESSIONALS ON GOVERNMENT BENEFIT AND HOUSING PROGRAMS THROUGH OUR SEARCHABLE ONLINE RESOURCE MANUAL (BENEFITS PLUS ONLINE - OVER 2,000 PAGES) AND OUR TRAINING WORKSHOPS. IN FY 2017, THE LEARNING CENTER RETAINED A SOFTWARE CONSULTANT TO REDESIGN AND ADDRESS ONGOING PROBLEMS WITH THE BENEFITS PLUS ONLINE MANUAL, AS WELL AS TO CREATE A NEW WEBSITE FOR ALL OF THE LEARNING CENTER'S PRODUCTS. CENTER STAFF CREATED EIGHT NEW WORKSHOPS AND FACILITATED 58 TRAINING WORKSHOPS FOR NEARLY 1,500 SOCIAL SERVICE PROFESSIONALS. STAFF ALSO MAINTAINED AND UPDATED THE BENEFITS PLUS ONLINE MANUAL THROUGHOUT THE YEAR. THE CENTER ALSO BEGAN TO INCORPORATE SOCIAL MEDIA INTO OUR MARKETING EFFORTS, INCLUDING TWITTER, FACE BOOK AND LINKED IN.
- 4d** Other program services (Describe in Schedule O.)
 (Expenses \$ **7,199,923.** including grants of \$ **458,182.**) (Revenue \$ **38,950.**)
- 4e** Total program service expenses **26,543,866.**

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
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 to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Form 990 (2016)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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 225		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 169		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c 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 organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b 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).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
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.			
a 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:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	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	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2016)

Part VI 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 in Schedule O. See instructions.

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

☒**Section 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 30 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
b Enter the number of voting members included in line 1a, above, who are independent 1b 30		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5		X
6 Did the organization have members or stockholders? 6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body? 8a	X	
b Each committee with authority to act on behalf of the governing body? 8b	X	
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		X

Section 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? 10a		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a	X	
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	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c	X	
13 Did the organization have a written whistleblower policy? 13	X	
14 Did the organization have a written document retention and destruction policy? 14	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official 15a	X	
b Other officers or key employees of the organization 15b		X
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 taxable entity during the year? 16a		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **NY, NJ, CT, FL**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ►
CHARLES TARMINA, CONTROLLER - 212-254-8900
633 THIRD AVENUE, 10TH FLOOR, NEW YORK, NY 10010

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) TERRY AGRIS TRUSTEE	1.00	X						0.	0.	0.
(2) SYLVIA E. DI PIETRO, ESQ. TRUSTEE	1.00	X						0.	0.	0.
(3) JOSEPH J. HASLIP TRUSTEE	1.00	X						0.	0.	0.
(4) NICHOLAS A. GRAVANTE JR., ESQ. TRUSTEE	1.00	X						0.	0.	0.
(5) JUDY CHAMBERS TRUSTEE	1.00	X						0.	0.	0.
(6) MICHAEL HORODNICEANU, PH.D. TRUSTEE	1.00	X						0.	0.	0.
(7) JOYCE L. MILLER TRUSTEE	1.00	X						0.	0.	0.
(8) HON. KELLY O'NEILL LEVY, ESQ. TRUSTEE	1.00	X						0.	0.	0.
(9) FLORENCE H. FRUCHER TRUSTEE	1.00	X						0.	0.	0.
(10) BARBARA NEVINS TAYLOR TRUSTEE	1.00	X						0.	0.	0.
(11) DAVID J. POLLAK TRUSTEE	1.00	X						0.	0.	0.
(12) MARLA EISLAND SPRIE, ESQ TRUSTEE	1.00	X						0.	0.	0.
(13) MAGDA JIMENEZ TRAIN, ESQ. TRUSTEE	1.00	X						0.	0.	0.
(14) MARK E. LIEBERMAN TRUSTEE	1.00	X						0.	0.	0.
(15) CAROL L. O'NEALE TRUSTEE	1.00	X						0.	0.	0.
(16) KAREN Y. BITAR, ESQ. TRUSTEE	1.00	X						0.	0.	0.
(17) MICAH C. LASHER TRUSTEE	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ABBY WENZEL, ESQ. TRUSTEE	1.00	X						0.	0.	0.
(19) JEFFREY J. WEAVER TRUSTEE	1.00	X						0.	0.	0.
(20) MARK A. WILLIS TRUSTEE	1.00	X						0.	0.	0.
(21) JERRY WEBMAN TRUSTEE	1.00	X						0.	0.	0.
(22) ROSALIE MARGOLIS TRUSTEE	1.00	X						0.	0.	0.
(23) GEOFFREY NEWMAN TRUSTEE	1.00	X						0.	0.	0.
(24) KHALED HARAM TRUSTEE	1.00	X						0.	0.	0.
(25) REGAN KELLEY ORILLAC TRUSTEE	1.00	X						0.	0.	0.
(26) MARGARITA ROSA, ESQ. TRUSTEE	1.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								2,693,519.	0.	356,105.
d Total (add lines 1b and 1c)								2,693,519.	0.	356,105.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **10**

	Yes	No
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		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
GANNON VITOLO CONTRACTING, LLC 49 WEST 38TH STREET, NEW YORK, NY 10018	RENOVATIONS	626,375.
LAKE RESEARCH PARTNERS, 1726 M STREET NW, SUITE 1100, WASHINGTON DC, DC 20036	SURVEY WORK	282,140.
ROBERT HALF TECHNOLOGY, 12400 COLLECTIONS CENTER DRIVE, CHICAGO, IL 60693	TEMPORARY EMPLOYEE SERVICES	196,572.
COLLINS BUILDING SERVICES, INC 24-01 44TH ROAD, LONG ISLAND CITY, NY 11101	CLEANING SERVICES	171,258.
FAIRCOM NEW YORK INC 12 WEST 27TH STREET, NEW YORK, NY 10001	PROFESSIONAL FUNDRAISING	148,267.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **5**

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) KHARY LAZARRE-WHITE, ESQ TRUSTEE	1.00	X						0.	0.	0.
(28) PHYLLIS TAYLOR TRUSTEE	1.00	X						0.	0.	0.
(29) PATRICIA GLAZER TRUSTEE	1.00	X						0.	0.	0.
(30) KEN SUNSHINE TRUSTEE	1.00	X						0.	0.	0.
(31) DEBORAH M. SALE CHAIRPERSON	1.00	X		X				0.	0.	0.
(32) BETSY GOTBAUM SECRETARY	1.00	X		X				0.	0.	0.
(33) RALPH DACOSTA-NUNEZ TREASURER	1.00	X		X				0.	0.	0.
(34) STEVEN BROWN VICE CHAIRMAN	1.00	X		X				0.	0.	0.
(35) DAVID R. JONES, ESQ. PRESIDENT/CEO	35.00			X				655,547.	0.	87,223.
(36) STEVEN L. KRAUSE EXECUTIVE V.P./COO	35.00			X				571,389.	0.	83,510.
(37) JEFFREY F. RIZZO CHIEF FINANCIAL OFFICER	35.00			X				203,380.	0.	45,890.
(38) ELISABETH BENJAMIN VP HEALTH INITIATIVES	35.00				X			214,151.	0.	21,434.
(39) ALINA MOLINA VP OF PROGRAM SERVICES	35.00				X			179,925.	0.	24,469.
(40) NANCY RANKIN VP OF POLICY, RESEARCH AND	35.00					X		199,009.	0.	5,062.
(41) JUDITH WHITING GENERAL COUNSEL	35.00					X		188,280.	0.	6,258.
(42) JEFFREY MACLIN VP OF GOVERNMENT AND PUBLI	35.00					X		171,065.	0.	30,684.
(43) MELISSA KOSTOVSKI VP OF DEVELOPMENT AND PLAN	35.00					X		171,236.	0.	21,566.
(44) JANEENE FREEMAN DIRECTOR OF GOVERNMENT RELATIONS	35.00					X		139,537.	0.	30,009.
Total to Part VII, Section A, line 1c								2,693,519.		356,105.

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	17,394,737.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,962,138.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f			20,356,875.			
Program Service Revenue	2 a PROGRAM SERVICE FEES	Business Code	611420	142,627.	142,627.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			142,627.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			3,343,184.			3,343,184.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)			4,597,353.			4,597,353.
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
11 a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions.				28,440,039.	142,627.	0.	7,940,537.

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

☒ X

Do not include amounts reported on lines 6b, 7b, 8b, 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	190,262.	190,262.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	400,773.	400,773.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,948,427.	926,595.	956,585.	65,247.
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	9,357,438.	7,495,972.	1,331,927.	529,539.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	135,170.	92,875.	33,268.	9,027.
9 Other employee benefits	4,541,362.	3,172,119.	1,140,561.	228,682.
10 Payroll taxes	725,513.	627,802.	53,332.	44,379.
11 Fees for services (non-employees):				
a Management				
b Legal	41,331.	1,099.	40,232.	
c Accounting	114,735.		114,735.	
d Lobbying	153,000.	153,000.		
e Professional fundraising services. See Part IV, line 17	65,795.			65,795.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	11,402,603.	11,015,928.	351,845.	34,830.
12 Advertising and promotion	51,896.	44,946.	5,521.	1,429.
13 Office expenses	176,575.	72,760.	19,200.	84,615.
14 Information technology	3,757.		3,757.	
15 Royalties				
16 Occupancy	638,804.	475,563.	137,911.	25,330.
17 Travel	319,317.	197,368.	114,386.	7,563.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	317,010.	137,604.	171,398.	8,008.
20 Interest	375,354.		375,354.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,542,337.	1,161,078.	333,972.	47,287.
23 Insurance	155,317.	22,530.	132,787.	
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.)				
a EQUIPMENT RENTAL	282,319.	77,749.	189,985.	14,585.
b TELEPHONE AND COMMUNICA	279,439.	179,392.	94,528.	5,519.
c SUPPLIES	137,084.	68,019.	65,779.	3,286.
d POSTAGE	60,287.	26,560.	11,291.	22,436.
e All other expenses	5,739.	3,872.	1,867.	
25 Total functional expenses. Add lines 1 through 24e	33,421,644.	26,543,866.	5,680,221.	1,197,557.
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)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	2,045,364.	1	1,015,307.
	2 Savings and temporary cash investments	3,570,427.	2	2,333,282.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	5,794,920.	4	10,158,101.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	605,638.	9	899,310.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 38,765,754.		
	b Less: accumulated depreciation	10b 2,907,140.	37,362,480.	10c 35,858,614.
	11 Investments - publicly traded securities	137,552,370.	11	151,046,786.
	12 Investments - other securities. See Part IV, line 11	20,673,938.	12	16,892,413.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	33,737,689.	15	36,059,562.
16 Total assets. Add lines 1 through 15 (must equal line 34)	241,342,826.	16	254,263,375.	
Liabilities	17 Accounts payable and accrued expenses	5,514,805.	17	7,856,943.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	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	41,731,484.	25	39,821,598.
	26 Total liabilities. Add lines 17 through 25	47,246,289.	26	47,678,541.
	Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
27 Unrestricted net assets		106,335,975.	27	115,634,313.
28 Temporarily restricted net assets		24,928,340.	28	25,795,641.
29 Permanently restricted net assets		62,832,222.	29	65,154,880.
Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
30 Capital stock or trust principal, or current funds			30	
31 Paid-in or capital surplus, or land, building, or equipment fund			31	
32 Retained earnings, endowment, accumulated income, or other funds			32	
33 Total net assets or fund balances		194,096,537.	33	206,584,834.
34 Total liabilities and net assets/fund balances	241,342,826.	34	254,263,375.	

Form 990 (2016)

Part XI Reconciliation of Net Assets

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

☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	28,440,039.
2	Total expenses (must equal Part IX, column (A), line 25)	2	33,421,644.
3	Revenue less expenses. Subtract line 2 from line 1	3	-4,981,605.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	194,096,537.
5	Net unrealized gains (losses) on investments	5	13,646,676.
6	Donated services and use of facilities	6	
7	Investment expenses	7	-576,158.
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	4,399,384.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	206,584,834.

Part XII Financial Statements and Reporting

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

☒

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	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?	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
3b	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	X	

Form 990 (2016)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	13,817,729.	12,592,645.	17,727,591.	20,308,291.	20,356,875.	84,803,131.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	13,817,729.	12,592,645.	17,727,591.	20,308,291.	20,356,875.	84,803,131.
5 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)						610,139.
6 Public support. Subtract line 5 from line 4.						84,192,992.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	13,817,729.	12,592,645.	17,727,591.	20,308,291.	20,356,875.	84,803,131.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,710,007.	3,600,914.	2,228,574.	1,287,548.	7,940,537.	18,767,580.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	263,931.	84,401.				348,332.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	105,913.	94,109.				200,022.
11 Total support. Add lines 7 through 10						104,119,065.
12 Gross receipts from related activities, etc. (see instructions)					12	1,096,696.
13 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) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	80.86 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	82.73 %
16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2016. 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 organization <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2016

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

(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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

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.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
c 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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
c 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? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

- 11** Has the organization accepted a gift or contribution from any of the following persons?
- a** A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
- b** A family member of a person described in (a) above?
- c** 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**.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 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.
- 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.

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 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).

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 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?
- 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).
- 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.

	Yes	No
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

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

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

- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI** identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

3 Parent of Supported Organizations. Answer (a) and (b) below.

- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in **Part VI**.
- b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

	Yes	No
2a		
2b		
3a		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

Schedule A (Form 990 or 990-EZ) 2016

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in Part VI). See instructions		
7	Total annual distributions. Add lines 1 through 6		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions		
9	Distributable amount for 2016 from Section C, line 6		
10	Line 8 amount divided by Line 9 amount		

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, 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 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

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, 2b, 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.)

(See instructions.)

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

- ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2016

**Open to Public
Inspection**

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

COMMUNITY SERVICE SOCIETY OF NEW YORK

Employer identification number

13-5562202

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures ▶ \$

3 Volunteer hours for political campaign activities ▶

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

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).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527
exempt function activities ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,
line 17b ▶ \$

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 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.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2016

LHA

632041 11-10-16

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		153,000.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		153,000.													
c Total lobbying expenditures (add lines 1a and 1b)		26,390,866.													
d Other exempt purpose expenditures		26,543,866.													
e Total exempt purpose expenditures (add lines 1c and 1d)		1,000,000.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	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.			
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)		250,000.													
h Subtract line 1g from line 1a. If zero or 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 zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.)

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	130,663.	176,736.	219,084.	153,000.	679,483.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2016

- 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:
 - 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
- 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?
 - b If "Yes," enter the amount of any tax incurred under section 4912
 - c If "Yes," enter the amount of any tax incurred by organization managers under section 4912
 - d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

[illegible]

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?		

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

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.

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016Open to Public
Inspection

Name of the organization

COMMUNITY SERVICE SOCIETY OF NEW YORK

Employer identification number

13-5562202

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the
organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held 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 Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, 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 SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition d ☐ Loan or exchange programs
 b ☐ Scholarly research e ☐ Other _____
 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 solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	30,406,056.	31,616,056.	31,616,056.	32,127,824.	31,876,515.
b Contributions					
c Net investment earnings, gains, and losses	3,334,290.	-587,426.	636,973.	3,942,582.	2,950,103.
d Grants or scholarships					
e Other expenditures for facilities and programs	3,334,290.	622,574.	636,973.	4,454,350.	2,698,794.
f Administrative expenses					
g End of year balance	30,406,056.	30,406,056.	31,616,056.	31,616,056.	32,127,824.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ☐ 1.49 %
 b Permanent endowment ☐ 78.60 %
 c Temporarily restricted endowment ☐ 19.91 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations		X
(ii) related organizations		X

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

4 Describe in Part XIII the intended uses of the organization's endowment funds.

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		5,034,552.		5,034,552.
b Buildings		23,550,930.	1,157,418.	22,393,512.
c Leasehold improvements		8,490,309.	1,047,351.	7,442,958.
d Equipment		1,689,963.	702,371.	987,592.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				35,858,614.

Schedule D (Form 990) 2016

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) BR STRATEGIC INCOME OPP		
(B) PTF INST	4,038,058.	END-OF-YEAR MARKET VALUE
(C) BR ALLOCATION SHARES		
(D) SERIES P	1,962,633.	END-OF-YEAR MARKET VALUE
(E) BR ALLOCATION SHARES		
(F) SERIES A	1,976,628.	END-OF-YEAR MARKET VALUE
(G) DFA REAL ESTATE		
(H) SECURITIES	4,449,894.	END-OF-YEAR MARKET VALUE
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	16,892,413.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) BENEFICIAL INTEREST IN PERPETUAL TRUSTS	36,059,562.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	36,059,562.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) POST-EMPLOYMENT BENEFITS	14,713,760.
(3) LINE OF CREDIT	25,107,838.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	39,821,598.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	43,286,076.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	13,646,676.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	1,199,361.
e	Add lines 2a through 2d	2e	14,846,037.
3	Subtract line 2e from line 1	3	28,440,039.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	28,440,039.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	33,424,669.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	3,025.
e	Add lines 2a through 2d	2e	3,025.
3	Subtract line 2e from line 1	3	33,421,644.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	33,421,644.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

COMMUNITY SERVICE SOCIETY OF NEW YORK ENDOWMENT CONSISTS OF INDIVIDUAL
DONOR-RESTRICTED ENDOWMENT FUNDS ESTABLISHED FOR DIRECT SERVICE PROGRAMS.

PART X, LINE 2:

AS OF JUNE 30, 2017, MANAGEMENT BELIEVES THAT BASED ON EVALUATION OF THE
SOCIETY'S TAX POSITIONS THAT ANY LIABILITY AS A RESULT OF UNCERTAIN TAX
POSITIONS WOULD NOT BE MATERIAL. MANAGEMENT CONTINUALLY EVALUATES EXPIRING
STATUTES OF LIMITATIONS, CHANGES IN TAX LAW, AND NEW AUTHORITATIVE RULINGS
TO ASSIST IN EVALUATING THE SOCIETY'S TAX POSITIONS. ACCRUED INTEREST AND
PENALTIES ASSOCIATED WITH UNCERTAIN TAX POSITIONS, IF ANY, WOULD BE
RECOGNIZED AS PART OF AN INCOME TAX PROVISION. INCOME TAX RETURNS ARE

Part XIII Supplemental Information (continued)

FILED ONLY WITH THE U.S. FEDERAL JURISDICTION AS STATE AND LOCAL TAX
RETURNS ARE NOT APPLICABLE. U.S. FEDERAL INCOME TAX RETURNS PRIOR TO
FISCAL YEAR 2013 ARE CLOSED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

INTEREST INCOME ON BOOKS OF FRIENDS OF RSVP	88.
INVESTMENT EXPENSES NETTED AGAINST INVESTMENT RETURN	-576,158.
CHANGE IN FAIR VALUE OF BENEFICIAL INTEREST IN PERPETUAL TRUSTS	1,775,431.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	1,199,361.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES ON BOOKS OF FRIENDS OF RSVP	3,025.
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Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 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.**

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization

COMMUNITY SERVICE SOCIETY OF NEW YORK

Employer identification number

13-5562202

Part I

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☒ Mail solicitations
- b ☒ Internet and email solicitations
- c ☐ Phone solicitations
- d ☐ In-person solicitations
- e ☐ Solicitation of non-government grants
- f ☐ Solicitation of government grants
- g ☐ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ **Yes**☒ No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
FAIRCOM NEW YORK, INC. - 12 WEST 27TH STREET, 13TH FL,	DIRECT MAIL AND ONLINE APPEALS		X	167,551.	65,795.	167,551.
Total				167,551.	65,795.	167,551.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

NY, NJ, FL, CT

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	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
	11 Net income summary. Subtract line 10 from line 3, column (d)				

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No _____ %	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No _____ %	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No _____ %	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____**a** Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No**b** If "No," explain: _____**10a** Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No**b** If "Yes," explain: _____

- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer☐ Employee☐ Independent contractor**17** Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: FAIRCOM NEW YORK, INC.

(I) ADDRESS OF FUNDRAISER:

12 WEST 27TH STREET, 13TH FL, NEW YORK, NY 10001

Schedule G (Form 990 of 990-EZ)		CORPORATE	
Part IV	Supplemental Information (continued)		

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2016

**Open to Public
Inspection**

Name of the organization

COMMUNITY SERVICE SOCIETY OF NEW YORK

Employer identification number
13-5562202

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II 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 that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CITY LIMITS NEWS, INC 394 BROADWAY NEW YORK, NY 10013	27-0218689	501(C)(3)	109,350.	0.			PUBLIC INTEREST
NETWORK FOR GOOD 1140 CONNECTICUT AVE NW #700 WASHINGTON, DC 20036	68-0480736	501(C)(3)	10,150.	0.			DIRECT SERVICES
THE INNER CIRCLE MCEVOY & ASSOCIATES - PO BOX 5372 - NEW YORK, NY 10003	13-3360989	501(C)(3)	10,000.	0.			DIRECT SERVICES
THE NATION INSTITUTE C/O MCEVOY & ASSOCIATES - PO BOX 5372 - NEW YORK, NY 10003	13-6216903	501(C)(3)	6,300.	0.			DIRECT SERVICES
AMSTERDAM NEWS ED FDN 276 5TH AVE #703 NEW YORK, NY 10001	13-3634817	501(C)(3)	5,000.	0.			DIRECT SERVICES

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶
- 3** Enter total number of other organizations listed in the line 1 table ▶

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2016)

Part III**Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
INDIVIDUAL SUPPORT	39	18,301.	0.		
TRANSPORTATION	492	32,953.	0.		
EDUCATION - TRAINING	84	17,070.	0.		
VACATION - CAMPING	16	15,893.	0.		
DENTAL & MEDICAL FEES	89	64,399.	0.		

Part IV**Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE AGENCY MAINTAINS FINANCIAL GUIDELINES THAT DICTATE WHO MAY RECEIVE A GRANT AND WHAT THE AMOUNTS OF THOSE GRANTS WILL BE. THE FINANCIAL GUIDELINES ALSO DICTATE THE KIND OF SUPPORTING DOCUMENTATION A POTENTIAL GRANTEE NEEDS TO PROVIDE IN ORDER TO BE ELIGIBLE AND RECEIVE PAYMENT FOR A GRANT. CASE MANAGERS WHO WORK DIRECTLY WITH THE CLIENTS ASSESS THEIR NEEDS AND MAINTAIN A FILE WITH ALL REQUIRED DOCUMENTATION AND ENSURE THAT GRANT FUNDS ARE APPROPRIATELY USED. THE FINANCE DEPARTMENT AUDITS REQUESTS FOR GRANTS AND VERIFIES THAT ALL DOCUMENTS SUBMITTED ARE

Part III Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
FOOD - INDIVIDUAL	7.	1,845.	0.		
UTILITIES/UTILITIES IN ARREARS	20.	3,265.	0.		
RENT/RENT ARREARS/SECURITY DEPOSIT	233.	219,784.	0.		
EMPLOYMENT RELATED ASSISTANCE	46.	9,120.	0.		
RENT SUBSIDY - OTHER	6.	18,143.	0.		

Part IV Supplemental Information

SUBSTANTIAL AND ADHERE TO THE FINANCIAL GUIDELINES.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization

COMMUNITY SERVICE SOCIETY OF NEW YORK

Employer identification number

13-5562202

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|---|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b X

2 X

4a X

4b X

4c X

5a X

5b X

6a X

6b X

7 X

8 X

9

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2016

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DAVID R. JONES, ESQ. PRESIDENT/CEO	(i)	481,355.	87,638.	86,554.	38,500.	48,723.	742,770.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) STEVEN L. KRAUSE EXECUTIVE V.P./COO	(i)	338,832.	85,698.	146,859.	35,000.	48,510.	654,899.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JEFFREY F. RIZZO CHIEF FINANCIAL OFFICER	(i)	177,733.	24,825.	822.	5,000.	40,890.	249,270.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ELISABETH BENJAMIN VP HEALTH INITIATIVES	(i)	187,129.	26,735.	287.	5,000.	16,434.	235,585.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ALINA MOLINA VP OF PROGRAM SERVICES	(i)	158,415.	20,688.	822.	5,000.	19,469.	204,394.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) NANCY RANKIN VP OF POLICY, RESEARCH AND	(i)	174,404.	23,022.	1,583.	4,050.	1,012.	204,071.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) JUDITH WHITING GENERAL COUNSEL	(i)	166,320.	21,424.	536.	5,000.	1,258.	194,538.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JEFFREY MACLIN VP OF GOVERNMENT AND PUBLI	(i)	148,899.	21,630.	536.	4,725.	25,959.	201,749.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MELISSA KOSTOVSKI VP OF DEVELOPMENT AND PLAN	(i)	150,899.	20,150.	187.	4,114.	17,452.	192,802.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) JANEENE FREEMAN DIRECTOR OF GOVERNMENT RELATIONS	(i)	123,498.	15,914.	125.	4,050.	25,959.	169,546.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

THE CEO/PRESIDENT, DAVID R. JONES RECEIVED THE FOLLOWING

BENEFITS DURING THE CALENDAR YEAR 2016:

MEMBERSHIP FEES TO VARIOUS ORGANIZATIONS

LONGTERM DISABILITY AND LIFE INSURANCE PREMIUMS

PERSONAL USE OF VEHICLE

THESE BENEFITS WERE TREATED AS TAXABLE COMPENSATION.

PART I, LINE 4B:

SECTION 457F PLAN:

DAVID R. JONES: \$15,000

STEVEN L. KRAUSE: \$15,000

PART I, LINE 7:

THE CURRENT BONUS STRUCTURE FOR CSS NON-BARGAINING UNIT

STAFF IS BASED UPON A COMPENSATION PROGRAM DEVELOPED IN CONJUNCTION WITH

THE HAY GROUP. IN ESSENCE IT PROVIDES FOR BONUSES TO BE PAID TO MANAGEMENT

STAFF BASED UPON TOTAL PERFORMANCE AND THE MEETING OF INDIVIDUAL AND

ORGANIZATIONAL GOALS. THE HIGHER THE LEVEL OF THE POSITION HELD BY A STAFF

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

MEMBER THE GREATER THE EMPHASIS ON ORGANIZATIONAL GOALS VERSUS INDIVIDUAL
GOALS AND THE HIGHER THE POTENTIAL PERCENTAGE BONUS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization

COMMUNITY SERVICE SOCIETY OF NEW YORK

Employer identification number
13-5562202

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CREATE A PERMANENT POVERTY CLASS IN NEW YORK CITY, AND TO ADVOCATE THE
SYSTEMIC CHANGES REQUIRED TO ELIMINATE SUCH PROBLEMS. CSS WILL FOCUS ON
ENABLING, EMPOWERING AND PROMOTING OPPORTUNITIES FOR POOR FAMILIES AND
INDIVIDUALS TO DEVELOP THEIR FULL POTENTIAL, TO CONTRIBUTE TO SOCIETY,
AND TO REALIZE SOCIAL, ECONOMIC AND POLITICAL OPPORTUNITIES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OPPORTUNITIES FOR POOR FAMILIES AND INDIVIDUALS TO DEVELOP THEIR FULL
POTENTIAL, TO CONTRIBUTE TO SOCIETY, AND TO REALIZE SOCIAL, ECONOMIC
AND POLITICAL OPPORTUNITIES.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

THE BENEFITS PLUS LEARNING CENTER IS DESIGNED TO EDUCATE SOCIAL SERVICE
PROFESSIONALS ON GOVERNMENT BENEFIT AND HOUSING PROGRAMS THROUGH OUR
SEARCHABLE ONLINE RESOURCE MANUAL (BENEFITS PLUS ONLINE - OVER 2,000
PAGES) AND OUR TRAINING WORKSHOPS. IN FY 2017, THE LEARNING CENTER
RETAINED A SOFTWARE CONSULTANT TO REDESIGN AND ADDRESS ONGOING PROBLEMS
WITH THE BENEFITS PLUS ONLINE MANUAL, AS WELL AS TO CREATE A NEW
WEBSITE FOR ALL OF THE LEARNING CENTER'S PRODUCTS. CENTER STAFF
CREATED EIGHT NEW WORKSHOPS AND FACILITATED 58 TRAINING WORKSHOPS FOR
NEARLY 1,500 SOCIAL SERVICE PROFESSIONALS. STAFF ALSO MAINTAINED AND
UPDATED THE BENEFITS PLUS ONLINE MANUAL THROUGHOUT THE YEAR. THE
CENTER ALSO BEGAN TO INCORPORATE SOCIAL MEDIA INTO OUR MARKETING
EFFORTS, INCLUDING TWITTER, FACEBOOK AND LINKED-IN.

Name of the organization

COMMUNITY SERVICE SOCIETY OF NEW YORK

Employer identification number

13-5562202

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

VOLUNTEERS HELPED TO PREPARE, SERVE OR DISTRIBUTE 126,000 EMERGENCY FOOD PACKAGES AND MEALS TO MEMBERS OF THEIR COMMUNITY WHO ARE HUNGRY, HOMELESS AND IN NEED OF ASSISTANCE, INCLUDING FAMILIES WITH YOUNG CHILDREN. RSVP DEPLOYED 65 EXTENSIVELY TRAINED VOLUNTEER BENEFITS COUNSELORS THROUGHOUT A NETWORK OF 38 COMMUNITY PARTNERS WHERE THEY CONDUCTED OVER 6,300 BENEFIT COUNSELING SESSIONS AND ASSISTED WITH OVER 8,000 PUBLIC BENEFIT ISSUES. ONE HUNDRED AND SIXTY-FOUR RSVP VOLUNTEERS HELPED NURSING HOME RESIDENTS BY PROVIDING REGULAR VISITATIONS, EXTRA SUPPORT AND OMBUDSMAN SERVICES. EIGHTY RSVP-TRAINED MENTORS WORKED ONE-ON-ONE AND IN SMALL GROUPS WITH CHILDREN WHO HAVE AN INCARCERATED PARENT AS WELL AS WITH ADOLESCENTS IN ALTERNATIVE TO DETENTION/INCARCERATION PROGRAMS. OVER 200 YOUNG PEOPLE, AGES 6 TO 21, WORKED WITH THEIR MENTORS ON ACADEMIC ENRICHMENT PROJECTS AND/OR CAREER GOAL SETTING ACTIVITIES. A TOTAL OF 405 VOLUNTEERS SERVED IN 45 HOSPITALS THROUGHOUT THE FIVE BOROUGHES. THEY PROVIDED CRITICAL SUPPORT SERVICES WHICH AUGMENTED THE HOSPITALS' WORK IN PATIENT AND FAMILY HEALTHCARE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAM SERVICES

EXPENSES \$ 7,199,923. INCLUDING GRANTS OF \$ 458,182. REVENUE \$ 38,950.

FORM 990, PART VI, SECTION B, LINE 11B:

ELECTRONICALLY DISTRIBUTE THE 990 TO ALL BOARD OF TRUSTEE MEMBERS FOR INFORMATION, REVIEW, AND FEEDBACK.

FORM 990, PART VI, SECTION B, LINE 12C:

Name of the organization

COMMUNITY SERVICE SOCIETY OF NEW YORK

Employer identification number

13-5562202

CONFLICT OF INTEREST FORMS ARE DISTRIBUTED AND SIGNED ANNUALLY AT THE JUNE BOARD MEETING. ALL TRUSTEES/OFFICERS/BOARD MEMBERS HAVE ONGOING DUTY TO DISCLOSE ANY CONFLICTS ARISING THROUGHTOUT THE YEAR. THE HUMAN RESOURCES COMMITTEE OF THE BOARD MONITORS AND REVIEWS COMPLETED FORMS. IF THERE IS A CONFLICT THE BOARD IS NOTIFIED OF THE CONFLICT. IF SUCH CONFLICT CANNOT BE RESOLVED THE BOARD MEMBER/TRUSTEE/OFFICER IS ASKED TO RESIGN OR TAKE A LEAVE OF ABSENCE. EMPLOYEES ARE NOT REQUIRED TO SIGN THE CONFLICT OF INTEREST STATEMENTS.

FORM 990, PART VI, SECTION B, LINE 15A:

COMPENSATION OF THE PRESIDENT & CEO IS SET BY THE BOARD OF TRUSTEES. BOARD ACTION IS BASED ON PERIODIC REVIEW BY OUTSIDE INDEPENDENT COMPENSATION AND CLASSIFICATION EXPERTS UNDERTAKEN AT THE DIRECTION OF THE HUMAN RESOURCES COMMITTEE OF THE BOARD. THE INDEPENDENT COMPENSATION COUNSULTANT CONDUCTS A COMPENSATION SURVEY AND PRESENTS THE FINDINGS TO THE HUMAN RESOURCES COMMITTEE. THE BOARD SIGNS A WRITTEN EMPLOYMENT CONTRACT WITH THE PRESIDENT AND CEO. THE MOST RECENT OUTSIDE INDEPENDENT COMPENSATION REVIEW WAS COMPLETED IN SPRING 2016.

FORM 990, PART VI, SECTION C, LINE 19:

THE AGENCY'S FINANCIAL STATEMENTS AND INFORMATIONAL RETURNS ARE AVAILABLE TO THE PUBLIC VIA THE AGENCY'S WEBSITE. THE AGENCY'S FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, GOVERNING DOCUMENTS AND INFORMATIONAL RETURNS ARE AVAILABLE TO THE PUBLIC UPON REQUEST AT ITS HEADQUARTERS; 633 THIRD AVENUE, TENTH FLOOR, NEW YORK NY 10017.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTING FEES:

Name of the organization

COMMUNITY SERVICE SOCIETY OF NEW YORK

Employer identification number
13-5562202

PROGRAM SERVICE EXPENSES	806,761.
MANAGEMENT AND GENERAL EXPENSES	351,845.
FUNDRAISING EXPENSES	34,830.
TOTAL EXPENSES	1,193,436.

SUBCONTRACTING EXPENSE - NAVIGATOR:

PROGRAM SERVICE EXPENSES	4,589,949.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	4,589,949.

SUBCONTRACTING EXPENSE - ESTABLISHMENT:

PROGRAM SERVICE EXPENSES	2,114,060.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,114,060.

SUBCONTRACTING EXPENSE - ABD:

PROGRAM SERVICE EXPENSES	977,086.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	977,086.

SUBCONTRACTING EXPENSE - SOFA:

PROGRAM SERVICE EXPENSES	75,000.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	75,000.

Name of the organization

COMMUNITY SERVICE SOCIETY OF NEW YORK

Employer identification number

13-5562202

SUBCONTRACTING EXPENSE - ICAN:

PROGRAM SERVICE EXPENSES 2,453,072.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 2,453,072.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 11,402,603.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN FAIR VALUE OF BENEFICIAL INTEREST IN PERPETUAL

TRUSTS 1,775,431.

PENSION ADJUSTMENT 2,623,953.

TOTAL TO FORM 990, PART XI, LINE 9 4,399,384.

FORM 990, PART XII, LINE 2C

ANNUALLY THE AUDIT COMMITTEE MEETS WITH AUDITORS TO REVIEW DRAFT

FINANCIAL STATEMENTS. THIS PROCESS HAS NOT CHANGED SINCE PRIOR YEARS.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
► Attach to Form 990.

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

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization

COMMUNITY SERVICE SOCIETY OF NEW YORK

Employer identification number
13-5562202

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
FRIENDS OF RSVP, INC. - 13-3335293 C/O CSS NY 633 THIRD AVE 10TH FLOOR NEW YORK, NY 10017	FUNDRAISING FOR RSVP PROGRAM	NEW YORK	501 (C) (3)	PF	CSS	X	
INSTITUTE FOR COMMUNITY EMPOWERMENT - 13-3473143, C/O CSS NY 633 THIRD AVE 10TH FLOOR, NEW YORK, NY 10017	PERFORM CERTAIN ELECTORAL ADVOCACY, RESEARCH AND LOBBYING ACTIVITIES	NEW YORK	501 (C) (4)		CSS	X	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2016

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

[illegible]

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

[illegible]

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) FRIENDS OF RSVP, INC.	N	0	NO FEES WERE CHARGED FY17
(2) FRIENDS OF RSVP, INC.	O	0	NO FEES WERE CHARGED FY17
(3) INSTITUTE FOR COMMUNITY EMPOWERMENT	N	0	NO FEES WERE CHARGED FY17
(4) INSTITUTE FOR COMMUNITY EMPOWERMENT	O	0	NO FEES WERE CHARGED FY17
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII	Supplemental Information.
-----------------	----------------------------------

Provide additional information for responses to questions on Schedule R. See instructions.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Form **8879-EO****IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2016, or fiscal year beginning JUL 1, 2016, and ending JUN 30, 2017**2016**Department of the Treasury
Internal Revenue Service▶ **Do not send to the IRS. Keep for your records.**▶ **Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.**

Name of exempt organization

Employer identification number

COMMUNITY SERVICE SOCIETY OF NEW YORK**13-5562202**

Name and title of officer

**CHARLES TARMINA, CONTROLLER
PRESIDENT/CEO****Part I Type of Return and Return Information (Whole Dollars Only)**

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b <u>28,440,039.</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b _____
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2016 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☒ I authorize DORFMAN ABRAMS MUSIC, LLC to enter my PIN 79691
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶  Date ▶ 12/20/17

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

22061079691
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2016 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ _____

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So**

Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

► **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number
Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. COMMUNITY SERVICE SOCIETY OF NEW YORK	Employer identification number (EIN) or 13-5562202
	Number, street, and room or suite no. If a P.O. box, see instructions. 633 THIRD AVENUE, 10TH FLOOR	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10017	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

CHARLES TARMINA, CONTROLLER

• The books are in the care of ► **633 THIRD AVENUE, 10TH FLOOR - NEW YORK, NY 10010**

Telephone No. ► **212-254-8900**

Fax No. ►

• If the organization does not have an office or place of business in the United States, check this box ☐
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 15, 2018**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

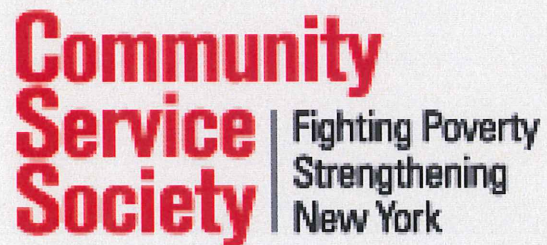
► ☐ calendar year _____ or

► ☒ tax year beginning **JUL 1, 2016**, and ending **JUN 30, 2017**

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.



***CONSOLIDATED FINANCIAL STATEMENTS
AND SUPPLEMENTARY INFORMATION
WITH INDEPENDENT AUDITORS' REPORT***

YEARS ENDED JUNE 30, 2017 AND 2016

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INDEPENDENT AUDITORS' REPORT

To The Board of Trustees
Community Service Society of New York and Affiliates
New York, New York

Report on the Financial Statements

We have audited the accompanying consolidated financial statements of Community Service Society of New York and Affiliates, which comprise the consolidated statements of financial position as of June 30, 2017 and 2016, and the related consolidated statements of activities, cash flows, and functional expenses for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of Community Service Society of New York and Affiliates as of June 30, 2017 and 2016, and the changes in their net assets and their cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Dorfman Abrams Music, LLC

Saddle Brook, New Jersey

October 31, 2017

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

CONSOLIDATED STATEMENTS OF FINANCIAL POSITION

(in thousands)

ASSETS

	June 30,	
	2017	2016
Assets:		
Cash and cash equivalents	\$ 3,401	\$ 5,673
Investments	167,939	158,224
Government and other receivables	10,158	7,647
Prepaid and other assets	906	611
Beneficial interest in perpetual trusts	36,060	33,738
Property and equipment, net	35,860	37,362
Total assets	<u>\$ 254,324</u>	<u>\$ 243,255</u>

LIABILITIES AND NET ASSETS

Liabilities:		
Accounts payable and accrued expenses	\$ 7,859	\$ 7,366
Accrued pension and post-retirement liability	14,714	16,128
Line of credit	25,107	25,604
Total liabilities	<u>47,680</u>	<u>49,098</u>
Net assets:		
Unrestricted:		
Undesignated	114,779	106,520
Board designated - general reserve	914	1,023
Total unrestricted	<u>115,693</u>	<u>107,543</u>
Temporarily restricted	25,796	23,781
Permanently restricted	65,155	62,833
Total net assets	<u>206,644</u>	<u>194,157</u>
Total liabilities and net assets	<u>\$ 254,324</u>	<u>\$ 243,255</u>

The accompanying notes are an integral part of these consolidated financial statements.

COMMUNITY SERVICE SOCIETY AND AFFILIATES

CONSOLIDATED STATEMENTS OF ACTIVITIES
(in thousands)

	Year ended June 30, 2017				Year ended June 30, 2016			
	Unrestricted	Temporarily restricted	Permanently restricted	Total	Unrestricted	Temporarily restricted	Permanently restricted	Total
Operating revenue and support:								
Government grants	\$ 17,395	\$	\$	\$ 17,395	\$ 16,726	\$	\$	\$ 16,726
Direct contributions and federated campaigns	519	2,128		2,647	759	1,838		2,597
Bequests	316			316	987			987
Program fees and other revenue	143			143	167			167
Investment return used for operations, net	3,243	5,552		8,795	3,526	5,114		8,640
Net assets released from restrictions	10,080	(10,080)			11,584	(11,584)		
Total operating revenue and support	31,696	(2,400)		29,296	33,749	(4,632)		29,117
Operating expenses:								
Program services:								
Direct program services	22,680			22,680	22,429			22,429
Policy, research and advocacy	2,965			2,965	3,250			3,250
Public interest	898			898	925			925
Total program services	26,543			26,543	26,604			26,604
Supporting services:								
Management and general	5,684			5,684	4,893			4,893
Fundraising	1,198			1,198	1,161			1,161
Total supporting services	6,882			6,882	6,054			6,054
Total operating expenses	33,425			33,425	32,658			32,658
Income (deficit) of operating revenue over operating expenses	(1,729)	(2,400)		(4,129)	1,091	(4,632)		(3,541)
Non-operating activities:								
Investment return in excess (deficiency) of amount used for operations, net	7,255	4,415	2,322	13,992	(11,385)	632	(244)	(10,997)
Total non-operating activities	7,255	4,415	2,322	13,992	(11,385)	632	(244)	(10,997)
Change in net assets before pension and post-retirement related charges	5,526	2,015	2,322	9,863	(10,294)	(4,000)	(244)	(14,538)
Pension and post-retirement related charges other than net periodic pension costs	2,624			2,624	(7,519)			(7,519)
Change in total net assets	8,150	2,015	2,322	12,487	(17,813)	(4,000)	(244)	(22,057)
Net assets, beginning of year	107,543	23,781	62,833	194,157	125,356	27,781	63,077	216,214
Net assets, end of year	<u>\$ 115,693</u>	<u>\$ 25,796</u>	<u>\$ 65,155</u>	<u>\$ 206,644</u>	<u>\$ 107,543</u>	<u>\$ 23,781</u>	<u>\$ 62,833</u>	<u>\$ 194,157</u>

The accompanying notes are an integral part of these consolidated financial statements.

COMMUNITY SERVICE SOCIETY AND AFFILIATES
CONSOLIDATED STATEMENTS OF CASH FLOWS
(in thousands)

	Year ended June 30,	
	2017	2016
Cash flows from operating activities:		
Change in net assets	\$ 12,487	\$ (22,057)
Adjustments to reconcile change in net assets to net cash provided (used) by operating activities:		
Depreciation	1,542	1,366
Net realized and unrealized (gain) loss on investments	(15,922)	6,055
(Increase) decrease in beneficial interest in perpetual trusts	(2,322)	244
Pension and post-retirement related changes other than net periodic pension cost	(2,624)	7,519
Bad debt expense	6	9
Changes in operating assets and liabilities:		
(Increase) decrease in:		
Government and other receivables	(2,517)	1,354
Prepaid and other assets	(295)	
Increase in:		
Accounts payable and accrued expenses	493	400
Accrued pension and post-retirement liability	1,210	83
Net cash used by operating activities	<u>(7,942)</u>	<u>(5,027)</u>
Cash flows from investing activities:		
Purchases of investments	(40,807)	(57,261)
Proceeds from sale/maturity of investments	47,014	59,832
Distributions from The United Charities		8,012
Purchases of property and equipment	(40)	(6,250)
Net cash provided by investing activities	<u>6,167</u>	<u>4,333</u>
Cash flows from financing activities:		
New borrowings - line of credit		4,300
Principal repayments	(497)	(396)
Net cash provided (used) by financing activities	<u>(497)</u>	<u>3,904</u>
Net increase (decrease) in cash and cash equivalents	(2,272)	3,210
Cash and cash equivalents, beginning of year	<u>5,673</u>	<u>2,463</u>
Cash and cash equivalents, end of year	<u>\$ 3,401</u>	<u>\$ 5,673</u>

Supplemental Cash Flow Information

Cash paid for interest	<u>\$ 375</u>	<u>\$ 268</u>
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The accompanying notes are an integral part of these consolidated financial statements.

COMMUNITY SERVICE SOCIETY AND AFFILIATES

CONSOLIDATED STATEMENTS OF FUNCTIONAL EXPENSES

(in thousands)

Years Ended June 30, 2017 and 2016

	Program services expenses							
	Direct program services		Policy, research and advocacy		Public interest		Total	
	2017	2016	2017	2016	2017	2016	2017	2016
Salaries	\$ 6,376	\$ 6,534	\$ 1,433	\$ 1,449	\$ 397	\$ 390	\$ 8,206	\$ 8,373
Fringe benefits and payroll taxes	3,187	2,669	722	579	200	158	4,109	3,406
Total salaries and related expenses	9,563	9,203	2,155	2,028	597	548	12,315	11,779
Professional fees	10,689	10,688	422	811	104	160	11,215	11,659
Supplies	55	140	11	15	2	2	68	157
Telephone and communication	152	137	20	21	8	7	180	165
Postage and shipping	24	33	2	2			26	35
Occupancy	374	401	83	115	18	24	475	540
Insurance	8	8	15	14			23	22
Printing and other office expenses	42	47	25	28	6	11	73	86
Transportation	168	180	28	33	1		197	213
Conferences, conventions and meetings	73	128	47	35	18	13	138	176
Direct assistance	401	402					401	402
Support payments	73	86	8	3	109	122	190	211
Equipment rentals and expenses	58	52	14	11	5		77	63
Interest								
Bad debt expense	4	5					4	5
Depreciation	996	919	135	134	30	38	1,161	1,091
Total operating expenses	<u>\$ 22,680</u>	<u>\$ 22,429</u>	<u>\$ 2,965</u>	<u>\$ 3,250</u>	<u>\$ 898</u>	<u>\$ 925</u>	<u>\$ 26,543</u>	<u>\$ 26,604</u>

The accompanying notes are an integral part of these consolidated financial statements.

COMMUNITY SERVICE SOCIETY AND AFFILIATES

CONSOLIDATED STATEMENTS OF FUNCTIONAL EXPENSES

(in thousands)

Years Ended June 30, 2017 and 2016

	Supporting services expenses						Total program and supporting services expenses	
	Management and general		Fundraising		Total		2017	2016
	2017	2016	2017	2016	2017	2016		
Salaries	\$ 2,013	\$ 1,966	\$ 580	\$ 583	\$ 2,593	\$ 2,549	\$ 10,799	\$ 10,922
Fringe benefits and payroll taxes	1,503	930	297	236	1,800	1,166	5,909	4,572
Total salaries and related expenses	3,516	2,896	877	819	4,393	3,715	16,708	15,494
Professional fees	519	576	102	111	621	687	11,836	12,346
Supplies	66	79	3	4	69	83	137	240
Telephone and communication	95	95	6	5	101	100	281	265
Postage and shipping	11	12	22	31	33	43	59	78
Occupancy	138	123	25	34	163	157	638	697
Insurance	133	136			133	136	156	158
Printing and other office expenses	20	19	85	90	105	109	178	195
Transportation	114	137	8	7	122	144	319	357
Conferences, conventions and meetings	171	188	8	3	179	191	317	367
Direct assistance							401	402
Support payments							190	211
Equipment rentals and expenses	190	132	15	10	205	142	282	205
Interest	375	268			375	268	375	268
Bad debt expense	2	4			2	4	6	9
Depreciation	334	228	47	47	381	275	1,542	1,366
Total operating expenses	<u>\$ 5,684</u>	<u>\$ 4,893</u>	<u>\$ 1,198</u>	<u>\$ 1,161</u>	<u>\$ 6,882</u>	<u>\$ 6,054</u>	<u>\$ 33,425</u>	<u>\$ 32,658</u>

The accompanying notes are an integral part of these consolidated financial statements.

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS (in thousands)

June 30, 2017 and 2016

1. Summary of significant accounting policies

This summary of significant accounting policies of Community Service Society of New York (CSS) and its affiliated organizations: Institute for Community Empowerment (Institute); and Friends of R.S.V.P., Inc. (CSS and its affiliates are collectively referred to as the Society), is presented to assist in understanding the Society's consolidated financial statements. The consolidated financial statements and notes are representations of the Society's management, which is responsible for their integrity and objectivity. These accounting policies conform to accounting principles generally accepted in the United States of America as promulgated in *FASB Accounting Standards Codification* (the Codification) and have been consistently applied in the preparation of the consolidated financial statements.

Nature of the Organization

CSS, Institute and Friends of R.S.V.P., Inc. are affiliated through common board control. CSS is a 501(c)(3) not-for-profit corporation operating under a Certificate of Consolidation granted by the State of New York in 1939, merging the New York Association for Improving the Condition of the Poor and The Charity Organization Society of the City of New York. It is a private, nonsectarian, voluntary social service agency. The mission of Community Service Society of New York is to identify problems which create a permanent poverty class in New York City and to advocate the systemic changes required to eliminate such problems. CSS's primary goals are to advocate for better job opportunities to break the cycle of intergenerational poverty that particularly affects communities of color; promote policies and programs that advance the economic security of the poor and working poor; and promote health care reform as an essential strategy for alleviating barriers to employment and economic stability.

The Institute is a 501(c)(4) not-for-profit corporation which was established in November 1988 to perform certain electoral advocacy, research, and lobbying activities with other community-based organizations. The Institute did not engage in any activities during either the years ended June 30, 2017 or 2016.

Friends of R.S.V.P., Inc. is a 501(c)(3) private foundation created in 1986 as a fund-raising vehicle for the Retired and Senior Volunteer Program administered by CSS. On January 23, 2005, the Board of Trustees voted to dissolve the Friends of R.S.V.P. Inc. Implementation of this decision has yet to occur citing the potential of a name change or reorganization.

The Society's primary sources of revenues are contributions, government grants and investment income.

Principles of consolidation

The consolidated financial statements include the accounts of CSS, Institute and Friends of R.S.V.P., Inc. All material intercompany balances and transactions have been eliminated in consolidation.

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(in thousands)

June 30, 2017 and 2016

1. Summary of significant accounting policies (continued)

Basis of presentation

The accompanying consolidated financial statements have been prepared on the accrual basis of accounting in accordance with generally accepted accounting principles. Net assets, revenues, gains and losses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets of the Society and changes therein are classified and reported as follows:

Unrestricted net assets - Net assets that are not subject to donor-imposed stipulations. Included in unrestricted net assets are board-designated funds of \$914 and \$1,023 as of June 30, 2017 and 2016, respectively.

Temporarily restricted net assets - Net assets subject to donor-imposed stipulations that may or will be met, either by actions of the Society and/or the passage of time. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

Permanently restricted net assets - Net assets subject to donor-imposed stipulations that they be maintained permanently by the Society. Generally, the donors of these assets permit the Society to use all or part of the income earned on any related investments for general or specific purposes.

Cash and cash equivalents

Cash consists of demand deposit accounts which are highly liquid financial instruments with maturities of three months or less. Cash equivalents that are held in the Society's investment portfolio are classified as investments and are not considered to be cash for the purposes of the statement of cash flows.

Support and revenue

Contributions, including unconditional pledges, are recorded at fair value as made. All contributions are available for unrestricted use unless specifically restricted by the donor. Conditional pledges are recognized when the conditions on which they depend are substantially met. Donor-restricted contributions are reported as increases in temporarily or permanently restricted net assets depending on the nature of the restrictions. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets. However, if a restriction is fulfilled in the same accounting period the contribution is received, the Society reports the support as unrestricted.

Governmental support is reported in the year earned at net realized amounts for services rendered under reimbursement agreements. Rates under reimbursement agreements are subject to change based on subsequent review by funding agencies. Accordingly, contract support and grants are reported net of estimated retroactive adjustment of rates and may be adjusted in future periods, as final settlements are determined. Rate appeals may also be initiated by the Society; revenues from such appeals are recorded in the period such appeals are determined to be probable of collection. Funds received in periods prior to the cost being incurred are deferred until future periods.

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(in thousands)

June 30, 2017 and 2016

1. Summary of significant accounting policies (continued)

Donated services

The Society records the value of donated facilities or services when there is an objective basis available to measure their value and when they enhance non-financial assets or require a specialized skill which the Organization would otherwise need to purchase.

The Society does not record contribution revenue for the donated services of volunteers, since such services primarily supplement the efforts of the Society's professional staff in providing its essential services. The activities of such volunteers include working with and providing assistance to the elderly and children of minority group families, providing legal and financial assistance to low-income families, serving on advisory committees, and assisting in fundraising activities.

The Society recognized no in-kind donations during either the years ended June 30, 2017 or 2016.

Investment in The United Charities

The investment in The United Charities was recorded on the equity method. The Society received its final distributions from The United Charities during the year ended June 30, 2016 (see note 5).

Beneficial interest in perpetual trusts

The Society has beneficial interests in various perpetual trusts. The Society's interest in these trusts is reported as a contribution in the year received at their fair value. Changes in the fair value of the underlying assets are recognized in permanently restricted non-operating activities on the statement of activities.

Allowance for uncollectible accounts and doubtful pledges

Receivables are charged to bad debt expense when they are determined to be uncollectible based upon a periodic review of client balances by management. Factors used to determine whether an allowance should be recorded include the age of the receivable and a review of payments subsequent to year end. As of June 30, 2017 and 2016, management determined that an allowance was not necessary.

Investments

Investments are recorded at cost, or if donated, at fair value on the date of donation. Thereafter, investments are reported at their fair values in the statements of financial position. The Society invests in various types of investment securities. Investment securities, in general, are exposed to various risks such as interest rate, credit, and overall market volatility risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term, based on the markets' fluctuations, and that such changes could materially affect the amounts reported in the Society's consolidated financial statements. Investment fees are netted against the investment return.

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(in thousands)

June 30, 2017 and 2016

1. Summary of significant accounting policies (continued)

Property and equipment

Property and equipment are stated at cost, if purchased, or if donated, at fair value at the date of gift, less accumulated depreciation. Property and equipment are depreciated on the straight-line basis over the following estimated useful lives:

Building	39 years
Building improvements	15 years
Computer and office equipment	3 - 7 years

The cost of assets sold or otherwise disposed of and the accumulated depreciation thereon are eliminated from the accounts and the resulting gain or loss is reflected in income. Expenditures for maintenance and repairs are charged to expense as incurred; replacements and betterments that extend the useful lives are capitalized.

Fair value of financial instruments

The carrying amounts reported on the consolidated statement of financial position of the Society approximate their fair value.

Use of estimates

The preparation of consolidated financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the consolidated financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Functional allocation of expenses

The costs of providing various programs and support services have been summarized on a functional basis in the statement of activities and in the statement of functional expenses. Accordingly, certain expenses have been allocated among the programs and supporting services based on management's best estimates.

Uncertain tax positions

As of June 30, 2017, management believes that based on evaluation of the Society's tax positions that any liability as a result of uncertain tax positions would not be material. Management continually evaluates expiring statutes of limitations, changes in tax law, and new authoritative rulings to assist in evaluating the Society's tax positions. Accrued interest and penalties associated with uncertain tax positions, if any, would be recognized as part of an income tax provision. Income tax returns are filed only with the U.S. federal jurisdiction as state and local tax returns are not applicable. U.S. federal income tax returns prior to fiscal year 2013 are closed.

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(in thousands)

June 30, 2017 and 2016

1. Summary of significant accounting policies (continued)

Reclassifications

Certain 2016 amounts have been reclassified to conform to the 2017 presentation.

2. Risks and uncertainties

Financial instruments that potentially subject the Society to concentrations of credit risk consist principally of cash, cash equivalents, investments, and governmental and other receivables. The Society maintains its cash in bank deposit accounts, the balances of which, at times, may exceed federally insured limits. Exposure to credit risk is reduced by placing such deposits in high quality financial institutions. The Organization limits its exposure by performing periodic evaluations of the financial institution where it maintains its cash and cash equivalents. Investment securities are exposed to various risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the value of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the financial statements. Concentration of credit risk with respect to receivables is limited due to the fact that they are mainly derived from governmental agencies.

3. Government and other receivables

Government and other receivables consist of the following at June 30:

	2017	2016
Government receivables:		
U.S. Department of Health and Human Services:		
New York State Establishment Exchange Grant	\$ 1,491	\$ 800
Navigator Program Grant	3,095	1,637
ABD Healthcare Program Grant	413	385
	4,999	2,822
Corporation for National and Community Service:		
RSVP Program	195	191
New York State Department of Health:		
ICAN Healthcare Program Grant	3,030	1,412
New York City DOHMH:		
Harlem Healthcare Program Grant	508	468
Other government receivables	626	
Total government receivables	9,358	4,893
Non-government receivables	800	2,754
	<u>\$ 10,158</u>	<u>\$ 7,647</u>

At both June 30, 2017 and 2016, all receivables were expected to be collected within one year.

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(in thousands)

June 30, 2017 and 2016

4. Fair value measurements

The Codification establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets and liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy are as follows:

Level 1 - Inputs that reflect unadjusted quoted prices in active markets for identical assets or liabilities that the Society has the ability to access at the measurement date;

Level 2 - Inputs other than quoted prices that are observable for the assets or liability either directly or indirectly, including inputs that are not considered to be active;

Level 3 - Inputs that are unobservable.

Inputs are used in applying the various valuation techniques and broadly refer to the assumptions that market participants use to make valuation decisions, including assumptions about risk. Inputs may include price information, volatility statistics, specific and broad criteria data, liquidity statistics, and other factors.

An investment's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. However, the determination of what constitutes "observable" requires significant judgment by the Society. The Society considers observable data to be that market data which is readily available, regularly distributed or updated, reliable and verifiable, not proprietary, provided by multiple, independent sources that are actively involved in the relevant market.

The categorization of an investment within the hierarchy is based upon the pricing transparency of the investment and does not necessarily correspond to the Society's perceived risk of that investment.

The following is a description of the valuation methodologies used for assets measured at fair value.

Money market funds, fixed-income securities and equities, and U.S. Government obligations - Valued at the closing price reported on the active market on which the individual securities are traded.

Commingled funds, structured debt fund, and real estate fund - Valued at the net asset value (NAV) of shares held at year end as determined by the managers of the underlying funds.

Alternative investment - There are no observable inputs and certain of the underlying investments are not publicly traded and there is no secondary market for such funds. The funds are valued by the managers of the underlying funds at the NAV of shares held by CSS at year end or other pricing methodologies.

Beneficial interest in perpetual trusts - Beneficial interest in perpetual trusts is valued at fair value of the Society's beneficial interest in the fair value of underlying assets.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Society believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(in thousands)

June 30, 2017 and 2016

4. Fair value measurements (continued)

Investment securities are stated at fair value and are summarized as follows at June 30:

	2017		2016	
	Cost	Fair value	Cost	Fair value
Cash equivalents	\$ 824	\$ 824	\$ 1,010	\$ 1,010
Money market funds	16,994	16,994	1,359	1,359
Fixed income:				
U.S. government and agency	14,188	14,038	15,356	15,581
Corporate bonds	10,305	10,427	10,651	10,897
Mutual funds:				
Equity	24,309	29,966	37,991	39,159
Fixed income	6,065	5,984	4,296	4,313
Alternative investment	8,171	7,978	15,647	13,911
U.S. equity	41,598	44,379	35,100	36,166
Non U.S. equity	25,504	28,434	30,661	29,065
Alternative investment			6,611	6,361
Structured debt fund			190	402
Real estate fund	9,245	8,915		
	<u>\$ 157,203</u>	<u>\$ 167,939</u>	<u>\$ 158,872</u>	<u>\$ 158,224</u>

The classification of the Society's investment securities at fair value are as follows at June 30, 2017 and 2016:

	2017			
	Level 1	Level 2	Level 3	Total
Cash equivalents	\$ 824	\$	\$	\$ 824
Money market funds	16,994			16,994
Fixed income:				
U.S. government and agency	14,038			14,038
Corporate bonds	10,427			10,427
Mutual funds:				
Equity	29,966			29,966
Fixed income	5,984			5,984
Alternative investment			7,978	7,978
U.S. equity	44,379			44,379
Non U.S. equity	28,434			28,434
Alternative investment				0
Structured debt fund				0
Real estate fund			8,915	8,915
	<u>151,046</u>		<u>16,893</u>	<u>167,939</u>
Beneficial interest in perpetual trusts			<u>36,060</u>	<u>36,060</u>
	<u>\$ 151,046</u>	<u>\$</u>	<u>\$ 52,953</u>	<u>\$ 203,999</u>

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

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4. Fair value measurements (continued)

	2016			
	Level 1	Level 2	Level 3	Total
Cash equivalents	\$ 1,010	\$	\$	\$ 1,010
Money market funds	1,359			1,359
Fixed income:				
U.S. government and agency	15,581			15,581
Corporate bonds	10,897			10,897
Mutual funds:				
Equity	39,159			39,159
Fixed income	4,313			4,313
Alternative investment			13,911	13,911
U.S. equity	36,166			36,166
Non U.S. equity	29,065			29,065
Alternative investment			6,361	6,361
Structured debt fund			402	402
Real estate fund				0
	137,550		20,674	158,224
Beneficial interest in perpetual trusts			33,738	33,738
	<u>\$ 137,550</u>	<u>\$</u>	<u>\$ 54,412</u>	<u>\$ 191,962</u>

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

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4 Fair value investments (continued)

The table below sets forth a summary of changes in the fair value of the level 3 assets for the year ended June 30, 2017:

	JPM Structured Debt Fund	Goldman Sachs Tactical TILT Overlay Mutual Fund	Marketfield Fund	BlackRock Strategic Income Opprtnts PTF Inst	BlackRock Allocation Shares Series P	BlackRock Allocation Shares Series A	Legg Mason BW Absolute	Wells Fargo Absolute	DFA Real Estate Securities	DFA International Real Estate Securities	Total	Beneficial Interest in Perpetual	Total
Balance, beginning of year	\$ 402	\$ 6,361	\$ 3,645	\$ 5,810	\$ 1,851	\$	\$ 1,325	\$ 1,280	\$	\$	\$ 20,674	\$ 33,738	\$ 54,412
Purchases						1,964			4,444	4,802	11,210		11,210
Sales	(601)	(6,413)	(3,257)	(2,123)	(21)		(1,323)	(1,307)	(111)	(375)	(15,531)		(15,531)
Fees							3	10	111	375	789		789
Interest/dividend income	15	121		133	21								
Unrealized gains/(losses)				199	112	13				(336)	(12)	2,322	2,310
Realized gains/(loss)	184	(69)	(388)	19			(5)	17	5		(237)		(237)
Net change	(402)	(6,361)	(3,645)	(1,772)	112	1,977	(1,325)	(1,280)	4,449	4,466	(3,781)	2,322	(1,459)
Balance, end of year	\$	\$	\$	\$ 4,038	\$ 1,963	\$ 1,977	\$	\$	\$ 4,449	\$ 4,466	\$ 16,893	\$ 36,060	\$ 52,953

The table below sets forth a summary of changes in the fair value of the level 3 assets for the year ended June 30, 2016:

	JPM Structured Debt Fund	Goldman Sachs Tactical TILT Overlay Mutual Fund	Marketfield Fund	BlackRock Strategic Income Opprtnts PTF Inst	BlackRock Allocation Shares Series P	BlackRock Allocation Shares Series A	Legg Mason BW Absolute	Wells Fargo Absolute	DFA Real Estate Securities	DFA International Real Estate Securities	Total	Beneficial Interest in Perpetual	Total
Balance, beginning of year	\$ 519	\$ 6,517	\$ 4,452	\$ 6,891	\$ 3,443	\$	\$	\$	\$	\$	\$ 21,822	\$ 33,982	\$ 55,804
Purchases		400		858	386		1,353	1,353			4,350		4,350
Sales	(138)	(250)	(301)	(1,657)	(1,718)						(4,064)		(4,064)
Fees							46	17			350		350
Interest/dividend income		287											
Unrealized gains/(losses)	(50)	(577)	(166)	(185)	(144)		(74)	(90)			(1,286)	(244)	(1,530)
Realized gains	71	(16)	(340)	(97)	(116)						(498)		(498)
Net change	(117)	(156)	(807)	(1,081)	(1,592)		1,325	1,280			(1,148)	(244)	(1,392)
Balance, end of year	\$ 402	\$ 6,361	\$ 3,645	\$ 5,810	\$ 1,851	\$	\$ 1,325	\$ 1,280	\$	\$	\$ 20,674	\$ 33,738	\$ 54,412

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
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4. Fair value measurements (continued)

The following table describes the investments that are included in level 3 of the fair value hierarchy.

Fund name	Redemption period	Notice period	Description of fund	2017	2016
<u>Structured Debt Funds:</u>					
JPM Structured Debt Fund	Fund is winding down and distributing remaining assets as they are liquidated	None	The Fund consists of various co-op and commercial mortgages.	\$ _____	\$ 402
<u>Alternative Investments:</u>					
Goldman Sachs Tactical TILT Overlay Mutual Fund			The Fund is an open-end Fund incorporated in USA. The Fund's objective is long-term total return. The portfolio will use investment ideas that are generally derived from short-term or medium-term market views on a variety of asset classes and instrument generated by Goldman.	_____	6,361
<u>Mutual Funds - Alternative Investments:</u>					
Marketfield Fund			The Fund seeks long-term growth of capital above that of the broad equity market over a full market cycle, with volatility that is lower than that of broad equity market. Correlation between the Fund and the broad equity market may vary considerably over the course of an investment cycle. The Fund has a broad investment charter that allows it to allocate its assets among investments in equity securities, fixed-income instruments, commodities, futures, options, and other investment companies, including ETFs.		3,645
BlackRock Strategic Income Opportunities Fund			Employs a flexible investment approach across fixed income sectors without constraints on maturity, sector, quality or geography. The Fund actively manages two main risks in fixed income, interest rate risk and credit risk, to provide a compelling combination of income, low volatility and attractive returns.	4,038	5,810
BlackRock Allocation Shares Series P			The Fund seeks to provide adoration that is the inverse of its benchmark. The fund pursues its investment objectives primarily by engaging in short sales of U.S. Treasury securities and investing in derivative instruments that provide returns that are inverse to those available by investing directly in U.S. Treasury securities. Derivative instruments that the Fund may invest in include: futures, options, forward contacts and/or swaps, including interest rate swaps, swap options and total return swaps. This Fund is non-diversified.	1,963	1,851
BlackRock Allocation Shares Series A			The Fund seeks to provide its unitholders with a balance of long-term capital growth and income by investing in a diversified and balanced portfolio that is comprised of Canadian and global equity securities and, to a lesser extent, Canadian fixed income securities. The Fund will invest primarily in iShares ETFs (or other mutual funds) that are managed by BlackRock Canada or an affiliate (the "underlying funds"), but may also invest directly in fixed income securities, equity securities, and cash or cash equivalents.	1,977	

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
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4. Fair value measurements (continued)

Fund name	Redemption period	Notice period	Description of fund	2017	2016
<u>Mutual Funds - Alternative Investments:</u> (continued)					
Legg Mason BW			The Fund seeks to provide absolute return in any market environment. The Fund invests strategically across global fixed income securities: including sovereign debt, corporate bonds, mortgages, currencies and derivative instruments. Actively manages duration and uses long or short exposures to capture evolving opportunities.	\$	\$ 1,325
Wells Fargo Absolute Return Fund			The Fund is a nontraditional fund that seeks positive total returns-with an emphasis on capital preservation-through tactical allocations to equity, bond, and alternative investments.		1,280
DFA Real Estate Securities			The investment objective of the DFA Real Estate Securities Portfolio is to achieve long-term capital appreciation. The DFA Real Estate Securities Portfolio will concentrate investments in readily marketable equity securities of companies whose principal activities include ownership, management, development, construction, or sale of residential, commercial or industrial real estate.	4,449	
DFA Real Estate International Securities			The investment objective of the DFA International Real Estate Securities Portfolio is to achieve long-term capital appreciation. The Portfolio will concentrate its investments in a broad and diverse set of securities of non-U.S. companies principally engaged in the real estate industry with a particular focus on non-U.S. REITs and companies the Advisor considers to be REIT-like entities.	4,466	
Total mutual funds - alternative investments				<u>16,893</u>	<u>13,911</u>
				<u>\$ 16,893</u>	<u>\$ 20,674</u>

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

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June 30, 2017 and 2016

4. Fair value measurements (continued)

The following schedule summarizes the investment return. The classification of the investment return is reported on the statement of activities.

	<u>2017</u>	<u>2016</u>
Interest and dividend income	\$ 3,343	\$ 3,044
Net realized and unrealized gain (loss) on investments	18,244	(6,299)
Perpetual trust investment income	1,775	1,537
Less investment management fees	<u>(575)</u>	<u>(639)</u>
	<u>\$ 22,787</u>	<u>\$ (2,357)</u>

Consistent with the Society's spending policy for the years ended June 30, 2017 and 2016, \$8,795 and \$8,640 was appropriated and spent, respectively.

5. Related party transactions

The Society has a 50% undivided interest in the ownership The United Charities (the Corporation), a charitable corporation which was organized to provide a center in which certain benevolent organizations, including the Society, would maintain their headquarters.

During the year ended June 30, 2015, the Corporation sold its building at 105 East 22nd Street. The Society received its final distributions during the year ended June 30, 2016. As of June 30, 2017, the Corporation is in the process of dissolution.

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
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June 30, 2017 and 2016

6. Property and equipment

Property and equipment consists of the following at June 30:

	2017	2016
Land	\$ 5,035	\$ 5,035
Building and improvements	32,042	32,019
Computer and office equipment	1,691	1,674
	38,768	38,728
Less accumulated depreciation	2,908	1,366
	<u>\$ 35,860</u>	<u>\$ 37,362</u>

Depreciation expense was \$1,542 and \$1,366 for the years ended June 30, 2017 and 2016, respectively.

7. Temporarily restricted net assets and net assets released from restrictions

Temporarily restricted net assets are available for the following purposes at June 30:

	2017	2016
Direct service programs	\$ 22,793	\$ 21,523
Policy research and advocacy	642	271
Public interest	437	
Program administration	613	676
Unappropriated investment income from endowments	1,311	1,311
	<u>\$ 25,796</u>	<u>\$ 23,781</u>

Temporarily restricted net assets were released from donor restrictions by incurring expenses satisfying the restricted purposes or by the passage of time. The net assets released from restriction for the years ended June 30, 2017 and 2016 were as follows:

	2017	2016
Direct service programs	\$ 6,097	\$ 6,237
Policy research and advocacy	2,688	3,142
Public interest	901	886
Management and general	394	1,319
	<u>\$ 10,080</u>	<u>\$ 11,584</u>

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

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8. Permanently restricted net assets

Community Service Society of New York and Affiliates' endowment consists of individual donor-restricted endowment funds established for Direct Service Programs. As required by accounting principles generally accepted in the United States of America, net assets associated with the endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions. The Board of Directors of the Society is responsible for the long-term investment policies for donor-restricted endowment funds, unless otherwise specified by the donor.

The Board of Directors of Community Service Society of New York and Affiliates has adopted the New York Prudent Management of Institutional Funds Act (NYPMIFA). NYPMIFA moves away from the "historic dollar value" standard, and permits charities to apply a spending policy to endowments based on certain specified standards of prudence. The Society is now governed by the NYPMIFA spending policy, which establishes a maximum prudent spending limit of 7% of the average of its previous five years' balance. As a result of this interpretation, the Society classifies as permanently restricted net assets (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent gifts to the permanent endowment, and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund that is not classified in permanently restricted net assets is classified as temporarily restricted net assets until those amounts are appropriated for expenditure by the organization in a manner consistent with the standards of prudence prescribed by NYPMIFA.

Permanently restricted net assets consist of the following at June 30:

	<u>2017</u>	<u>2016</u>
Endowment:		
Direct service program:		
Income restricted for specific purposes	\$ 4,741	\$ 4,741
Income restricted for program administration	455	455
Income available for general purposes	<u>23,899</u>	<u>23,899</u>
Total endowment	<u>29,095</u>	<u>29,095</u>
Beneficial interest in perpetual trusts - income restricted	14,854	13,966
Beneficial interest in perpetual trusts - income unrestricted	<u>21,206</u>	<u>19,772</u>
Total beneficial interest in perpetual trusts	<u>36,060</u>	<u>33,738</u>
	<u>\$ 65,155</u>	<u>\$ 62,833</u>

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

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June 30, 2017 and 2016

8. Permanently restricted net assets (continued)

Return objectives, strategies employed and spending policy

The overall financial objective of the endowment is to provide the operations of the Society with a relatively stable stream of spendable revenue that increases over time and matches the general rate of inflation, as measured by the Consumer Price Index.

The long-term investment objective for the total endowment is to attain a total return (net of investment management fees) of at least 6% per year in excess of inflation. This objective assumes that withdrawals from the Fund will average, long term, no more than 6% of the Fund's value over time.

Funds with deficiencies

The Society does not have any funds with deficiencies.

Changes in endowment net assets for the year ended June 30, 2017 are as follows:

	Temporarily restricted	Permanently restricted	Total
Investment return:			
Interest and dividend income	\$ 672	\$	\$ 672
Realized gain	702		702
Unrealized gain	1,961		1,961
Total investment return	3,335		3,335
Appropriation of endowment assets for expenditures	(3,335)		(3,335)
Net change			
Endowment net assets, beginning of year	1,311	29,095	30,406
Endowment net assets, end of year	\$ 1,311	\$ 29,095	\$ 30,406

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

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8. Permanently restricted net assets (continued)

Changes in endowment net assets for the year ended June 30, 2016 are as follows:

	Temporarily restricted	Permanently restricted	Total
Investment return:			
Interest and dividend income	\$ 624	\$	\$ 624
Realized loss	(419)		(419)
Unrealized loss	(791)		(791)
Total investment return	(586)		(586)
Appropriation of endowment assets for expenditures	(624)		(624)
Net change	(1,210)		(1,210)
Endowment net assets, beginning of year	2,521	29,095	31,616
Endowment net assets, end of year	\$ 1,311	\$ 29,095	\$ 30,406

9. Line of credit

The Society has a \$26,000 revolving line of credit with a financial institution that bears interest at LIBOR plus 0.70% per annum. The loan is secured by certain investments and expires on November 10, 2018. Amounts outstanding at June 30, 2017 and 2016 were \$25,107 and \$25,604, respectively.

Interest expense incurred under the facility amounted to \$375 and \$268 for the years ended June 30, 2017 and 2016, respectively.

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

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10. Commitments and contingencies

The Society leases various equipment and automobiles under operating leases which expire through December 2018. Rent expense for these leases were \$78 and \$61 for the years ended June 30, 2017 and 2016, respectively.

Minimum annual rental commitments for the remaining term of the Society's noncancelable operating leases are as follows:

Year ending June 30:	
2018	\$ 78
2019	26
	<u>\$ 104</u>

11. Employee benefit plans

Pension plan and other post-retirement benefits

The Society has a noncontributory defined benefit pension plan (DB plan) covering substantially all employees. The Society also maintains life insurance benefits and contributory group medical benefits for full-time employees (i.e., those who worked 30 hours or more per week) employed prior to July 1, 1978 who retired at or after age 55 and were not covered by the terms of the collective bargaining agreement providing health benefits through the 1199 National Benefit Fund. The Society is required to accrue the estimated cost of these retiree benefit payments during the employees' active service period. The Society pays the cost of post-retirement benefits as incurred.

The following tables summarize each plan's funded status at June 30:

	2017		
	Pension benefits	Other benefits	Total
Projected benefit obligation	\$ (48,387)	\$ (721)	\$ (49,108)
Fair value of plan assets	34,394		34,394
Funded status - recognized in the statement of financial position	<u>\$ (13,993)</u>	<u>\$ (721)</u>	<u>\$ (14,714)</u>
	2016		
	Pension benefits	Other benefits	Total
Projected benefit obligation	\$ (46,869)	\$ (894)	\$ (47,763)
Fair value of plan assets	31,635		31,635
Funded status - recognized in the statement of financial position	<u>\$ (15,234)</u>	<u>\$ (894)</u>	<u>\$ (16,128)</u>

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11. Employee benefit plans (continued)

The following table provides information about the weighted average assumptions during the years ended June 30:

	Pension benefits		Other benefits	
	2017	2016	2017	2016
Weighted-average assumptions as of June 30:				
Discount rate	3.75%	3.50%	3.75%	3.50%
Expected return on plan assets	7.25%	7.25%	N/A	N/A
Rate of compensation increase	4.50%	4.50%	N/A	N/A

The following table provides information about the contributions to the Plans and benefits paid for the years ended June 30:

	2017			2016		
	Pension benefits	Other benefits	Total	Pension benefits	Other benefits	Total
Society's contributions	\$ 900	\$ 173	\$ 1,073	\$ 900	\$ 161	\$ 1,061
Employee's contributions	\$	\$ 2	\$ 2	\$	\$ 2	\$ 2
Benefits paid	\$ 1,640	\$ 175	\$ 1,815	\$ 1,231	\$ 163	\$ 1,394

The accumulated benefit obligation for the defined benefit pension plan was \$42,738 and \$41,691 at June 30, 2017 and 2016, respectively.

Mortality table: RP2000 Annuitant and Non-Annuitant table used for both pension and other benefits.

For 2017 and 2016, an assumed long-term rate of return of 7.25% and 7.8% was used for the pension plan. In developing this rate, the Society evaluated input from its actuaries on asset class return expectations and long-term inflation.

For measurement purposes with respect to other benefits, a 6.9% and 7.8% health care cost trend rate was assumed for 2017 and 2016, respectively.

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11. Employee benefit plans (continued)

Amounts recognized as changes in unrestricted net assets, but not yet included in net periodic benefit cost, consist of following at June 30, 2017:

	<u>Pension benefits</u>	<u>Other benefits</u>	<u>Total</u>
Beginning balance of cumulative pension related changes other than net periodic pension cost	\$ (16,265)	\$ (181)	\$ (16,446)
Changes:			
Amortization	1,487	1	1,488
Asset gain	1,108	28	1,136
Net change	2,595	29	2,624
Ending balance of cumulative pension related changes other than net periodic pension cost	<u>\$ (13,670)</u>	<u>\$ (152)</u>	<u>\$ (13,822)</u>

Amounts recognized as changes in unrestricted net assets, but not yet included in net periodic benefit cost, consist of following at June 30, 2016:

	<u>Pension benefits</u>	<u>Other benefits</u>	<u>Total</u>
Beginning balance of cumulative pension related changes other than net periodic pension cost	\$ (8,883)	\$ (44)	\$ (8,927)
Changes:			
Amortization	584	(19)	466
Asset loss	(7,966)	(118)	(7,985)
Net change	(7,382)	(137)	(7,519)
Ending balance of cumulative pension related changes other than net periodic pension cost	<u>\$ (16,265)</u>	<u>\$ (181)</u>	<u>\$ (16,446)</u>

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11. Employee benefit plans (continued)

The components of net pension cost and net post-retirement benefit cost are as follows for the years ended June 30:

	2017		
	Pension benefits	Other benefits	Total
Service costs	\$ 1,338	\$	\$ 1,338
Interest cost	1,673	27	1,700
Expected return on assets	(2,245)		(2,245)
Net amortization and deferral	1,485	(9)	1,476
Amortization of prior service cost	2	10	12
Net cost	<u>\$ 2,253</u>	<u>\$ 28</u>	<u>\$ 2,281</u>

	2016		
	Pension benefits	Other benefits	Total
Service costs	\$ 1,167	\$	\$ 1,167
Interest cost	1,680	40	1,720
Expected return on assets	(2,305)		(2,305)
Net amortization and deferral	581	13	594
Amortization of prior service cost	3	(33)	(30)
Net cost	<u>\$ 1,126</u>	<u>\$ 20</u>	<u>\$ 1,146</u>

The future expected benefits to be paid for the plans are as follows for the years ended June 30:

	Pension benefits	Other benefits	Total
2018	\$ 1,657	\$ 117	\$ 1,774
2019	1,916	101	2,017
2020	2,061	93	2,154
2021	2,122	84	2,206
2022	2,235	72	2,307
2023 - 2027	12,658	240	12,898
	<u>\$ 22,649</u>	<u>\$ 707</u>	<u>\$ 23,356</u>

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
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June 30, 2017 and 2016

11. Employee benefit plans (continued)

403(b) Plan

In addition, the Society has established a 403(b) plan for all employees; however, only non-union employees are eligible to participate for purposes of matching contributions. The Society matches employee contributions to the plan at a rate of 50% up to the first 6% of each employee's salary. Salary deferrals in excess of \$10,000 are not matched. The Society's contributions to the plan were \$160 and \$167 respectively, during the year ended June 30, 2017 and 2016.

12. Government grants and contracts

The Society operates under various contracts with government agencies which generally cover a one-year period, subject to annual renewals. The terms of these contracts allow the grantors the right to audit the costs incurred thereunder and adjust contract funding based upon the amount of program income received. Any costs disallowed by the grantor would be absorbed by the Society and any adjustments by grantors would be recorded when amounts are known, however, it is the opinion of management that disallowances, if any, would be immaterial and adjustments, if any, would not have a material adverse effect on the financial position of the Society.

13. Significant source of support

The Society received approximately 77% and 73% of its operating revenue and support, excluding investment returns, for the years ended June 30, 2017 and 2016, respectively, from New York State agencies. Amounts due the Society from these agencies were \$9,358 and \$4,369 at June 30, 2017 and 2016, respectively. Contracts with the funding agencies were renewed at comparable amounts for the upcoming fiscal year.

14. Collective bargaining agreement

Certain employees are covered by a collective bargaining agreement. The agreement with 1199 SEIU United Healthcare Workers East is effective through December 31, 2019. Payments made to the National Benefits fund for the years ended June 30, 2017 and 2016 were \$666 and \$530, respectively.

15. Subsequent events

Subsequent events have been evaluated through October 31, 2017, which is the date the consolidated financial statements were available to be issued. All subsequent events requiring recognition or disclosure as of June 30, 2017, have been incorporated into these consolidated financial statements.